

**APPLICATION FOR A MARINE PILOTAGE EXEMPTION CERTIFICATE
(Marine Safety Act 1998)**

I, _____
(Name in block letters)

Of _____
(Address)

Hereby apply for a Marine Pilotage Exemption Certificate for the Port of: **SYDNEY / BOTANY**

in relation to the Vessel: _____ LOA: _____ m

Attached are the following:

Item	Tick
Copy of a valid Certificate of Competency that authorises the applicant to be Master of the vessel to which the application relates	
Copy of a valid Certificate Of Medical Fitness that is required by the Certificate of Competency above	
Evidence of pilotage passages into and out of the port to each of the berths applied for	
Evidence of supervised pilotage passages into and out of the port to each of the berths applied for	
Evidence of completion of induction training for the port	
Evidence of passages as observer on a tug	
Payment of \$528.00	

Please complete all below information print and sign

E-mail: _____ Phone: _____

Date of Birth: _____ Employer: _____

Have you previously failed a Pilotage Examination for either Sydney or Botany? **Yes / No**

If yes, details _____

Signature of Applicant: _____ Date: _____

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