

# Marine Licence Application

(See notes on page 3)



This application is for: (please tick  one box)

Certificate of Competency

Amendment of a Marine Licence

STCW95 Endorsement Review

Certificate of Recognition

Revalidation of a Marine Licence

Change of Address

**Please note**— Current photographs are required for these applications.

Class of licence for which this application applies

File number (if known)

## Applicant's details

Family name (please PRINT)

Given name/s

Postal address

Postcode

Residential address (if the same postal address write "as above")

Postcode

Contact phone number

Mobile phone number

E-Mail address

Height

 cm

Eye colour

Hair colour

Gender

Male

Female

Date of birth

 / /

Driver Licence number / CRN (Customer Reference Number)

Place of birth (Town, State, Country)

## Particulars of Marine Licences held

Number	Grade	Issuing authority	Date issued	Expiry date	Endorsements	Ever suspended or cancelled (state why)

## Record of Service Book

Date issued

 / /

Place issued

Official book number

## Record of Practical Experience at Sea (ROPES) book

Date issued

 / /

Place of issue

Official book number

## Workplace based task book details (issued by RTO)

Date issued

 / /

Place of issue

Official book number

## Notification of Sea Service Assessment

Date of assessment Qualification level

 / /

## Details of Eyesight Certificate (Original certificate to be sighted)

Date issued

 / /

Doctor / optometrist

Contact phone number

 ( )

## Certificate of Medical Fitness (Original certificate to be sighted)

Date issued

 / /

Doctor

Contact phone number

 ( )

## Applicant's declaration:

I (please PRINT).....hereby declare that the particulars entered in this application are true and correct to the best of my knowledge and belief, and that the documents submitted with this application are true and genuine documents signed by the persons whose name/s appear on them. I make this declaration knowing that it is an offence under the *Transport Operations (Marine Safety) Act 1994* for a person to give to the Chief Executive, the General Manager or an officer of the department or of Maritime Safety Queensland, a document containing information the person knows is false or misleading in a material particular. Maximum penalty \$15,000.

Applicant's signature

Witnessed by (please print)

Witness signature

Date

 / /

- Two (2) current passport size identical colour photographs must be supplied and attached to page 3 of this application
- Two specimen signatures are also required on page 3

**This page is for Office Use Only**

**Training**

Evidence	Training provider	Date	Sighted

**Assessor's notes (Sighted and verified)**      ROS Book       ROPES Book       Workplace task book

Notification of Sea Service Assessment (copy attached) issued at— On—  
 /  /


**Examination results**

	Pass/ Fail	Examiner's initials	Date	Exam centre	Resit date	Pass/ Fail	Examiner's initials	Exam centre
Deck oral								
Engineering oral								

**Assessor's declaration**

This candidate has met all requirements for the issue/ revalidation/ amendment (delete as required) of a certificate of competency/ recognition (delete as required) as—


The relevant oral assessment form has been completed. A copy of the relevant Certificate issued under TDM07, or copies of Statements of Attainment for completed competency-based units under TDM01, is/are attached to this application. Being a delegated officer under section 102(1) *Transport Operations (Marine Safety) Regulation 2004* to conduct such assessments/ examinations, I recommend that the Certificate of Competency/ Revalidation be issued/ amended.

Marine assessor's name (please PRINT)	Date	Stamp
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>
Signature	Centre	
<input type="text"/>	<input type="text"/>	

Receipt number	Receipt date	Amount	Examination centre
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>
Temporary authority issued <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	Number	Date issued	Copy attached
	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>

**Head Office Use Only**

Entered to MLS on	Data Entry Open Initials	MLS Certificate number	Date posted	Checked/Authorised by
<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>

## Guide to completing this application

### Application for Certificate of Competency

- Fully complete page one of this application and Applicant's Declaration.
- Notification of Sea Service Assessment.
- Provide two specimen signatures in the boxes provided below making sure the signatures are completely inside the boxes provided.
- The following must be lodged with this application:
  - Two (2) passport size photographs (*see note on photographs below*).
  - Provide a current Certificate of Medical Fitness including an eyesight test as defined in *Medical Fitness Standards (USL Schedule 1)* valid for 2 years.
  - Proof of Identity (*please obtain and refer to form F4362*).
- Other prerequisites relevant to the class of licence as described in Notes for the Guidance of Candidates.
- Pay the prescribed fee (*the fee is subject to change*).

### Application for a Certificate of Recognition

- Complete page 1 and the "Applicant's declaration".
- Provide two specimen signatures in the boxes provided below making sure the signatures are completely inside the boxes provided.
- Two (2) passport size photographs (*see note on photographs below*).
- A copy of the original licence certified by a Justice of the Peace, Commissioner of Declarations or official of a Marine Authority or other official should accompany this application.
- Pay the prescribed fee (*the fee is subject to change*).

### Application for Amendment/Renewal of a Marine Licence

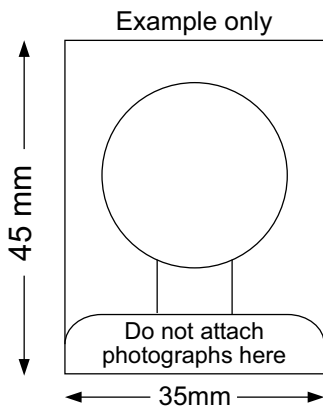
- Complete pages of this application.
- Other prerequisites may apply (*please contact your local Marine Operations Centre for further information*).
- The original licence must accompany this application.
- Pay the prescribed fee (*the fee is subject to change*).

### Application for Replacement

- You cannot use this form to obtain a replacement for a lost or damaged licence.
- To apply for a replacement licence obtain and complete form F4292.
- You must prove your identity. Please obtain and refer to form F4362. Please refer to evidence of identity on the said form.

Evidence of Identity documents provided

	Document	Numbered
1.		
2.		
3.		



Specimen signature

Specimen signature

### Photographs

- We require two (2) passport size identical colour photographs of you.
- The photographs should be a full front view of your head and shoulders without any head covering or tinted glasses and have a plain, light coloured background.
- The photographs must be less than 1 year old.
- Poor quality photographs and digital photographs will not be accepted.

### Other Information

- Notes for the Guidance of Candidates for each grade of licence are available from your local Marine Operations Centre. Locations can be found at [www.msq.qld.gov.au](http://www.msq.qld.gov.au) - "Contact Us".

#### Privacy Disclaimer

The Department of Transport and Main Roads collect information on this form under the *Transport Operations (Marine Safety) Act 1994* to manage the Queensland commercial licence registers. This information is accessible by authorised departmental officers and the Queensland Police Service. Information about commercial licence holders may also be disclosed to ship insurers, statutory entities, lawyers, insolvency entities, persons involved in ship accident/incidents, and to or through interstate licensing authorities. The Department of Transport and Main Roads will not disclose your personal details to any other third parties without your consent or unless required by law.