



Marine Safety

Change of Name and Address

Please note that a residential/business address must be supplied.

Business with the Department of Transport

Please list all the business areas where you have dealings with Transport.

- Private Boat Registration No. _____
- Commercial Vessel Name _____ M&H No. _____
- Certificate of Competency/Proficiency Title _____ Number _____
- Recreational Skippers Ticket Number _____
- Transport Pen/Mooring Location _____ Number _____
- Land lease Location _____
- Jetty Licence Location _____ Jetty No. _____
- Other Details _____

Change of address (please provide a business or residential address **not** a PO Box number).

Name

Surname/Company _____ Other Names _____

Email address: _____

Previous

Previous Address _____

Suburb _____ Postcode _____

Previous Postal Address _____

Suburb _____ Postcode _____

Current

Current Address _____

Suburb _____ Postcode _____

Telephone (Business hours) _____ (After hours) _____

Current Postal Address _____

Suburb _____ Postcode _____

Change of name details (a copy of the official Change of Name Certificate must be provided)

Previous Surname/Company _____ Other Names _____

Current Surname/Company _____ Other Names _____

Declaration

I hereby declare that the above information contained in this form is, to the best of my knowledge, true and correct.

Signature/s: _____ **Date:** ____/____/____

Please return this form to the **Department of Transport**

1 Essex Street, PO Box 402, Fremantle, Western Australia 6959, Telephone: 1300 863 308

Email: Boat.Registrations@transport.wa.gov.au

Fax: (08) 9435 7817

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