



Australian Government

Australian Maritime Safety Authority

APPLICATION FOR A CERTIFICATE OF OPERATION

*Marine Safety (Domestic Commercial Vessel) National Law Act 2012, Schedule 1
Marine Order 504 (Certificates of Operation – national law) 2013*

Attachments/Declarations

As part of the application you must:

For each vessel to be considered in this application:

- Attach a certified copy of the most recent certificate of survey or registration issued by an Australian Marine Safety Agency; or
- Sign a Declaration that the vessel complies with the General Safety Requirements for Vessels (NSCV Part G).

And:

- Where available, attach a copy of the owner's Safety Management System for the proposed operation.

And:

- Sign the declaration at the applicable part (1A or 1B) of Section 1 in this application.

And:

- Attach any additional pages that may be required by Section 4 to explain the applicant's status.

And:

- Sign the declaration at Section 5 in this application.

Guidance on filling in this application

Section	Comment
General	All applicants are required to complete all sections
Section 1 Applicant details	Complete either part 1A (individuals/sole traders) or part 1B (companies) and the declaration included
Section 2 Operations	Please complete this section to identify the operations the applicant will run
Section 3 Vessels	Please complete this section to identify the vessels the applicant will use in the operations
Section 4 Applicant status	Please complete this section to describe the applicant's status
Section 5 Declaration and signature	All applicants are required to complete this section

Section 1 Applicant details

Please complete either 1A or 1B.

Individuals/Sole traders

Title (Mr, Mrs, Dr, etc.)	Surname
<input type="text"/>	<input type="text"/>

Given names

Trading name
 Same name as specified above OR specify trading name

Street Address

Street number and name		
Town/suburb	State	Postcode

Country
 Australia OR specify other

Postal Address
 Same as address above OR specify different address

Street number and name/PO Box		
Town/suburb	State	Postcode

Country
 Australia OR specify other

Contact numbers

Business	Mobile
Fax	Email

Declaration for individuals/sole traders

I make the following declaration as:

Name, address and occupation of person making the declaration

1. I have the capability and capacity to comply with the requirements of the *Marine Safety (Domestic Commercial Vessel) National Law Act 2012* and the subordinate legislation of that Act, that will apply to the operations authorised by the certificate of operation for which I have applied; and

2. I have a system for:

- Identifying the hazards affecting the safety of the operations authorised by the certificate of operation for which I have applied; and
- Assessing the risks associated with those hazards, in terms of likelihood and severity; and
- Taking remedial action or mitigation measures to reduce the level of risk to as low as reasonably practicable; and

3. I understand that the certificate of operation for which I have applied will be subject to conditions, one of which is that I must continuously maintain the capability and capacity described at paragraph (1) and the system described at paragraph (2); and

4. I understand that failure to comply with a condition imposed on the certificate of operation for which I have applied may be grounds on which the National Regulator may vary, suspend or revoke the certificate, issue an infringement notice or commence prosecution action.

I understand that giving false or misleading information is a serious offence*.

Signature of person making the declaration

Declared at _____
Place

on the _____ of _____ of _____
Day Month Year

*section 137.1 Criminal Code Act 1995

Companies

Name

ACN/Registration Number/ABN

Trading name
 Same name as specified above OR specify trading name

Street Address

Street number and name		
Town/suburb	State	Postcode

Country
 Australia OR specify other

Postal Address
 Same as address above OR specify different address

Street number and name/PO Box		
Town/suburb	State	Postcode

Country
 Australia OR specify other

Contact numbers

Business	Mobile
Fax	Email

ACN/Registration Number/ABN

I _____

Name, residential address of person making the declaration

make the following declaration in my capacity as a duly authorised [sole] director of _____ Pty Ltd, (ACN _____), having a registered office address _____

Full registered office address

hereafter referred to as "**the company**".

1. The company has the capability and capacity to comply with the requirements of the *Marine Safety (Domestic Commercial Vessel) National Law Act 2012* and the subordinate legislation of that Act, that will apply to the operations authorised by the certificate of operation for which the company has applied; and

2. The company has a system for:

- Identifying the hazards affecting the safety of the operations authorised by the certificate of operation for which the company has applied; and
- Assessing the risks associated with those hazards, in terms of likelihood and severity; and
- Taking remedial action or mitigation measures to reduce the level of risk to as low as reasonably practicable; and

3. The company understands that the certificate of operation for which the company has applied will be subject to conditions, one of which is that the company must continuously maintain the capability and capacity described at paragraph (1) and the system described at paragraph (2); and

4. The company understands that failure to comply with a condition imposed on the certificate of operation for which the company has applied may be grounds on which the National Regulator may vary, suspend or revoke the certificate, issue an infringement notice or commence prosecution action.

I understand that giving false or misleading information is a serious offence*.

Signature of person making the declaration

Declared at _____
Place

on the _____ of _____ of _____
Day Month Year

*section 137.1 Criminal Code Act 1995, section 1308 Corporations Act 2001

Section 2 Operations

Provide details of the vessel use, area of operation and operation description relevant to the vessel use, using the following definitions from National Standard for Commercial Vessels Part B, and the examples shown below.

Operation Number	Service Category		Operation Description	Limits and conditions
	Vessel Use	Area of Operation		
Ex. 1	4	D	Houseboat	Day light hours only (Example)
Ex. 2	2	C	Fishing Charter	Daylight Hours; Wave Height 3m (Example)
1				
2				
3				
4				
5				
6				
7				
8				

Vessel Use (number)

- 1 – Passenger vessels carrying more than 12 passengers.
- 2 – Trading vessels carrying up to 12 passengers.
- 3 – Fishing operations.
- 4 – Hire and drive vessels.

Area of operation (letter)

- A – Unlimited operations or coastal and middle waters within a limit of 600 nautical miles to seaward.
- B – Offshore waters within a limit of 200 nautical miles to seaward or near offshore waters within a limit of 100 nautical miles to seaward.
- C – Restricted offshore waters within a range of 30 nautical miles from the seaward limit of a safe haven or inshore waters within a limit of 15 nautical miles to seaward.
- D – Sheltered waters – partially smooth waters and smooth waters.
- E – Sheltered waters – smooth waters and inland waters.

Limits and conditions

Provide a more detailed description of where the vessel will operate.

For example: 30 nautical miles seaward of the NSW coast; or local waters in East Arm Port Darwin.

Section 3 Vessels

Complete this section by specifying the vessels and any tenders or auxiliary vessels that will be operated.

Row #	Does this Vessel have a Vessel ID?		Vessel Name	Vessel Type	Operation(s) (Please enter the applicable item number(s) from Section 2)	Measured Length (Metres)	Construction Material	No. of Hulls	Propulsion Power (Kilowatts)	Does this vessel have a petrol inboard?	If this vessel has operated in Australia before, please name the State, NT or enter N/A	Does this vessel have a current Certificate of Survey or Registration?
	Yes	No										
<i>E.g.</i>	<i>MV123</i>	<input type="checkbox"/>	<i>SS Minnow</i>	<i>Houseboat</i>	<i>Ex. 1</i>	<i>7.4 m</i>	<i>Timber</i>	<i>1</i>	<i>100kW</i>	<i>No</i>	<i>VIC</i>	<i>No</i>
<i>E.g.</i>	<i>-</i>	<input checked="" type="checkbox"/>	<i>SS Whale</i>	<i>Motorboat</i>	<i>Ex. 2</i>	<i>13.2 m</i>	<i>Aluminium</i>	<i>1</i>	<i>100kW</i>	<i>No</i>	<i>QLD</i>	<i>Yes</i>
1.		<input type="checkbox"/>										
2.		<input type="checkbox"/>										
3.		<input type="checkbox"/>										
4.		<input type="checkbox"/>										
5.		<input type="checkbox"/>										
6.		<input type="checkbox"/>										
7.		<input type="checkbox"/>										
8.		<input type="checkbox"/>										
9.		<input type="checkbox"/>										
10.		<input type="checkbox"/>										
11.		<input type="checkbox"/>										
12.		<input type="checkbox"/>										
13.		<input type="checkbox"/>										
14.		<input type="checkbox"/>										
15.		<input type="checkbox"/>										

Section 4 Applicant status

The applicant must answer the following questions, before consideration of this application may be undertaken by the National Regulator or its Delegate. Tick either YES or NO for each of the questions below.

- 1 Have you been convicted for offence(s) under the National Law? Yes No
- 2 Have you been convicted for offence(s) against a law of the Commonwealth, a State or a Territory that is relevant for the purposes of deciding whether you are suitable to hold the certificate being applied for? Yes No
- 3 Have you had a similar certificate, issued under a law of the Commonwealth or a State or Territory, suspended, revoked or cancelled? Yes No
- 4 Are you suffering from a medical condition or are you aware of a physical or mental incapacity that may make you unsuitable to hold or to continue to hold the certificate? Yes No
- 5 Have you been found to be, "not a fit and proper person" under a law? Yes No
- 6 Is the applicant an undischarged bankrupt or insolvent? Yes No
- 7 Does the applicant have unpaid court-imposed fines? Yes No
- 8 Has the applicant been disqualified from managing corporations under Part 2D.6 of the Corporations Act 2001? Yes No
- 9 Has the applicant been subjected to any civil penalties imposed under the regulations? Yes No

If the answer to any of the questions 1-9 above is "YES" please provide further details here (continue on a separate page if necessary)

Section 5 Applicant's declaration and consent

I declare that:

- to the best of my knowledge the information provided by me in this application (and any attachments I have included with this application) is true and correct.
- I consent to the Australian Maritime Safety Authority, as the National Regulator, making all reasonable enquiries in order to verify that the information provided by me in this application (and any attachments I have included with this application) is true and correct.
- I understand and acknowledge that the Australian Maritime Safety Authority, as the National Regulator, may ask that I provide any information or document that the National Regulator reasonably considers necessary for consideration of this application.
- I understand and acknowledge that the Australian Maritime Safety Authority, as the National Regulator, may ask another person to provide any information, document or agreement that the National Regulator reasonably considers necessary for consideration of this application.
- I understand and acknowledge that a person is guilty of an offence under section 137.1 of the *Criminal Code Act 1995* if the person gives false or misleading information, or omits anything without which the information is misleading to a Commonwealth entity; a person who is exercising powers or performing functions under a law of the Commonwealth, or the information is given in compliance or purported compliance with a law of the Commonwealth.

Signature

Name

Date

Privacy Statement

The purpose of collecting this information is to allow the National Regulator to decide whether to issue a Certificate of Operation under s.48(1) of Schedule 1 of the *Marine Safety (Domestic Commercial Vessel) National Law Act 2012*. This information may be passed to Commonwealth or State/Territory government agencies for the purposes of marine safety.

How to lodge

Take or send your completed application and attachments to your local Marine Safety Agency. Details are available at www.nationalsystem.amsa.gov.au.

Payment of fees

Please contact your local Marine Safety Agency for details of fees, when and how to pay them.

What happens next?

Your Local Marine Safety Agency will advise the next steps in the certification process, together with any further information you may be required to provide.

Further information

For further information please contact your local Marine Safety Agency or www.nationalsystem.amsa.gov.au.