

APPLICATION FOR A PRIVATE MOORING LICENCE

Important: To obtain a private mooring licence the applicant must:-

- → Be the sole owner or at least the equal majority shareholder and Registered Controller or the intended controller of the vessel to be attached to the mooring.
- → Be aware that the vessel must be at least 5.2 metres in length, unless otherwise approved by the NSW Maritime.
- → Provide Proof of Identity (POI) and pay the prescribed fee. For a full list of acceptable POI requirements, current fees and further information please contact the NSW Maritime on 13 12 56 (8:30am to 4:30 pm) 7 days a week. For all other areas please call (02) 9563 8557.
- → Complete the Statutory Declaration on Vessel Ownership (see overleaf) at the time mooring licence is issued.
- → Complete the Representative's Authority section (overleaf) if authorising another person to apply for the mooring licence in your name.

DETAILS OF APPLICANT
Location Required (One mooring area only per application)
SurnameGiven Names
Male Female Date of Birth
Residential Address
SuburbP/code
Postal Address
SuburbP/code
Telephone PrivateBusinessMobile
FaxE-mail
CONCESSION DETAILS (If applicable) Pensioner concession requested? Yes □ No □ In order to qualify you must hold one of the following: → Current Pensioner Concession Card issued by Centrelink or Department of Veterans' Affairs. → Current Repatriation Health Card issued by Department of Veterans' Affairs. Pension Number □ Date of Grant □ Use of Grant □ Use of Grant □ Use of Grant □ Use of Grant Use of
Please note that all information in relation to your concession details will be matched with Centrelink records.
CREDIT CARD PAYMENT DETAILS: For details on fees please call appropriate number listed above Please debit my - Bankcard Mastercard Visa Card
Card No: Credit Card Expiry Date:/
Cardholder's Name: Cardholder's Daytime Contact Phone No:
Cardholder's Signature: AMOUNT: (\$)
Declaration: I hereby apply for a Private Mooring Licence and declare that I will comply with all relevant legislation and conditions applicable to that licence. I acknowledge that I have read and understood NSW Maritime's brochure entitled "Use of Personal Information Under the Privacy Act – 1998" and agree that my personal information may be disclosed to the persons/agencies listed in the brochure. Applicant's Signature
PROOF OF IDENTITY Applicants intending to forward their applications by mail or have an authorised representative act on their behalf must have their proof of identity verified by an authorised signatory
AUTHODIOFD CIONATODVIO HOE
Full Proof of ID: Document Name: No. No.
Primary Proof of ID: Document Name: No. (IF APPLICABLE)
Secondary Proof of ID: Document Name: No. No.
Authorised Signatory's Name

WWSAPL004 (0206)

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STATUTORY DECLARATION – VESSEL OWNERSHIP Surname Given Names Residential Address (PO Box No. is not acceptable) Do hereby solemnly declare and affirm: That I am the sole owner or at least the equal majority shareholder and registered controller of the following vessel: Vessel Reg. No/Permit No......HIN (Boatcode) Vessel Type..... Vessel Length (Metres)..... Vessel Name (if applicable)..... It is understood, and accepted, that should I cease to have at least an equal majority shareholding in the vessel in guestion and unless I obtain another vessel in which I am at least the equal majority shareholder, the Mooring Licence will lapse and cannot be transferred to any other person. Note: this requirement does not apply to those people selling their vessel which is located in a mooring area in which there is no waiting list and subject to NSW Maritime agreement. And I make this Solemn Declaration conscientiously believing it to be true and by virtue of the Oaths Act, 1900. MADE AND DECLARED AT Before me Full Name JP Number Signature JUSTICE OF THE PEACE JUSTICE OF THE PEACE REPRESENTATIVE'S AUTHORITY I authorise the person named below to make this application on my behalf Applicant's signature..... REPRESENTATIVE'S DETAILS SurnameGiven Names Address or Daytime Contact Phone No. OFFICIAL USE ONLY (REPRESENTATIVE'S IDENTIFICATION) Full Proof of ID: Document Name: No. Official Primary Proof of ID: Document Name: No. Secondary Proof of ID: Document Name: No. No. Authorised Signatory's Name..... Authorised Signatory's Signature Date:/.....

REGIONAL OFFICES

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Sydney

North Coast
PO Box J23
Coffs Harbour
NSW 2450

South Coast PO Box 1441 Wollongong NSW 2500 Hunter/Inland
PO Box 653
Newcastle

NSW 2300

Hawkesbury/ Broken Bay PO Box 797 Hornsby NSW 2077 Murray River/ Inland 440 Swift Street Albury NSW 2640