Pilot Exemption Certificate Application Form

## Application for Initial Pilot Exemption Certificate:

## Application for renewal of a Pilot Exemption Certificate:

## Class A:

## Class B:

## Class C:

## Class D:

## Class E:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Personal details | | | | | | | | | | | | | | | | |
| **1** | Surname: | |  | | | | | | | Forenames: | | | |  | | |
| **2** | **Home Address:**        **Postcode:**  **Contact Telephone Number:** | | | | | | | | | | | | | | | |
| **3** | **Date of Birth:** | | | | **4** | | **Age:** | | | | | | **5** | | **Nationality:** | |
| **6** | **Grade of Certificate of Competency:** | | | | | | | | | | | | **7** | | **Issued By:** | |
| **8** | **Number of Certificate:** | | | | | | | | **9** | | **Date of issue:**  **Date of revalidation:** | | | | | |
| Experience | | | | | | | | | | | | | | | | |
| **10** | **Number of passages made on watch through each area over the past twelve months:**  State Area as Swansea, Port Talbot, Penarth Pier, River Usk, Barry, Newport or Cardiff as applicable. | | | | | | | | | | | | | | | |
| Area | **Qualifying Period**  **(dates)** | | | | **Vessel** | | **Number of passages:** | | | | | | | | **Capacity**  **(Captain or First Officer/Mate)** |
| **From** | | **To** | | **In** | | | | **Out** | | | |
|  |  | |  | |  | |  | | | |  | | | |  |
|  |  | |  | |  | |  | | | |  | | | |  |
|  |  | |  | |  | |  | | | |  | | | |  |
|  |  | |  | |  | |  | | | |  | | | |  |
|  |  | |  | |  | |  | | | |  | | | |  |
| **Supply copy of evidence, e.g. Log book entries / Pilotage Dockets Employer / Master's affidavit PEC/ Pilot assessment** | | | | | | | | | | | | | | | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **11** | Details of vessels on which experience in section 10 has been gained | | | | | |
| Name of Vessel | Owner’s name and address | Vessel Type | **L.O.A.**  **(m)** | **Max Draught**  **(m)** | **If a passenger vessel, number of**  **Passengers vessel licensed to carry** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **12** | **The issue of a PEC is dependent upon an applicant completing the minimum inward and outward passages as per the** [pilotage schedule](http://southwalesports.co.uk/Pilotage/Pilotage_Directions/) **for the class of certificate in which they are applying within a specific area over the past twelve months. In circumstances where insufficient experience has been gained comment may be made in this space in support of the application:** | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| The Application | | | | | | | | | | | | | | |
| **13** | **Details of each vessel for which an Exemption Certificate is applied for:** | | | | | | | | | | | | | |
| **Name of Vessel** | Type/ **Off. No.** | | L.O.A. **(m)** | Max **Draught**  **(m)** | **Area (Please Tick)** | | | | | | | | |
| **Swansea** | **Port Talbot** | | **Penarth Pier** | **River Usk** | | **Barry** | **Cardiff** | **Newport** |
|  |  | |  |  |  |  | |  |  | |  |  |  |
|  |  | |  |  |  |  | |  |  | |  |  |  |
|  |  | |  |  |  |  | |  |  | |  |  |  |
|  |  | |  |  |  |  | |  |  | |  |  |  |
| **14** | Details of Existing Pilotage Certificates | | | | | | | | | | | | | |
| **Area(s) for which Pilotage Exemption Certificate is applicable:**  **[State Area as Swansea, Port Talbot, Penarth Pier, River Usk, Barry, Cardiff or Newport]** | | | | | | | | | | | | | |
| Date Granted | | Expiry Date | | | | | **Exemption Certificate No** | | | Area | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Declaration | | | |
| **15** | I hereby declare that the above information is correct and I confirm: | | |
| 1. **I have studied and am familiar with the following:** | **Tick to confirm** | Date of most recent edition/notice |
| **i) All current local Regulations.** |  |  |
| **ii) Local Harbour Byelaws.** |  |  |
| **iii) Local Notices to Mariners.** |  |  |
| **iv) The Dangerous Substances in Harbour Areas Regulations 1987** |  |  |
| **v) Emergency arrangements.** |  |  |
| **vi) Local Communication and LPS procedures.** |  |  |
| **b) I have enclosed evidence that berth to berth passage planning is being undertaken and confirm that I will continue to utilize passage planning within the ABP compulsory Pilotage area** |  |  |
| **c) I hold a valid medical certificate (ENG1 or equivalent)** |  | **Issue date:** |
| **d) I have a satisfactory working knowledge of the English language** | |  |
| **Signed:**  **Date:**        **Rank:** | | |
| **16** | It is confirmed that the information given in this application for a Pilotage Exemption Certificate or Renewal of a Pilotage Exemption Certificate is correct.      **For and on behalf of (Company’s name and/or Stamp):**        **Signed:**  **Name:**  **Position:**       **Date:** | | |
| **17** | **Company’s Address**              **Telephone Number:** | | |

**Completed Application to be returned to:**

**ABP Pilotage Manager**

**Queen Alexandra House**

**Cargo Road**

**Cardiff.**

**CF10 4LY**