**Towing Permit – within Port Area Application Form**

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| **Application**  ***This application must be completed by the Master of the vessel undertaking the Tow.***  ***Please complete all details below to apply for the issue of a Towing Permit within a Port Pilotage area.*** | |
| **I,** Click or tap here to enter text. | | |
| **Of** Click or tap here to enter text. | | |
| **State** Click or tap here to enter text. | **Postcode** Click or tap here to enter text. | |
| **Mobile** Click or tap here to enter text. | **Other Contact No** Click or tap here to enter text. | |
| **Date of Birth** Click or tap to enter a date. | **Place of Birth** Click or tap here to enter text. | |
| **Email address for issue of Towing Permit** Click or tap here to enter text. | | |

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| **Certificate of Competency Details:** Click or tap here to enter text. | | |
| **CoC Master Class**: Click or tap here to enter text. | **Issuing Authority:** Click or tap here to enter text. | |
| **CoC Number:** Click or tap here to enter text. | | |
| **Master Class Expiry:** Click or tap here to enter text. | | |
| **AMSA Certificate of Medical Fitness:**  Click or tap here to enter text. | **Expiry**: Click or tap to enter a date. | |
| ***NOTE: Copies of a valid Certificate of Competency and valid AMSA Certificate of Medical Fitness to be submitted***  ***with this application.*** | | |
| Hereby apply for a Towing Permit, within the Port Area of: Click or tap here to enter text.  **Vessel Details**  **Vessel:** Click or tap here to enter text. **Type:** Click or tap here to enter text.  **MMSI No:** Click or tap here to enter text. **IMO No/ Call Sign:** Click or tap here to enter text.  **LOA (m):** Click or tap here to enter text. **Beam (m):** Click or tap here to enter text.  **GT:** Click or tap here to enter text. **Main Engine Power (kW):** Click or tap here to enter text.  **Vessel Owner:** Click or tap here to enter text.  **Email Address:** Click or tap here to enter text.  **Business Address:** Click or tap here to enter text.    The port pilotage areas designated to TasPorts under the Deed are listed below, and defined in the ***Marine and Safety (Pilotage and Navigation) Regulations, 2017***: | |

**Details of intended tow operation:**

Towing vessel being exhibiting AIS?:Choose an item.

Towing vessel exhibit lights and shapes in accordance with *the Convention on the International Regulations for the Preventing Collisions at Sea, 1972?*: Choose an item.

Tow vessel be maintaining listening watch on VHF Ch12 or 14 in or near the Port Area: Choose an item.

Tow commence from (Berth or Port Limit): Click or tap here to enter text.

Date & Time – commence tow: Click or tap here to enter text.

Tow destination (Berth or Port Limit): Click or tap here to enter text.

Date & Time – destination: Click or tap here to enter text.

Description of the tow (*what is being towed*):

Click or tap here to enter text.

Overall Length of the Tow:

Tow vessel:Click or tap here to enter text.Tow Line: Click or tap here to enter text. Tow: Click or tap here to enter text.

Description of the tow operation (*how is it being towed within the Port Area*):

Click or tap here to enter text.

**Applicant’s Declaration: I declare that the above details are correct.**

**Signature of Applicant: **

**Date:** Click or tap to enter a date.

Please follow the link to complete the Pilot Exemption Certificate and Renewal Charges Form

<https://www.tasports.com.au/pilotage-exemption> .

The port pilotage areas designated to TasPorts under the Deed are listed below, and defined in the ***Marine and Safety (Pilotage and Navigation) Regulations, 2017***:

**Primary Ports**:

Hobart Zone A

Hobart Zone B

Hobart Zone C

Bell Bay Zone D

Bell Bay Zone E

Devonport

Burnie

Port Latta

**Secondary Ports:**

Port Arthur

Spring Bay

Coles Bay

Lady Barron

Grassy

Naracoopa

Stanley

Strahan

Port Davey

Adventure Bay

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| **Checklist** | | **Tick** |
|  | Ensure all information is accurate and all sections are completed |  |
|  | Sign and date the Declaration |  |
|  | Obtain all supporting documentation where relevant including: | |
| Full copy of a valid **Certificate of Competency** that authorises the applicant to be Master of the vessel to which the application relates |  |
| Full copy of a current **Certificate of Medical Fitness** |  |
|  | Completed the necessary **trips** as detailed (complete trip log below) |  |
|  | Undertake **local knowledge examination** with a local Pilot |  |
|  | Attach all supporting documentation and send completed and signed application form to  [pilotexemption@tasports.com.au](mailto:pilotexemption@tasports.com.au)  *Please ensure you quote the applicant’s name, vessel and Port/Zone and include current Permit # ( if applicable) on all correspondence.* |  |

**Note to applicants:**

Please allow up to 5 business days for processing from the date of receipt of application.

If you have any queries, please contact **1300 366 742** and ask to speak with Pilot Exemptions Administrator, or Deputy Harbour Master, and email enquiries to [pilotexemption@tasports.com.au](mailto:pilotexemption@tasports.com.au)

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| **Trip Number** | **Start Date:**  **YYYYMMDD** | **Start Time:**  **HHMM** | **Start Location:** | **End Date:**  **YYYYMMDD** | **End Time:**  **HHMM** | **End Location:** | **WX Wind/Current** | **Day/ Night** | **Role** |
| *#* | *20220115* | *0830* | *Berth, Port Limit* | *20200115* | *0915* | *Berth, Port Limit* | *WX* | *Day* |  |
| *1.* |  |  |  |  |  |  |  |  |  |
| *2.* |  |  |  |  |  |  |  |  |  |
| *3.* |  |  |  |  |  |  |  |  |  |
| *4.* |  |  |  |  |  |  |  |  |  |
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| *6.* |  |  |  |  |  |  |  |  |  |
| *7.* |  |  |  |  |  |  |  |  |  |
| *8.* |  |  |  |  |  |  |  |  |  |
| *9.* |  |  |  |  |  |  |  |  |  |
| *10.* |  |  |  |  |  |  |  |  |  |
| *11.* |  |  |  |  |  |  |  |  |  |
| *12.* |  |  |  |  |  |  |  |  |  |