

**Annex 1**

**APPLICATION FOR ISSUE OR RENEWAL OF A PILOTAGE EXEMPTION CERTIFICATE FOR KHALIFA PORT**

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| **PERSONEL DETAILS** |
| 1 | Surname | Forenames |
| 2 | home addressTelephone |
| 3 | Date of birth | 4 | Age | 5 | Nationality |
| 6 | Grade of Certificate of Competency and details and dates of allendorsements : | 7 | Issued by |
| 8 | Number of Certificate: | 9 | Date of original issue and date of Revalidation of Certificate: |
| **EXPERIENCE** |
| 10 | Number of passages made as Master through each area over the past twelve (12) months:(This application should be accompanied by the ***Pilot Attendance and PEC Tripping Record)*** |

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| **PILOTAGE EXEMPTION APPLICATION** |
| 12 | Details of each vessel for which experience has been gained and an Exemption Certificate is applied for: |
| Name of Vessel /Class of Vessel\* | Owner name and address: | Type / IMO No: | LOA(m) | Max Draught(m) | Comments |

Date attended VTS Familiarisation (Please state at which Port) Date and place attended tug berthing/unberthing familiarisation**+**:

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|  | **Details of Existing Pilotage Certificates** |
| 13 | Date Granted: | Expiry Date: | Exemption Certificate No: | Port: |

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| **Declaration** |
| 14 | I hereby declare that the application information is correct and I confirm; |
| a | **I have studied and am familiar with the following** | **Tick To confirm** | **Date of most recent edition / notice** |
|  | 1. All current local Regulations |  |  |
| 2. Most recent Notices to Mariners |  |  |
| b | I have satisfactory working knowledge of the English language:Name…………………………….................... Signed …………………...............................................Date………………………………................... |
|  |
| 15 | The Ship’s Owner or an Agent representing the Owner must sign applications below: |
|  | It is confirmed that the information given in this application for a Pilotage Exemption Certificate or Renewal of a Pilotage ExemptionCertificate is correct.For and behalf of ……………………………………................................................... Signed ………………….............. Name…………………………….Position…………………………. Date……………………………… |
|  | Company Address:Telephone number: |
| nb | *The issue of a PEC is dependent upon an applicant completing at least six inward and six outward passages, of which two trips inwards and two trip outwards must be undertaken in hours of darkness, within a specific area over the past twelve months.* |
| \* | *Applicants for a PEC for different vessels in the same class will only be accepted if each vessel in the class has identical dimensions, equipment and handling**characteristics.* |
| **+** | *Applicants who require assistance from tugs to berth or unberth their ship must demonstrate knowledge and experience of working with harbour tugs.* |