



**APPLICATION FOR A BOATMASTERS' LICENCE
Paper Endorsements For Holders Of
Alternative Certification**

BML

IMPORTANT - BEFORE completing this form, please ensure you have read the guidance notes and instructions on pages 10 to 13. Please provide an email address in block capitals in order for us to inform you of the receipt of your application (see section 10 of the application form). We are unable to accept applications by fax or email

1. PERSONAL DETAIL

Title Mr/Mrs/Miss/Capt etc		Sex: Male/Female	
Surname /Family name			
Forename(s) in full			
Date of Birth			
Place of Birth		Country of Birth	
Nationality		Passport/National Insurance Number	
	Full home address	Address for return of documents (if different from home address)	
Street/Road			
District			
Town/City			
County/State			
Post Code/Zip			
Country			
Telephone No			
Mobile No		Email	

2. WHAT TYPE OF ENDORSEMENT IS REQUIRED

Type of Endorsement	Please tick (✓) relevant box	Go to section
Specialist Operations		3
Local Knowledge		4

Please do not write below this line

Received:	Fee:	BML ID	
		Receipt No	
		RMS No	
		Application ID	
		BML No	

Name

DOB

BML ID

3. SPECIALIST OPERATIONS ENDORSEMENT

Please see MSN 1853 for more information about the requirements

APPLICANTS HOLDING THOSE CERTIFICATES LISTED IN ANNEX 3 OF MSN 1853 MAY APPLY FOR A TOWING AND PUSHING PAPER ENDORSEMENT ONLY

Type	Please tick (✓)	Type	Please tick (✓)
Passenger Operations*		Oil Cargoes	
Large Passenger Operations*		Liquid Chemical	
Towing and Pushing		Liquified Gas	
Ro-Ro (Tidal waters)		Fast Craft	
Cargo		Radar	
Dredging			

*Only applicable for masters of vessels carrying more than 12 passengers

Applicants may be required to undertake an oral assessment on underpinning knowledge and a practical assessment which is appropriate to the BML specialist endorsement sought

Those applicants holding an acceptable alternative certificate relevant to the specialist operations endorsement applied for must submit the certificate with their application

4. LOCAL KNOWLEDGE ENDORSEMENTS

Please see MSN 1853 for more information about requirements

Area	Please tick (✓)	Area	Please tick (✓)
Bristol Port		Medway	
Caernafon and Menai Strait		Padstow Harbour	
Dee Conservancy		Port of Liverpool	
Dover Harbour		Port of London	
Fowey Harbour		Portsmouth Harbour	
Gloucester Harbour		Isles of Scilly	

Applicants may be required to undertake an oral assessment on underpinning knowledge and a practical assessment which is appropriate to the local knowledge endorsement sought.

Those applicants holding a PEC or an acceptable examination pass certificate issued by a competent authority for the local knowledge area must submit these with their application.

5. QUALIFYING SERVICE TIME FOR PAPER ENDORSEMENT - All Applicants

Vessel' Name	Rank/Capacity	Type/Class	Name of Owner	Category/ies of Water and Operational Areas(s)	No of days worked	From (date) dd/mm/yyyy	To (date) dd/mm/yyyy

Note:
Qualifying Service Time (QST) must be within the past five years.
 Please see section 5 of the guidance for a template testimonial and further information on QST requirements.
Self certification of service is not acceptable.

6. ALTERNATIVE CERTIFICATE HELD - All Applicants

Please state below the accepted alternative certificate held

Qualification	Issuing Body	Certificate Number	Issue Date	Expiry Date	Validated (MCA use ONLY)

7. MEDICAL FITNESS - All Applicants

All applicants must submit a valid medical fitness certificate appropriate to the type and area of operation with their application. Further guidance on medical fitness is available in Section 16 of MSN 1853

Medical Evidence enclosed	Please tick (✓)
ML5 report and certificate*	
ENG1 Seafarer Medical Certificate	
Civil Aviation Commercial Pilot's Licence	
Health and Safety Executive (HSE) Diving Certificate	
DVLA Group 2 Driver's Licence	
Any other relevant details	

* If the doctor has been unable to complete the certificate because a medical condition is indicated, you should complete Part D of the ML5 form and send it with this application for medical assessment.

Caution: It is your responsibility to declare any medical conditions, or any changes to your health, that are likely to affect your performance and safety as a Boatmaster.

8. IDENTITY DOCUMENTS REQUIRED - All Applicants

Please enclose your passport or photo driver's licence. It will be returned to you with your endorsement. If you do not have either, another document that contains a photo of you may be considered. If you do not have any form of photo identification, please contact the MCA - contact details are at the end of this form.

Document	Enclosed (please tick)	Checked (MCA use only)
Passport		
Or Photo Driver's Licence		
Or Other (see above)		
And Two passport-size (50 by 40 mm) photos - taken full face without hat - endorsed*, as a good likeness		

*The back of one photograph must include your name in BLOCK LETTERS, and the signature of a Doctor, Bank Office, Established Civil Servant, School Teacher or someone of similar standing.

9. DECLARATION

(The maximum penalty for a false declaration is £5000)

A data sharing statement will be inserted in the finalised form *here*.

I declare that the data contained in this application is, to the best of my knowledge, true and complete. I also declare that the documents are genuine, given and signed by the persons whose names appear on them. I consent to any processing of the data contained in this application by the MCA (including any processing necessary to establish the authenticity and validity of the issued certificate).

Please sign this form in the centre of the space opposite, in BLACK BALL POINT PEN, this will be transferred to your new licence.

FOR OFFICIAL USE
ONLY

**IMPORTANT – KEEP WITHIN THE BORDER
FAILURE TO COMPLY WITH THIS
INSTRUCTION WILL INVALIDATE THE APPLICATION**

Date.....

DRAFT

10. PAYMENT

- All Applicants

Please enclose the appropriate fee (as laid down in the current Merchant Shipping Fees Regulations)
Payment should be made in pounds sterling (£) by cheque, postal order or banker's draft, BACS, credit or debit card.

Cheques, postal orders and banker's drafts should be made payable to the "Maritime and Coastguard Agency" and crossed "account payee" and "not negotiable". Cheques and banker's drafts should be drawn at a UK bank. **CASH WILL NOT BE ACCEPTED.**

Information regarding the fees can be found in section 10 of the guidance.

Please tick (✓) the appropriate box below to indicate your chosen method of payment.

Maestro Visa MasterCard Delta Cheque/banker's draft Postal Orders BACS

Please charge £ to my Maestro / Visa / MasterCard / Delta Card

Name of Card Holder	
Card Number	
Start Date	
Expiry Date	
Maestro Issue Number (Maestro Cards Only)	

Security Code:



The Security Code is the last three digits of the numbers on the reverse of the card the card, near the signature strip.

Signature..... Date.....

Receipt: If you would like a receipt please tick (✓) the box below and confirm the email address you would like it sent to:

Please issue me with a receipt

Email address:	
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11. EXAMINATION AVAILABILITY - All Applicants

Please indicate your availability in the box below

Please arrange my underpinning knowledge/boat handling test as soon as possible after.....(Date)

I am not available on the following dates.....

12. CHECKLIST - All Applicants

Please make sure you have enclosed the relevant items from the list below.

	Please tick (✓)	Official use only
Original Passport or Driving Licence	<input type="checkbox"/>	<input type="checkbox"/>
Two passport photographs (please refer to section 8 of the guidance)	<input type="checkbox"/>	<input type="checkbox"/>
Alternative Qualification	<input type="checkbox"/>	<input type="checkbox"/>
Valid Medical Fitness certificate (please refer to section 7 of the guidance)	<input type="checkbox"/>	<input type="checkbox"/>
Work Record (MSF 4366)	<input type="checkbox"/>	<input type="checkbox"/>
Training Record Book (MSF 4367) (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
Qualifying Service Time testimonials	<input type="checkbox"/>	<input type="checkbox"/>
Acceptable equivalent certificate for specialist operations endorsement (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
Pilotage Exemption certificate or relevant competent harbour authority letter (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
Fee	<input type="checkbox"/>	<input type="checkbox"/>

Please note that a licence cannot be issued until all relevant documents have been received and approved, together with the correct fee

12. MCA MARINE OFFICE CHECKLIST - Official Use Only

SPECIALIST OPERATIONS ENDORSEMENTS

Endorsement applied for:

- 1.
- 2.
- 3.

STANDARD MET/ASSESSMENT COMPLETE

Please tick (✓)

Onboard Practical Assessment	Onboard Oral Assessment	Work Record/Testimonials (Evidence of QST)	Training Record Book complete?	Medical Fitness
Date:	Date:	Date:	Date:	Date:

LOCAL KNOWLEDGE ENDORSEMENTS

Endorsement applied for:

- 1.
- 2.
- 3.

STANDARD MET/ASSESSMENT COMPLETE

Please tick (✓)

Oboard Practical Assessment	Onboard Oral Assessment	Work Record/Testimonials (Evidence of QST)	PEC/LK Exam Pass	Medical Fitness
Date:	Date:	Date:	Date:	Date:

REASONS FOR REJECTION

Name:	Signed:	Date:
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13. INSTRUCTIONS TO RSS - Official Use Only

TO BE COMPLETED BY MCA EXAMINER

Please issue the following paper endorsement

SPECIALIST OPERATIONS ENDORSEMENTS

Type	Please tick (✓)	Type	Please tick (✓)
Passenger Operations		Oil Cargoes	
Large Passenger Operations		Liquid Chemical	
Towing and Pushing		Liquified Gas	
Ro-Ro (Tidal waters)		Fast Craft	
Cargo		Radar	
Dredging			

LOCAL KNOWLEDGE ENDORSEMENTS

Area	Please tick (✓)	Area	Please tick (✓)
Bristol Port		Medway	
Caernafon and Menai Strait		Padstow	
Dee Conservancy		Port of Liverpool	
Dover Harbour		Port of London*	
Fowey Harbour		Portsmouth Harbour	
Gloucester Harbour		Isles of Scilly	

ADDITIONAL NOTES/INSTRUCTIONS

* Please specify area of operations for Port of London LKE here. Further guidance is available in MSN 1853 Section 7.

GUIDANCE NOTES FOR THE COMPLETION OF THIS APPLICATION FORM

PLEASE ENSURE THAT YOU READ AND UNDERSTAND MSN 1853 BEFORE COMPLETING THE FORM. These notes summarise the requirements.

Please complete this form in **BLOCK LETTERS** and in **black ink**.

ENSURE YOU COMPLETE THIS FORM IN FULL - FAILURE TO DO SO MAY MEAN WE WILL HAVE TO RETURN YOUR APPLICATION TO YOU, AND WILL RESULT IN A DELAY TO YOUR APPLICATION BEING PROCESSED.

1. PERSONAL DETAILS

Enter your personal details in the boxes provided. Your name should be given **IN FULL**, and should be given in the same format as appears in your passport or driving licence.

Your date of birth should be given in the format **DD/MM/YYYY**, e.g. 18 February 1960 would be written 18/02/1960.

You should give your permanent home address, where you are normally resident.

You may also provide an alternative address for return of documents or correspondence relating to this application, e.g. if you are away at college.

Your documents will be returned by Recorded Delivery and will need to be signed for. Please ensure you provide us with the full address details you would like your documents sent to. You **must** include a contact telephone number and email address should there be any queries with your delivery.

2. WHAT TYPE OF ENDORSEMENT IS REQUIRED

Please tick (✓) the box relevant to the endorsement you are applying for.

Existing masters using acceptable alternative qualifications to operate small vessels in commercial use who require a Towing and Pushing endorsement must apply for the that endorsement by X XX 201X

3. SPECIALIST OPERATIONS ENDORSEMENTS

Please tick (✓) the box relevant to the endorsement you are applying for

4. LOCAL KNOWLEDGE ENDORSEMENTS

Please tick (✓) the box relevant to the endorsement you are applying for

5. QUALIFYING SERVICE TIME FOR PAPER ENDORSEMENT

Testimonials must support the information contained in Section 5 of the application form. The following are accepted forms of evidence for service:

1. A company letter signed by an appropriate person (e.g. the owner or fleet manager);
2. A letter from a representative of the statutory navigation/port authority responsible for the area in which the applicant operates;
3. A letter from a shipper or customer who can verify the applicant has the relevant experience; or
4. A letter from a trade association who can verify the applicant has the relevant experience.

The following template can be used for testimonials for examples 2-4.

BOATMASTER LICENCE TESTIMONIAL (Template)

To be submitted on the headed paper of the organisation represented.

This is to certify that:

Full Name

Date of Birth Place of Birth

has been known to me, or my organisation, as a commercial operator of inland waterway vessels, as specified below between __/__/__ and __/__/__.

During this period of service, Mr/Ms has served in the following capacity(s):

Master for months/years;

Mate with duties as helmsman for months/years;

Other relevant duties (please specify)

..... for months/years;

..... for months/years.

Vessel Name

Registered (or Identification Number)

Overall Length (in m)

Breadth (in m)

Tonnage (dwt)

Type of Operation

Area(s) of Operation

Signed

Name (Print)

Master or Position in Company

Name of Company

Company Stamp

Date

6. ALTERNATIVE CERTIFICATE HELD

The full list of acceptable alternative qualifications can be found in Annex 3 and 4 of MSN 1853. Your alternative certificate must be valid at the time you apply

7. MEDICAL FITNESS

If you need to obtain a new ML5 certificate, please ensure you are using the latest version of the form. This can be obtained from your local Marine Office or downloaded from www.gov.uk . Search for "MSF 4112".

ENG1 certificates are issued following an examination by an MCA approved doctor. A list of MCA approved doctors is available from www.gov.uk . Search for "MCA Approved Doctor".

Further guidance of appropriate medical certification can be found in Section 16 of MSN 1853 and Annex 3 and 4 of that notice..

8. IDENTITY DOCUMENTS

ALL the documents in this section **MUST** be provided with this application. Please ensure you tick (✓) each box to indicate that you have enclosed the documents. The supporting documents **must be original**. Any candidate failing to submit all the required documents may have their application returned without being processed.

Photographs

Your photographs must be taken full face without a hat and must be UK approved passport photographs, measuring a maximum of 50mm x 40mm, in colour with a plain white background. The back of one photograph must include your name in BLOCK LETTERS and the signature of a Doctor, Bank Officer, Established Civil Servant, School Teacher or someone of similar standing. They should also write on the back of the photograph "I certify that this is a true likeness of Mr/Mrs/Miss/Ms/Dr etc....." and add their signature. A member of your family is **NOT** allowed to counter sign your photograph. The back of the other photograph must include your name in BLOCK LETTERS and your date of birth.

9. DECLARATION

Please read the declaration. Once you are sure that the information you have given is, to the best of your knowledge, true and complete, and that the documents submitted are genuine, given and signed by the persons whose names appear on them, you should sign the declaration with your usual signature, including the date. Ensure your signature is inside the box – this will be transferred to your new licence.

10. PAYMENT

You must enclose the correct fee with your application. Please tick (✓) the appropriate box to indicate your chosen method of payment.

Payment must be made in pounds sterling (£). Payment by cheque, banker's draft or postal orders should be made payable to "The Maritime and Coastguard Agency" and crossed "account payee" and "not negotiable".

For payment by Maestro, Visa, MasterCard or Delta, ensure you enter the card details in the spaces provided. Please sign to confirm the amount and chosen method of payment.

To confirm the fee for the endorsement you require please contact your local MCA Marine Office. Information on Boatmasters' Licence fees can be obtained from www.gov.uk. Search for "Boatmaster"

11. CHECKLIST

ALL the documents in this section relevant to your application **MUST** be provided with this application. Please ensure you tick (✓) each box to indicate that you have enclosed the documents. The supporting documents **must be original**. Any candidate failing to submit all the required documents may have their application returned without being processed.

12. APPLICATION TRACKING

If you have provided an email address you will receive confirmation of receipt. We will then email you if we require any further evidence. Once we have processed and approved your application we will dispatch your documents by Recorded Delivery.

NOW RETURN YOUR COMPLETED APPLICATION TO YOUR LOCAL MCA MARINE OFFICE

Please address any queries about your application to your local MCA Marine Office. Contact details are available from www.gov.uk. Search for "Marine Office"

WE ARE UNABLE TO ACCEPT APPLICATIONS SUBMITTED BY EMAIL OR FAX

YOU SHOULD ALLOW AT LEAST 28 DAYS FOR US TO PROCESS YOUR APPLICATION, PLUS POSTAGE

AN INCOMPLETE APPLICATION WILL DELAY THE ISSUE OF YOUR LICENCE

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