APPLICATION FOR A BOATMASTERS' LICENCE Upgrades and Additional Areas

IMPORTANT - BEFORE completing this form, please ensure you have read the guidance notes and instructions on pages 13 to 16. Please provide an email address in block capitals in order for us to inform you of the receipt of your application (see section 11 of the guidance notes). We are unable to accept applications by fax or email

## 1. PERSONAL DETAILS

| Title Mr/Mrs/Miss/Capt etc |  | Sex: Male/Female |  |
| :--- | :--- | :--- | :--- |
| Surname/Family name |  |  |  |
| Forename(s) in full |  |  |  |
| Date of Birth |  | Country of Birth |  |
| Place of Birth | Passport/National <br> Insurance Number |  |  |
| Nationality |  |  |  |


|  | Full home address | Address for return of documents <br> (if different from home address) |
| :--- | :--- | :--- |
| Street/Road |  |  |


| District |  |  |
| :--- | :--- | :--- |
| Town/City |  |  |
| County/State |  |  |
| Post Code/Zip |  |  |
| Country |  |  |
| Telephone No |  |  |
| Mobile No |  | Email |

2. EXISTING MCA BML HELD (Current BML must be submitted with this application)

| BML Licence Number: | Type of Certificate: | Please <br> tick ( $\checkmark$ ) |
| :--- | :--- | :--- |
|  | Tier 1 Level 2 |  |
|  | Tier 1 Level 1 |  |
| Expiry Date: | Tier 2 Level 2 |  |
|  | Tier 2 Level 1 |  |
|  | Tier 2 (Issued prior to XX/XX/15) |  |

Please do not write below this line


| Fee: |
| :--- |
|  |
|  |


| BML ID |  |
| :--- | :--- |
| Receipt No |  |
| RMS No |  |
| Application ID |  |
| BML No |  |


| Vessel's Name | Rank/Capacity | Type/Class | Name of Owner | Category/ies of Water and <br> Operational Area(s) | No. of days <br> worked | From (date) <br> dd/mm/yyyy | To (date) <br> dd/mm/yyyy |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
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## Note:

Qualifying Service Time (QST) must be within the past five years.
Please see section 3 of the guidance for a template testimonial.
Self-certification of service is not acceptable

## 4. ANCILLARY SAFETY TRAINING

Boatmaster Licence candidates are required to have undergone MCA approved basic safety training in Personal Survival, Fire Safety and First Aid or completed the relevant Maritime Studies Qualification Units in lieu of this training. Please include original certificates with your application.

| Course or Training | Certificate enclosed <br> (please tick) | Validated (MCA use ONLY) |
| :--- | :--- | :--- |
|  |  |  |
|  |  |  |
|  |  |  |

## 5. 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 $\qquad$ (Date) I am not available on the following dates $\qquad$
6. WHAT ARE YOU APPLYING TO DO? - All Applicants

Please tick one box only

| Type of Action | Please tick <br> relevant box | Go to <br> section |
| :--- | :---: | :---: |
| Add an additional area to a Tier 2 licence |  | $\mathbf{7}$ |
| Add an additional operation to a Tier 2 licence | $\mathbf{7}$ |  |
| Upgrade Tier 2 licence to Tier 1 |  | $\mathbf{8 A}$ |
| Upgrade Tier 1 Level 1 licence to Tier 1 Level 2 | $\mathbf{8 B}$ |  |
| Add a further specialist, or local knowledge, endorsement to a Tier 1 licence | $\mathbf{8 C / 8 D}$ |  |

Qualifying Service Time requirements are can be found in Annexe 5 and 6 of MSN 1853

## 7. ADDITIONAL SPECIFIED AREA(S) AND OPERATION(S) - Tier 2 Applicants Only

A Tier 2 Licence is valid for operations within specified areas. In the box below please indicate:

| Additional area(s) of Operation | Additional passenger operations |  | Additional non - passenger operations (please tick) |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Y/N | Max no of passengers | GC* | OC* | TP* | DR* | WB* | other |
|  |  |  |  |  |  |  |  |  |
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*Please see section 6 of the guidance for clarification.
If you have ticked other please clarify below

All applicants for this upgrade must submit a Work Record and Training Record Book

## 8A. UPGRADING TIER 2 TO TIER 1

- Tier 2 Applicants Only

| Application details | Evidence of Qualifying <br> Service Time enclosed <br> (please tick) | Underpinning <br> Knowledge - Exam <br> Pass/MSQ Unit <br> Certificate(s) enclosed <br> (please tick) | Validated, or <br> demonstrated to MCA <br> examiner's satisfaction <br> (MCA use ONLY) |
| :--- | :--- | :--- | :--- |
| Tier 1, Level 1 Generic |  |  |  |
| Tier 1 Level 2 Generic |  |  |  |
| Passenger Operations |  |  |  |
| Large Passenger Vessel <br> (over 250) |  |  |  |
| General Cargo |  |  |  |
| Oil Cargo |  |  |  |
| Liquid Chemical Cargo |  |  |  |
| Liquified Gas Cargo |  |  |  |
| Dredging |  |  |  |
| Ro-Ro (Tidal waters) |  |  |  |
| Towing and Pushing |  |  |  |
| Fast Craft |  |  |  |
| Radar |  |  |  |

All applicants for this upgrade must submit a Work Record and Training Record Book

8B. UPGRADING TIER 1 LEVEL 1 TO TIER 1 LEVEL 2

| Application details | Evidence of Qualifying <br> Service Time enclosed <br> (please tick) | Underpinning <br> Knowledge - Exam <br> Pass/MSQ Units <br> Certificate(s) enclosed <br> (please tick) | Validated, or <br> demonstrated to MCA <br> examiner's satisfaction <br> (MCA use ONLY) |
| :--- | :--- | :--- | :--- |
| Tier 1, Level 2 Generic |  |  |  |
| Passenger Operations |  |  |  |
| Large Passenger Vessel <br> (over 250) |  |  |  |
| General Cargo |  |  |  |
| Oil Cargo |  |  |  |
| Liquid Chemical Cargo |  |  |  |
| Liquified Gas Cargo |  |  |  |
| Dredging |  |  |  |
| Ro-Ro (Tidal waters) |  |  |  |
| Towing and Pushing |  |  |  |
| Fast Craft |  |  |  |
| Radar |  |  |  |

All applicants for this upgrade must submit a Work Record and Training Record Book

## 8C. ADDITIONAL SPECIALIST OPERATIONS

## - Tier 1 Applicants Only

In addition to a generic BML applicants must obtain a specialist operations endorsement to undertake those operations in Section 8 of MSN1853

| Type of <br> Endorsement | Evidence of <br> Qualifying Service <br> Time enclosed <br> (please tick) | Underpinning <br> Knowledge - Exam <br> Pass/MSQ Units <br> Certificate(s) <br> enclosed <br> (please tick) | TRB Completed? | Validated, or <br> demonstrated to <br> MCA examiner's <br> satisfaction <br> (MCA use ONLY) |
| :--- | :--- | :--- | :--- | :--- |
|  |  |  |  |  |
|  |  |  |  |  |
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All applicants for additional specialist operations endorsements must submit a Work Record and Training Record Book

## 8D. ADDITIONAL LOCAL KNOWLEDGE ENDORSEMENTS - Tier 1 Applicants Only

A Tier 1 licence is valid for all UK waters of the relevant categories other than those specified as requiring a local knowledge endorsement. The areas for which a Local Knowledge endorsement is required are shown in Section 7 of MSN 1853.

If you wish to apply for a local knowledge endorsement for any of those areas, please enter the area(s) below:

| Name(s) of Area(s) | Validated, or <br> demonstrated to MCA <br> examiner's satisfaction <br> (MCA use ONLY) |
| :---: | :---: |
|  |  |
|  |  |
|  |  |

## Pilotage Exemption Certificate (PEC)

If you hold a PEC for any of the above local knowledge area, please indicate below, and enclose you PEC(s)

| PEC(s) enclosed | Vaildated (MCA use ONLY) |
| :--- | :--- |
|  |  |
|  |  |

All applicants for additional local knowledge endorsements must submit a Work Record

## 9. 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 <br> $(\checkmark)$ |
| :--- | :--- |
| ML5 report and certificate* |  |
| ENG1 Seafarer Medical Certificate |  |
| Civil Avaition 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.

## 10. DECLARATION <br> (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.


## IMPORTANT - KEEP WITHIN THE BORDER <br> FAILURE TO COMPLY WITH THIS INSTRUCTION WILL INVALIDATE THE APPLICATION

Date $\qquad$

## 11. 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 9 of the guidance notes.
Please tick $(\checkmark)$ the appropriate box below to indicate your chosen method of payment.
Maestro $\square$ Visa $\quad \square \quad$ MasterCard $\square$ Delta $\square$ Cheque/banker's draft $\square$ Postal Orders $\square$ BACS $\square$
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 $(\checkmark)$ the box below and confirm the email address you would like it sent to:

Please issue me with a receipt

## Email address:

12. CHECKLIST - All Applicants

| Please make sure you have enclosed the relevant items from the list below. | Please tick ( $\checkmark$ ) | Official use only |
| :---: | :---: | :---: |
| Existing Boatmasters' Licence |  |  |
| Ancillary Safety Training certificates |  | $\square$ |
| Work Record (MSF 4366) |  | $\square$ |
| Training Record Book (MSF 4367) |  | $\square$ |
| Qualifying Service Time testimonials |  | $\square$ |
| Underpinning Knowledge pass certificate/Maritime Studies Qualifications units (if applicable) |  | $\square$ |
| Acceptable equivalent certificate for specialist operations endorsement (if applicable) |  | $\square$ |
| Pilotage Exemption certificate or relevant competent harbour authority letter (if applicable) |  | $\sqcup$ |
| Valid Medical Fitness certificate (please refer to section 7 of the guidance) |  | $\square$ |
| Fee |  | $\downarrow$ |

Please note that a licence cannot be issued until all relevant documents have been received and approved, together with the correct fee.
13. MCA MARINE OFFICE CHECKLIST (MCA USE ONLY)

| Tier 1 Licence |  | No |
| :--- | :---: | :---: |
| Standards Met | Pes | Date |
| Generic Competencies - on-board Practical assessment |  |  |
| Generic Competencies - on-board Oral assessment |  |  |
| Work record (evidence of QST) |  |  |
| Training Record Book completed satisfactorily |  |  |
| Underpinning knowledge - Training validated |  |  |
| Specialist Endorsement(s): |  |  |
| Passenger operations - General |  |  |
| Large Passenger Vessel |  |  |
| Cargo - general |  |  |
| Oil cargo |  |  |
| Liquid Chemical cargo |  |  |
| Liquified Gas cargo |  |  |
| Dredging |  |  |
| Towing and Pushing |  |  |
| Ro-Ro (Tidal waters) |  |  |
| Fast Craft |  |  |
| Radar |  |  |
| Local Knowledge endorsement/s: (enter area/s below) |  |  |
|  |  |  |
|  |  |  |
| Medical Standards |  |  |


| Tier 2 Licence |  |  | Yes |
| :--- | :---: | :---: | :---: |
| Standards Met |  | No | Date |
| On-board Practical assessment |  |  |  |
| On-board Oral assessment |  |  |  |
| Sufficient Service |  |  |  |
| Relevant items in Training Record Book Completed Satisfactorily |  |  |  |
| Work Record - evidence of sufficent service |  |  |  |
| Medical Standards |  |  |  |


| Reasons for <br> Rejection |  |  |  |  |
| :--- | :--- | :--- | :---: | :---: |
| Name |  |  |  |  |
| Signed |  | Type |  |  |
| Date |  |  |  |  |
| Temporary <br> Licence <br> Number Date  Signature <br>     |  |  |  |  |

## 14. INSTRUCTIONS TO RSS (MCA USE ONLY)

## TO BE COMPLETED BY MCA EXAMINER

Please issue the following licence:
TIER 1

| Please tick ( $\checkmark$ ) |  |
| :---: | :---: |
| TIER 1 LEVEL 1 |  |
|  |  |
| DETAILS OF OPERATING RESTRICTIONS OR RESTRICTED VALIDITY |  |
| (Please indicate below) |  |


| SPECIALIST ENDORSEMENTS <br> Please tick ( $\checkmark$ ) |  |
| :--- | :--- |
| Passenger Operations - General |  |
| Large Passenger Vessel |  |
| Towing and Pushing |  |
| Cargo - General |  |
| Oil Cargo |  |
| Chemical Cargo |  |
| Gas Cargo |  |
| Dredging |  |
| Fast Craft |  |
| Radar |  |
| RoRo |  |

LOCAL KNOWLEDGE ENDORSEMENTS
Please tick ( $\checkmark$ )

| Bristol Port |  |
| :--- | :--- |
| Caernafon and Menai Strait |  |
| Dee Conservancy |  |
| Dover Harbour |  |
| Fowey Harbour |  |


| Gloucester Harbour |  |
| :--- | :--- |
| Medway |  |
| Padstow Harbour |  |
| Port of Liverpool |  |
| Port of London |  |
| Portsmouth Harbour |  |
| Isles of Scilly |  |

Please specify area of operations for Port of London LKE here:

TIER 2

| Please tick ( $\checkmark$ ) |  |  |
| :---: | :---: | :---: |
| TIER 2 LEVEL 1 T |  | R 2 LEVEL 2 |
| DETAILS OF SPECIFIED AREA AND OPERATIONS <br> (Please inidcate below) |  |  |
| CATEGORY AND AREA NAME | AREA DESCRIPTION AND LIMITS (Indicate whether set area from MSN 1837, or other bespoke area) | TYPE OF OPERATION AND SPECIFIC RESTRICTIONS |
|  |  |  |
| DETAILS OF OPERATING RESTRICTIONS OR RESTRICTED VALIDITY (Please indicate below) |  |  |
|  |  |  |

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. EXISTING MCA BML HELD

Please tick $(\checkmark)$ the box applicable to the certificate you hold. Only tick ONE box.

## 3. QUALIFYING SERVICE TIME FOR UPGRADE/ADDITION

Testimonials must support the information contained in Section 7 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 $\qquad$ Place of Birth
has been known to me, or my organization, as a commercial operator of inland waterway vessels, as specified below between $\qquad$ / _- and and $\qquad$ /__I

During this period of service, $\mathrm{Mr} / \mathrm{Ms}$ $\qquad$ has served in the following capacity(s):



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

## 4. ANCILLARY SAFETY TRAINING

Ancillary safety training must have been completed at an MCA approved provider. Further details on approved providers are available from stc.courses@mcga.gov.uk

## 5. WHAT ARE YOU APPLYING TO DO

Please tick $(\checkmark)$ the box applicable to the upgrade or addition you are applying for. Only tick ONE box.

## 6. ADDITIONAL SPECIFIED AREA(S) AND OPERATION(S)

| GC | General Cargoes (including packaged dangerous goods) |
| :--- | :--- |
| OC | Oil Cargoes (including gas ir liquid <br> chemicals in bulk) |
| TP | Towing and/or pushing |
| DR | Dredging |
| WB | Workboat |

Granting changes to a Tier 2 licence is subject to MCA discretion, and will be limited to an adjacent area or an extension of your existing operations. It cannot be used to add a completely different area or to accumulate a large number of areas. If you wish to increase scope substantially, you will need to get a Tier 1 Boatmaster's Licence.

It may be necessary for you to be assessed in the new area or operation. Your application will normally be referred to an MCA examiner who will contact you to make arrangements for that.

## 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".

## 8. 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.

## 9. PAYMENT

You must enclose the correct fee with your application. Please tick $(\checkmark)$ 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 licence you require please contact your local MCA Marine Office. Information on Boatmasters' Licence fees can be obtained from www.gov.uk. Search for "Boatmaster"

## 10. CHECKLIST

ALL the documents in this section relevant to your application MUST be provided with this application. Please ensure you tick $(\checkmark)$ 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.

## 11. 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

