



## APPLICATION FOR A BOATMASTERS' LICENCE EXEMPTION

# BML

**IMPORTANT - BEFORE completing this form, please ensure you have read the guidance notes and instructions on pages 18 to 20. We do not offer a counter service for this type of application.**

### PART A TO BE COMPLETED BY SHIP OWNER, MANAGER OR AGENT

#### 1A SHIP OWNER, MANAGER OR AGENT DETAILS

Title Mr/Mrs/Miss/Capt		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 <i>(if different from home address)</i>	
Street/Road			
District			
Town/City			
County/State			
Post Code/Zip			
Country			
Telephone No			
Mobile No		Email	

Name

DOB

#### 2A SHIP DETAILS

Ship Name			
Length		Official Number	
Gross Tonnage		Reg. Power Kw	
Ship Type		Class	
Category Of Waters		No. of Passengers	
Area of Operation			

BML ID

**Please do not write below this line**

<b>Received:</b>

<b>Fee:</b>

BML ID	
Receipt No	
BML No	

### 3A EXEMPTION APPLIED FOR

Exemption from the requirement for the Master / Skipper to hold:

Licence	Scope	(please tick)
Tier 1 Level 2 BML	National Categories A-D and limited coastal area	
Tier 1 Level 1 BML	National Categories A, B and non-linked C	
Tier 2 Level 2 BML	Restricted Categories A, B and non-linked C	
Tier 2 Level 1 BML	Restricted Categories A-D and limited coastal area	

Use this box to provide information in support of the application. This should include:

- A description of the proposed area of operations
- Details of measures to address safety (i.e. risk assessments)
- If a suitably qualified Boatmaster is available for the role
- Any other relevant information to support the application

#### 4A SUPPORT FOR APPLICATION BY LOCAL NAVIGATION OR HARBOUR AUTHORITY

Name of proposed Master / Skipper	
Proposed date of engagement	
Period of time requested	
Responsible official	
Name of local authority	
Full address of local authority	
Post Code	
Telephone No	
Mobile No	
Email	

#### 5A SHIP OWNER, MANAGER OR AGENT DECLARATION

**The maximum penalty for a false declaration is £5000**

**This is an application for exemption made under Section 48 of Chapter 21 of the Merchant Shipping Act 1995 from certain requirements of the Merchant Shipping (Boatmasters' Qualifications, Crew and Hours of Work) Regulations 2015**

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 refer to our privacy statement in Section 2 of the guidance notes which explains how we use the personal information we collect from you.

Please sign this form in the centre of the  
Space opposite, in BLACK BALL POINT PEN

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Date .....

**PART B TO BE COMPLETED BY THE PROPOSED MASTER/SKIPPER****1B PERSONAL DETAILS**

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		

We will normally return your documents to your home address but if you want them returned elsewhere, e.g. via the owner / operator, please complete the 'Address for return of documents' section.

**THE EXEMPTION CERTIFICATE WILL BE RETURNED TO THE OWNER/OPERATOR**

**2B EXISTING MCA BML**

If you hold an existing MCA BML complete this section. Enclose your current BML, or a **high quality** copy with this application.

If you hold a different kind of licence go to Section 3B

Tier / Level	
Licence Number	
Expiry Date	
Examining Marine Office	
<b>Validated (MCA use only)</b>	

### 3B ALTERNATIVE CERTIFICATE

If you hold a different kind of licence or certificate, complete this section. Enclose the certificate, or a **high quality** copy with this application.

Name of Licence / Certificate	
Licence / Certificate Number	
Expiry Date	
Issuing Body	
Validated (MCA use only)	

### 4B PILOTAGE EXEMPTION CERTIFICATE

If you hold a PEC for the area of operation give details and enclose your PEC(s) or a **high quality** copy with the application.

Pilot Exemption Certificate (PEC)	Validated (MCA Use Only)

### 5B ANCILLARY SAFETY TRAINING

If you have completed safety training courses to hold a BML you should enclose your course completion certificate with the application. A list of acceptable alternative certificates is available on the GOV.UK website. Search “BML ATP”.

Course or Training	Training Provider	Certificate Enclosed (please tick)	Validated (MCA Use Only)
Personal Survival/Water Safety			
Fire Safety			
First Aid			

### 6B TRAINING RECORD BOOK (TRB)

You do not have to complete a TRB to apply for an exemption. However, if you have a completed one you could enclose it for the examiner's information.

## 7B PRACTICAL BOAT HANDLING TEST

If you have passed a practical boat handling test relevant to the area and operation, please give details:

Examined on (name of vessel)	
Vessel type	
Area	
Examiner	
Date	
<b>Validated (MCA Use Only)</b>	

## 8B EXAMINATION AVAILABILITY

SOME APPLICANTS WILL BE REQUIRED TO UNDERGO A BOAT HANDLING TEST AND/OR TEST OF UNDERPINNING KNOWLEDGE BEFORE AN EXEMPTION CAN BE ISSUED

Please indicate your availability in the box below

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

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

## 9B MEDICAL FITNESS

In order to be granted an exemption all applicants must submit a valid medical fitness certificate with their application which is appropriate to the area and type of operations they will be performing. Further guidance on medical fitness is available in Section 16 of MSN 1853

Medical Evidence enclosed	Tick which
ML5 report and certificate*	
ENG1 Seafarer Medical Certificate	
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.**

## 10B RELEVANT EXPERIENCE

Use this section to provide details of any relevant experience similar to the role the exemption is applied for

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

**Note:**

**Relevant experience must be within the past five years and supported by evidence such as testimonials or a company letter.**

Please see section 5 of the guidance for further information on BML qualifying service time requirements.

**Self-certification of service is not acceptable.**

## 11B SUPPORTING INFORMATION

Use this section to provide any other relevant information in support of the application

## 12B IDENTITY DOCUMENTS

Those applicants who hold an existing MCA BML which was issued after 31/12/2006 do not need to send in proof of their identity and photographs.

All other applicants must send one form of identity from the list below along with 2 passport sized photographs (one of which must be countersigned). Further information on passport photographs and countersignatures can be found in Section X of the guidance notes.

If you do not hold either a passport or driving licence please contact your local Marine Office for further advice.

Document	Enclosed (please tick)	Validated (MCA Use Only)
Passport		
Or Photo Driver's Licence		



## 13B MASTER/SKIPPERS DECLARATION

### The maximum penalty for a false declaration is £5000

This is an application for exemption made under Section 48 of Chapter 21 of the Merchant Shipping Act 1995 from certain requirements of the Merchant Shipping (Boatmasters' Qualifications, Crew and Hours of Work) Regulations 2015

#### Data sharing

Data contained in this application may be shared with other statutory bodies or organisations to enable them to meet their statutory obligations and to inform statistics for research or statutory purposes. The data shared is limited to the applicant's name, exemption number, exemption expiry date and area and type of operations described on the exemption certificate.

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) and to the sharing of data in accordance with the previous paragraph. Please refer to our privacy statement in Section 2 of the guidance notes which explains how we use the personal information we collect from you.

Please sign this form in the centre of the Space opposite, in BLACK BALL POINT PEN, this will be transferred to your certificate



FOR OFFICIAL USE  
ONLY

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

Date.....

**PART C TO BE COMPLETED BY BOTH APPLICANTS**

**1C FEES DECLARATION**

**BOTH APPLICANTS MUST SIGN THIS DECLARATION**

There is currently no statutory fee for the issue of an exemption from the requirement to hold a Boatmasters Licence.

Those applicants who go on to apply for an MCA Boatmasters Licence after their exemption expires must complete the relevant underpinning knowledge and practical examination for the licence they require and pay the statutory fees for assessment and issue of a licence

I have have read and understood the guidance above.

VESSEL OWNER, AGENT OR  
MANAGER

Date.....

MASTER/SKIPPER

Date.....

## 14B CHECKLIST

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

Please  
tick (✓)

MCA Boatmasters Licence or alternative certificate/qualification	<input type="checkbox"/>	<input type="checkbox"/>
Pilotage Exemption Certificate	<input type="checkbox"/>	<input type="checkbox"/>
Ancillary Safety Training certificates or acceptable equivalents	<input type="checkbox"/>	<input type="checkbox"/>
Training Record Book (MSF 4367)	<input type="checkbox"/>	<input type="checkbox"/>
Medical Fitness Certificate	<input type="checkbox"/>	<input type="checkbox"/>
Testimonials	<input type="checkbox"/>	<input type="checkbox"/>
Passport or Driving Licence	<input type="checkbox"/>	<input type="checkbox"/>
Two passport photographs (please refer to section 7 of the guidance)	<input type="checkbox"/>	<input type="checkbox"/>

**THE DECLARATIONS AT SECTION 5A, 13B AND 1C MUST ALSO BE SIGNED AND DATED BEFORE THE APPLICATION IS SUBMITTED**

## 1C ASSESSMENT OF APPLICATION (MO)

### TO BE COMPLETED BY THE MO EXAMINER

Which circumstances apply (✓):

Provision of essential services

☐

Other

☐

If other provide further details below:

The type and area of operations for which exemption has been applied for would ordinarily require (✓):

Tier 1 Level 1

☐

Tier 1 Level 2

☐

Tier 2 Level 1

☐

Tier 2 Level 2

☐

List any specialist operations/local knowledge endorsements which would be required for Tier 1 scope applications below. Operations and areas for Tier 2 scope applications should also be described here.

## 2C ASSESSMENT OF APPLICANT (MO)

Requirements	Required? (✓)	Met? (✓) Yes/No
1 Sufficient relevant experience (generic QST plus any for endorsements)		
2 Specialist operations:		
Passenger Operations - General		
Large Passenger Vessel		
Cargo		
Oil/Chemical/Gas Cargoes		
Dredging		
Towing and Pushing		
Fast Craft		
Radar		
Local Knowledge (enter area(s) below)		
3 Generic UPK exam		
4 Completed TRB		
5 Practical boat handling test		
6 Safety training:		
Personal Survival		
First Aid		
Fire Safety		
7 Medical fitness evidence		
8 ID or existing MCA BML with photo		
9 Support from local navigation / harbour authority		

**3C EXAMINATION OF APPLICANT (MO)**

	Examination 1	Examination 2
<b>Exam</b>	<b>UPK</b>	<b>PBHT</b>
<b>Place / Area</b>		
<b>Date</b>		
<b>Vessel Type</b>		
<b>Result (Pass/Fail)</b>		
<b>Examiner Comments</b>		
<b>Examiner Name</b>		
<b>Examiner Signature</b>		

**4C SAFETY ASSESSMENT (MO)**

If any specific safety concerns have been identified they should be noted here.

## 5C INSTRUCTIONS TO STC

I recommend this application is (✓):

Approved

☐

Rejected

☐

Named Master	Specified Vessel & Official Number	Recommended Duration(Months)

Description Of Area And Type Of Operations (This text will appear on the exemption certificate)

Name & Signature
PRINT NAME
SIGNATURE

## 6C MO OFFICE ACTION

TO BE COMPLETED BY MO ADMIN

Action Taken	Date	Signature
Temporary Boatmaster file opened		
Relevant certificates present & validated		
ML5 form referred to Medical Assessor		
ML5 form returned from Medical Assessor		
File passed to STC		

**7C ASSESSMENT OF APPLICANT (STC)**

Application to be (✓):

Approved

☐

Rejected

☐

Name & Signature
PRINT NAME
SIGNATURE

**8C REJECTED APPLICATIONS**

Reasons for rejection to be noted here.

**9C APPROVED APPLICATIONS**

Exemption issued onValid until



**10C STC OFFICE ACTION**

**TO BE COMPLETED BY STC ADMIN**

Action Taken	Date	Signature
Refusal Letter Issued		
Details entered on Database		
Copy BVE on file		
BVE sent to applicant		
File sent to store		

<b>BVE No:</b>	
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## **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.**

**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.**

**WE ARE UNABLE TO ACCEPT APPLICATIONS BY FAX OR EMAIL.**

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

### **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 should 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.

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.

The exemption certificate will be returned to the owner/operator.

### **2. PRIVACY STATEMENT**

Personal information which you supply to us will be used to process your application to meet the applicable requirements. To check and report on how effective the MCA and the services it commissions have been. To make sure that the MCA gives value for money. We may use your information to investigate complaints, legal claims or important incidents. We may use your information for crime prevention and prosecution of offenders. The information you provide is primarily used for issuing your UK Boatmaster Licence but may also be used for other related purposes, and shared with other statutory bodies/organisations to enable them to fulfil their statutory obligations.

We will not disclose any financial details you provide to us. Once your payment has been processed all financial details are securely destroyed. For more information on how we use your information, and your rights to access information we hold on you, please see our full privacy policy available on our website:

<https://www.gov.uk/government/organisations/maritime-and-coastguard-agency>.

### **3. EXEMPTION APPLIED FOR**

Use this section to confirm details of the exemption applied for and provide any relevant information in support of the application. If you are unsure of the which exemption will be required you should refer to MSN 1853 or your local Marine Office.

**An exemption application is only appropriate where there is an urgent need for a master/skipper to take command of a vessel in circumstances where an essential service cannot be provided if no master/skipper were available, and no suitably qualified boatmaster is available to take charge of the vessel.**

**If approved, exemptions from the requirement to hold a Boatmasters Licence will be granted to a named master/skipper, for a specified vessel.**

**Applications where it can be demonstrated that another suitably qualified boatmaster is available to perform the role for which exemption has been applied for will not be considered.**

**Applications from skippers/masters who do not meet the minimum age and medical requirements for a Boatmasters Licence will not normally be considered.**

Exemption applications should not be used as a supplement to the requirement to employ a boatmaster qualified under the Regulations. For this reason a named master will only be considered for the issue of an exemption certificate once.

#### 4. LOCAL HARBOUR AUTHORITY

An owner/operator should contact the local harbour authority where they intend to operate with an exemption holder before making an application. Each application will be considered on its own merits but where the local harbour authority objects to an exemption being issued the application may be declined.

#### 5. MEDICAL FITNESS

All applicants must hold an ML5, ENG1 or acceptable alternative medical fitness certificate when they apply for an exemption.

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](http://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](http://www.gov.uk). Search for "MCA Approved Doctor".

#### 6. RELEVANT EXPERIENCE

Use this section to record details of any service time you have completed as a boatmaster or in similar capacities. It is important that you provide as much information as possible in this section as the information it contains will be used by the examiner to assess your suitability for an exemption. The time declared in this section should be supported by testimonials.

#### 7. DECLARATIONS

Please read the declarations carefully. 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

#### 8. CHECKLIST

Please ensure you tick (✓) each box to indicate that you have enclosed the documents. The supporting documents **must be original** unless otherwise indicated. Any applicant 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. They must also provide their details at Section 7. 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.

##### Declarations

All declarations contained in this form must be completed before an application will be considered.

#### 9. 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.

Please address any queries about your application to your local MCA Marine Office. Contact details are available from [www.gov.uk](http://www.gov.uk) .Search for “Marine Office”.

**NOW RETURN YOUR COMPLETED APPLICATION TO YOUR LOCAL MCA MARINE OFFICE**

**AN INCOMPLETE APPLICATION WILL DELAY THE ISSUE OF AN EXEMPTION**