



APPLICATION FOR A BOATMASTERS' LICENCE Boatmaster Exemption Certificate Holders

BML

IMPORTANT - BEFORE completing this form, please ensure you have read the guidance notes and instructions on pages 10 to 12. 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).

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			
	Full home address	Address for return of documents <i>(if different from home address)</i>	
Street/Name			
District			
Town/City			
County/State			
Post Code/Zip			
Country			
Telephone No			
Mobile No		Email	

2. DETAILS OF EXEMPTION CERTIFICATE HELD

Issuing Marine Office	
Expiry Date	

THE ORIGINAL BOATMASTER EXEMPTION CERTIFICATE (MSF 4369) MUST BE ENCLOSED WITH THIS FORM

Please do not write below this line

Received: <div style="height: 60px;"></div>	Fee: <div style="height: 60px;"></div>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">BML ID</td> <td></td> </tr> <tr> <td>Receipt No</td> <td></td> </tr> <tr> <td>BML No</td> <td></td> </tr> </table>	BML ID		Receipt No		BML No	
BML ID								
Receipt No								
BML No								

3. DETAILS OF SERVICE - All Applicants

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:

Qualifying Service Time (QST) must be within the past five years.

Please see section 4 of the guidance for further information on QST requirements.

Self-certification of service is not acceptable.

4. EXAMINATION AVAILABILITY - All Applicants

SOME APPLICANTS WILL BE REQUIRED TO UNDERGO A BOAT HANDLING TEST AND/OR TEST OF UNDERPINNING KNOWLEDGE BEFORE THEIR LICENCE 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.....

5. 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	

* 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.

6. IDENTITY DOCUMENTS - All Applicants

Please enclose your passport or photo driver's licence. It will be returned to you with your licence. 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.

7. DECLARATION

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

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, licence number, licence expiry date and any local or specialist operations endorsements held.

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 new licence.

FOR OFFICIAL USE
ONLY

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

Date.....

8. COUNTERSIGNATURE

Name			
Address			
Town / City			
County/State			
Post Code/Zip		Country	
Telephone No		Occupation	
Capacity in which you know the applicant			

I declare that the information given is, to the best of my knowledge, true and complete. I also declare that the documents submitted are, to the best of my knowledge, genuine and relate to the person(s) whose names appear on them. I confirm that the photographs submitted bear a true current likeness of the applicant.

Signed.....Date.....

9. CHECKLIST - All Applicants

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

Please
tick (✓)

Official
use only

Original Boatmaster Exemption certificate (MSF 4369)	<input type="checkbox"/>	<input type="checkbox"/>
Original Tier 2 BML (If held)	<input type="checkbox"/>	<input type="checkbox"/>
Passport or Drivers Licence	<input type="checkbox"/>	<input type="checkbox"/>
Two passport photographs (please refer to section 10 of the guidance)	<input type="checkbox"/>	<input type="checkbox"/>
Valid Medical Fitness certificate (please refer to section 6 of the guidance)	<input type="checkbox"/>	<input type="checkbox"/>
Ancillary Safety Training certificates	<input type="checkbox"/>	<input type="checkbox"/>
Pilotage Exemption certificate or relevant competent harbour authority letter (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
Work Record (MSF 4366)	<input type="checkbox"/>	<input type="checkbox"/>
Qualifying Service Time testimonials	<input type="checkbox"/>	<input type="checkbox"/>
Training Record Book (MSF 4367)	<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.

Some applicants will have submitted some of the documents in this checklist with their exemption application. These applicants should check with the Marine Office handling their application to confirm which documents are outstanding.

10. MCA MARINE OFFICE CHECKLIST - Official Use Only**TIER 2 LEVEL 2**

Standard Met/Assessment Complete Please tick (✓)				
Onboard Practical Assessment	Onboard Oral Assessment	Work Record/Testimonial s(Evidence of QST)	PEC/LK Exam Pass	Medical Fitness
Date	Date	Date	Date	Date

Reasons for Rejection		
Name	Signed	Date

TBML No	Date	Type	Name & Signature
			NAME
			SIGNATURE

MO OFFICE ACTION - Official Use Only**TO BE COMPLETED BY MO ADMIN**

Action Taken	Date	Signature
Temporary Boatmaster file opened		
Relevant certificates present & validated		
ML5 form referred to Medical Assesor		
ML5 form returned from Medical Assesor		
Original documents returned		

QUALIFYING CONDITIONS MET DATE:	
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11. INSTRUCTIONS TO RSS**- Official Use Only****TO BE COMPLETED BY MCA EXAMINER**

Please issue the following Tier 2 Level 2 licence:

Category and Area Name	Area description and limits (Indicate whether set area from MSN 1837, or other bespoke area)	Type of operation and any specific restrictions

Please indicate any operating restrictions below

Limits/Restrictions

Additional Notes/Instructions

12. FEE - Official Use Only

MO to indicate any outstanding fee to be collected by RSS here:

£

RSS OFFICE ACTION - Official Use Only

Action Taken	Date	Signature
Outstanding fee received		
Details logged on Database		
TBML No logged/Copy to file		
File sent to store		

BML No:	
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13. PAYMENT

- All Applicants

You must ensure you pay the appropriate fee (as laid down in the current Merchant Shipping Fees Regulations).

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".

Payment should be made in pounds sterling (£) by BACS transfer or credit/debit card via online payment facility **Gov.uk Pay** by following the links below.

We are unable to accept cheques, postal orders, banker's drafts or cash.

To pay via Gov.ukPay using a debit or credit card please use the following link: [Application for a Boatmaster's Licence](#)

If you wish to pay by BACS transfer, please email seafarer.finance@mcga.gov.uk

GUIDANCE NOTES FOR THE COMPLETION OF THIS APPLICATION FORM

PLEASE ENSURE THAT YOU READ AND UNDERSTAND MSN 1853 BEFORE COMPLETING THIS 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.

2. PRIVACY STATEMENT

Personal information which you supply to us will be used to process your application to meet the applicable Standards of Training Certification and Watchkeeping (STCW) 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 Certificate of Competency (CoC)/Certificate of Equivalent Competency (CEC) 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. DETAILS OF EXEMPTION CERTIFICATE HELD

Holders of a BML Exemption Certificate who meet the eligibility requirements will be issued with a Tier 2 Level 2 Boatmaster Licence unless otherwise agreed with the Marine Office that issued the BML Exemption Certificate. Any applicant unsure of their position should contact the Marine Office that issued their BML Exemption Certificate.

A copy of the BML Exemption Certificate should be held onboard the vessel while this application is being processed. The original certificate must be sent with this application.

Holders of BML Exemption Certificates must apply for their BML before the expiry of the exemption or by 4th April 2018, whichever is earliest. Applications received after this date will be treated as from a new entrant.

4. DETAILS OF SERVICE

You should use this section to record the details of your service logged in your work record and training record book

A completed work record or testimonials must support the information contained in Section 3 of the application form and the training record book. 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 template testimonial on page 13 can be used for testimonials for examples 2-4.

5. EXAMINATION AVAILABILITY

Some applicants will be required to complete a boat handling test and/or test of underpinning knowledge before their licence can be issued. The Marine Office handling your application will use the details you provide in this section to contact you and confirm a date for your test .

6. MEDICAL FITNESS

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

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".

7. 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 licence.

8. COUNTERSIGNATURE

You should obtain a counter signature from a responsible person who is NOT related to you and has known you for at least 2 years. They should enter their details in this section. This person must endorse the rear of one of your passport style photographs "I confirm that this is a true current likeness of [your name] and their usual signature and date. See also see Section 12 of the guidance notes on photographs.

9. 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 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 **MUST** be provided with this application, before an exam can be taken. 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. 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.

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"

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

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