



APPLICATION FOR A BOATMASTERS' LICENCE New Entrants

BML

IMPORTANT - BEFORE completing this form, please ensure you have read the guidance notes and instructions on pages 13 to 17. Please provide an email address in block capitals in order for us to inform you of the receipt of your application (see section 14 of the application form).

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 <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

2. CERTIFICATE APPLIED FOR

Tier	Level	Please tick one box
UK Boatmasters' Licence – Tier 1 (National)	Level 1	<input type="checkbox"/>
	Level 2	<input type="checkbox"/>
UK Boatmasters' Licence – Tier 2 (Specified Areas)	Level 1	<input type="checkbox"/>
	Level 2	<input type="checkbox"/>

BML ID

Please do not write below this line

Received: <div style="border: 1px solid black; width: 100%; height: 70px;"></div>	Fee: <div style="border: 1px solid black; width: 100%; height: 70px;"></div>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">BML ID</td> <td style="width: 50%;"></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	
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3. ANCILLARY SAFETY TRAINING - All Applicants

Boatmasters' Licence applicants 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 Please tick (✓)	Validated (MCA use ONLY)

4. UNDERPINNING KNOWLEDGE - Tier 1 Applicants Only

Those Tier 1 applicants with an underpinning knowledge examination pass certificate or relevant Maritime Studies Qualification Unit completion certificate should enclose the certificate with their application.

Course or Training	Course Provider	Validated (MCA use ONLY)
Level 1		
Level 2		

5. SPECIALIST OPERATIONS ENDORSEMENTS - Tier 1 Applicants Only

Please indicate below if you are applying for an endorsement, for further information please refer to section 4 of the guidance.

Specialist Endorsements	Please tick (✓) as appropriate
General Passenger Operations	
Large Passenger Vessel (more than 250 passengers)	
General Cargo	
Oil Cargo	
Chemical Cargo	
Gas Cargo	
Dredging	
Towing and Pushing	
Fast Craft	
Radar	
Ro-Ro Operations(Tidal waters)	

6. 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. Please see section 5 of the guidance for a list of areas which require local knowledge endorsements. Please indicate which areas you are applying for below:

Name(s) of Area(s)

7. 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:

Area(s) of Operation	Passenger operations		Non - passenger operations (please tick)					
	Y/N	Max no of passenger s	GC*	OC*	TP*	DR*	WB*	other

*Please see section 6 of the guidance on completing this table.

If you have ticked other please clarify below:

.....

.....

.....

8. 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.....

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 (✓)
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.

10. 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 your local Marine Office.

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.

12. 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 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.....

13. 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.....

14. 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 11 of the guidance notes.

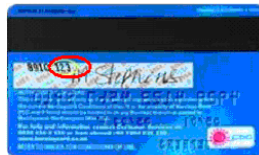
Please tick (✓) the appropriate box below to indicate your chosen method of payment.

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	<input type="text"/>
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.....

Receipts: If you would like confirmation your application has been received by the Marine Office and a receipt for your fee payment please tick (✓) the box below and confirm the email address these should be sent to:

Please confirm receipt of my application

Please issue me with a receipt

Email address:	<input type="text"/>
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15. CHECKLIST - All Applicants

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

	Please tick (✓)	Official use only
Passport or Drivers Licence	<input type="checkbox"/>	<input type="checkbox"/>
Two passport photographs (please refer to section 12 of the guidance)	<input type="checkbox"/>	<input type="checkbox"/>
Ancillary Safety Training certificates/Maritime Studies Qualifications units	<input type="checkbox"/>	<input type="checkbox"/>
Underpinning Knowledge pass certificate/Maritime Studies Qualifications units (if applicable)	<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"/>
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"/>
Valid Medical Fitness certificate (please refer to section 7 of the guidance)	<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.

16. MCA MARINE OFFICE CHECKLIST

- Official Use Only

Tier 1 Licence			
Standards Met	Yes	No	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):			
General Passenger Operations			
Large Passenger Vessel			
General Cargo			
Oil Cargo			
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			
Standards Met	Yes	No	Date
On-board Practical Assessment			
On-board Oral Assessment			
Sufficient Service			
Relevant items in Training Record Book (Completed satisfactorily)			
Work Record (Evidence of QST)			
Medical Standards			

Reasons for Rejection		
Name	Signed	Date

TBML No:	Date	Type	Name & Signature
			PRINT NAME
			SIGNATURE

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 Assesor		
ML5 form returned from Medical Assesor		
Original documents returned		

QUALIFYING CONDITIONS MET DATE:	
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17. INSTRUCTIONS TO RSS - Official Use Only

TO BE COMPLETED BY MCA EXAMINER

Please issue the following licence:

TIER 1

Please tick (✓)	
TIER 1 LEVEL 1	TIER 1 LEVEL 2
Details of Operating Restrictions or Restricted Validity (Please indicate below)	

Specialist Operations Endorsements Please tick (✓)			
General Passenger Operations		Liquified Gas Cargo	
Large Passenger Vessel		Dredging	
Towing and Pushing		Fast Craft	
General Cargo		Radar	
Oil Cargo		Ro-Ro Operations	
Chemical Cargo			

Local Knowledge Endorsements Please tick (✓)			
Bristol Port		Padstow Harbour	
Caernafon and Menai Strait		Port of Liverpool	
Dee Conservancy		Port of London (Thames Watermen)	
Dover Harbour		Portsmouth Harbour	
Fowey Harbour		Isles of Scilly	
Gloucester Harbour		Teignmouth	
Medway			

Please specify area of operations for Port of London(Thames Watermen) LKE here:

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TIER 2

Please tick (✓)		
TIER 2 LEVEL 1	TIER 2 LEVEL 2	
Details of Specified Area and Operations (Please indicate 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)		

18. 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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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. CERTIFICATE APPLIED FOR

Please tick (✓) the tier / level for which you are applying. Only tick ONE box.

3. 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

4. APPLYING FOR A TIER 1 LICENCE SPECIALIST ENDORSEMENTS

Please tick (✓) the specialist endorsement for which you are applying. Please see MSN 1853 for further guidance.

5. APPLYING FOR A TIER 1 LICENCE LOCAL KNOWLEDGE ENDORSEMENTS

Local Knowledge Requirements for areas where a Local Knowledge Endorsement is necessary. Please see MSN 1853 Section 7 and Annex 5 and 13 for further clarification.

Bristol Port – *The River Avon from Ashton Swing Bridge to the mouth of the Avon and King Road from Potishead Point to the port limits to the North and West.*

Caernafon and Menai Strait – *From the Southern Limit specified in the Menai Strait Pilotage District Pilotage Directions, that is an imaginary line joining positions 5309.6'N 00425.7'W (Malltraeth Bay); 5305.0'N 00432.15'W (Caernafon Bay) and 5300.55'N 00423.58'W (afon Hen, Clynnog) to a line drawn between Bangor Pier and Garth-y-Don.*

Dee Conservancy – *From an imaginary straight line connecting Point of Ayr (National Grid reference point SJ 12268519) and Hilbre Point (National Grid reference point SJ 20298843) to the Weir at Chester (Tidal Waters Limit).*

Dover Harbour – *The harbour and the sea within a distance of one mile from the seaward limits to the harbour.*

Fowey – *The upper estuary, north of Upper Carne Point.*

Gloucester Harbour – *The Severn estuary from the harbour limits at Goldcliff to the weirs at Maisemore, Lanthony (Gloucester) on the tidal River Severn.*

Medway - *The waters within a line from Garrison Point to Grain Tower thence west to shore-line and from the east limits of the Port of Sheerness to Rochester Bridge including the Swale as far as Shellness.*

Port of Liverpool – *The River Mersey from a straight line drawn between the Perch Rock Lighthouse and Gladstone River Entrance West Bullnose, south to a straight line drawn between the East Bullnose of Eastham 50' Lock and the West Bullnose of Stalbridge (Garston) Lock.*

Port of London (Thames Watermen)* – *The River Thames from Putney Bridge to Margaretness.*

Padstow Harbour – *The waters within a line joining Stepper Point, Gulland Rock and Pentire Point.*

Portsmouth Harbour – *The waters between No. 4 Bar Buoy and a line drawn from No. 98 Pile to Whale Island.*

Isles of Scilly – *The waters within a line drawn from Bishop Rock Lighthouse to Scilly Rock, Round Island, White Island, Hanjague and around the South East of St. Mary's.*

Teignmouth – *All waters east of a line joining Ness Point to Den Lighthouse.*

*Three individual endorsements are now available for the Port of London LKE Area. Applicants should refer to Section 7 of MSN 1853 for further guidance.

6. APPLYING FOR A TIER 2 LICENCE

The following table can be used to describe the type of operations:

GC	General Cargoes (including packaged dangerous goods)
OC	Oil Cargoes (including gas and liquid chemicals in bulk)
TP	Towing and/or pushing
DR	Dredging
WB	Workboat

Granting of additional areas on a Tier 2 licence is subject to MCA discretion, and will be limited to an adjacent area or an extension of existing operations. The addition of a completely different area or to accumulate a large number of areas is not permitted. Candidates wishing to increase scope substantially must obtain a Tier 1 licence.

7. MEDICAL FITNESS

All applicants must hold a valid 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”.

8. DETAILS OF SERVICE

Before you submit your application it is important that you check the Qualifying Service Time requirements in MSN 1853. MSN 1853 is available from www.gov.uk. Search "MSN 1853".

Testimonials must support the information contained in Section 11 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 template testimonial on page 17 can be used for testimonials for examples 2-4.

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 licence.

10. 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.

11. 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"

12. 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.

13. 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