

PD TEESPORT LIMITED

APPLICATION FOR A PILOTAGE EXEMPTION CERTIFICATE

1.	NAME: Surname:
	Forename(s):
2.	DATE OF BIRTH:
3.	NATIONALITY:
4.	HOME ADDRESS:
5.	NAME AND ADDRESS OF EMPLOYER:
6.	NAME AND ADDRESS OF OWNER/OPERATOR (if different from above):
7.	RANK HELD:
8.	DO YOU HAVE A WORKING KNOWLEDGE OF THE ENGLISH LANGUAGE?
9.	HAVE YOU EVER BEEN REFUSED A PILOTAGE EXEMPTION CERTIFICATE FOR ANY UK PORT?
	(If YES, please give details below:)
10.	HAVE YOU PREVIOUSLY HELD A PILOTAGE EXEMPTION CERTIFICATE FOR THIS PORT?
	(If YES, please give details below:)
	Certificate No:

11.	HAVE YOU BEEN INVOLVED IN ANY MARINE/NAVIGATIONAL INCIDENTS WITHIN THE 5 YEAR PERIOD PRIOR TO MAKING THIS APPLICATION?								
		(If YES, please give details below:)							
TEES	VTS CE	ENTRE VISIT:							
DATE	OF VISI	IT:(See Paragraph 4 of Guidance Not	tes)						
THE	FOLLOW	VING DOCUMENTS MUST ACCOMPANY YOUR APPLICATION:							
•	ASSES	SSMENT PASSAGE REPORTS (See Paragraphs 2 and 3 of Guidance Notes)							
•	A COP	PY OF YOUR CERTIFICATE OF COMPETENCY							
•	A COP	PY OF YOUR MEDICAL CERTIFICATE							
	NB:	Medical Certificates should be to a standard equivalent to that required by the Merchant Shipping (Medical Examination) Regulations 2002.							
FEE:									
An inv	oice will	be raised upon the issue/renewal of a Certificate. (See Paragraph 12 of Guidance Notes)							
DECL	.ARATIO	ON:							
		HAT ALL PARTICULARS GIVEN IN THIS APPLICATION ARE CORRECT AND TRUE TO T KNOWLEDGE:	HE						
Signa	ture:	Date:							
COR	RESPON	IDENCE ADDRESS:							
PD Te	our Maste eesport Li	_imited							
Ferry	Road	er's Office							
MIDD TS2 1	LESBRO PL	DUGH							
Tel: Email		2) 277201 (Office hours only) urmaster@pdports.co.uk							

PD TEESPORT LIMITED

SUMMARY OF PASSAGES MADE INTO THE PORT AREA WITHIN THE 12 MONTH PERIOD IMMEDIATELY PRIOR TO THIS APPLICATION

Name of Vessel	Date of Passage	Arrival/ Sailing	Daylight (√)	Dark (√)	Piloted (√)	Unpiloted (√)	Tug (√)	Name of Berth	Rank Held
		Arrival	,				, ,		
		Sailing							
		Arrival							
		Sailing							
		Arrival							
		Sailing							
		Arrival							
		Sailing							
		Arrival							
		Sailing							
		Arrival							
		Sailing							

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Signature of	Applicant:	 	

Summary of Passages - Continued

Name of Vessel	Date of Passage	Arrival/ Sailing	Daylight (√)	Dark (√)	Piloted (√)	Unpiloted (√)	Tug (√)	Name of Berth	Rank Held
	1 assage	Canning	(*)	(*)	(*)	(*)	(*)		
		Arrival							
		Sailing							
		Arrival							
		Sailing							
		Arrival							
		Sailing							
		Arrival							
		Sailing							
		Arrival							
		Sailing							
		Arrival							
		Sailing							

Signature of Appl	icant:	

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SUMMARY OF VESSEL DETAILS

NAME OF VESSEL	CALL SIGN	IMO NUMBER	TYPE	DWT	LOA	MAIN ENGINE POWER IN KILOWATTS	THRUSTER POWER IN KILOWATTS		
							Forward	Aft	