



ASSOCIATED BRITISH PORTS

HUMBER PILOTAGE AREA

APPLICATION FOR A PILOTAGE EXEMPTION CERTIFICATE

SURNAME OF APPLICANT _____
CHRISTIAN NAMES _____
HOME ADDRESS _____

_____ **TELEPHONE NO** _____
DATE OF BIRTH _____ **AGE** _____ **NATIONALITY** _____

CERTIFICATE OF COMPETENCY

CLASS _____ **NUMBER** _____ **DATE ISSUED** _____
ISSUED BY _____

CERTIFICATE OF SERVICE

ISSUED BY _____ **NUMBER** _____ **DATE** _____

DETAILS OF VESSEL FOR WHICH CERTIFICATE REQUIRED

NAME _____ **CLASSIFICATION SOCIETY NO** _____
LENGTH OVERALL _____ **GROSS TONNAGE** _____
PORT OF REGISTRY _____
OWNERS _____
ADDRESS _____
_____ **TELEPHONE NO** _____

(If more than one vessel is to be named on the Certificate please furnish full details on the continuation sheet attached)

DANGEROUS SUBSTANCES

Does the vessel carry Dangerous Substances in Bulk? _____

DECLARATION OF APPLICANT

I hereby declare that the above information is correct and I confirm that:-

- (a) I have studied and am familiar (where applicable) with the following:-
 - (i) The Humber Navigation Byelaws 1990 (revised August 1997)
 - (ii)* The Dangerous Substances in Harbour Areas Regulations (1987) ISBN 0 11 076037 9
 - (iii)* The Merchant Shipping (Reporting Requirements for ships carrying Dangerous or Polluting Goods) Regulations 1995
 - (iv) The Humber Serious Marine Emergency Plans (HSMEP) Revised 2001
 - (v) Current local Notices to Mariners.
 - (vi) The Regulations for the time being concerning Pilot Authorisation Procedures for Pilotage Exemption Certificates and Associated Matters (“the Regulations”)

(b) I have a satisfactory working knowledge of the English Language

(c) I understand and will abide by the Regulations

(*Obtainable from H.M.S.O.)

Signed _____ Date _____

Print Name _____ Position _____

DECLARATION/WARRANTY BY OWNER/OPERATOR

1. We confirm that to the best of our information knowledge and belief the information contained in this form is correct and that the Applicant is of sober habits and of good conduct.
2. We warrant that we are the Owners of the vessel to which this application refers or that we are duly authorised by the Owners to make these declarations on their behalf and that we do so on their behalf as well as on our own behalf and that we accept the Pilotage Directions and Supplementary Provisions on our own behalf as well as on the Owner's behalf.
3. Subject to ABP indemnifying us against any expense that we incur should we be able to demonstrate that the suspension was imposed without any reasonable grounds, we will ensure that the Applicant will not use any Pilotage Exemption Certificate whilst he is suspended and should we cease to be the owner or operator of the vessel to which the Pilotage Exemption Certificate applies, we will procure that the new owner/operator will give a similar assurance to ABP.
4. We confirm that we will take all reasonable steps to ensure that any information published or circulated by ABP in connection with navigation within the Humber Pilotage Area will be distributed by us to the holder of the certificate to which this application relates.

FOR AND ON BEHALF OF OWNER/OPERATOR

(Name of Company) _____

COMPANY STAMP

Signed _____

Name _____

Position _____



ASSOCIATED BRITISH PORTS

I hereby certify that Mr
 attended on the bridge of the tug
 during towage of the vessel mv
 into/out of* Dock/Jetty* on 20.....

***delete as necessary**

Signed(Tug Master)

✂.....



ASSOCIATED BRITISH PORTS

I hereby certify that Mr
 attended on the bridge of the tug
 during towage of the vessel mv
 into/out of* Dock/Jetty* on 20.....

***delete as necessary**

Signed(Tug Master)