

HUMBER PILOTAGE AREA

APPLICATION FOR RENEWAL OF PILOTAGE EXEMPTION CERTIFICATE

NAME OF CERTIFICA	TE HOLDER			CERTIFICATE NUMBER						
MASTER /CHIEF OFFI	CER (Please	dele	ete as neces	sary) MAXIN	IUM LENGTH C	F VESSELS ON CI	ERTIFICATE			
Return of Voyages ma	de by the Ce	rtifi	cate Holder	during the 12 Mont	hs to 30 th June	(6 in / 6	out)			
				INWARD BOUND			OUTWARD BOUND			
NAME OF VESSEL	N	lo	DATE	FROM	то	DATE	FROM	то		
	1									
	2									
	3									
	4									
	5	1								
	6									
Company Stamp For and on behalf of:- Name of Company			-				OFFICE USE ONLY Date Renewed			
	Signed						Received Payment		YES / NO	
	Name						Comments:			
	Position in Company									
	Date									