



Australian Government

Australian Maritime Safety Authority

Application for exemption, equivalence or other matters

This form should be completed to apply for an Exemption, Equivalence, Waiver, Determination, Letter or Other matter under the *Navigation Act 2012*, associated Marine Order series 1 to 97, Marine Order 98 Marine pollution—anti-fouling systems, or Convention (given effect to by a Marine Order) giving the power for the Exemption, Equivalence, Waiver, Determination, Letter or Other matter.

NOTES

1. Fees

A fee for determining exemptions or equivalences applies in accordance with the Australian Maritime Safety Fees Determination 2015. The hourly assessment fee is set at \$272 for each hour. If a decision is made to refuse your application a fee will still remain payable by the applicant. More information about fees is available on the AMSA website - <http://www.amsa.gov.au/vessels/levies-fees-charges/>

2. Processing Timeframes

Application processing times will vary; however, we will provide you with a decision within 90 days of receipt of a complete application. This 90-day period will be extended if we ask you for more information.

3. Incomplete Applications

Incomplete applications will not be accepted and will be returned to the applicant or recognised organisation.

4. Guidance

Before making an application, carefully consider whether you can comply with the *Navigation Act 2012*.

Under sections 334(5) and 334(6) of the *Navigation Act 2012*, or as stated with applicable Marine Order in the series 1 to 97 the Australian Maritime Safety Authority must not grant an exemption unless satisfied that the exemption concerned, taken together with the conditions to which it will be subject:

- Must not be inconsistent with an obligation of Australia under an international agreement.
- Jeopardise the safety of a vessel or a person on board a vessel or contravene
- Compliance with the requirement would be unnecessary or unreasonable having regard to the vessel, its equipment and its intended voyage.
- Giving an Exemption or approving and Equivalence would not contravene the Convention or the Marine Order to which it relates.

A. Determining the applicant

1. Are you making this application for a vessel that you own? Yes No
2. Are you making this application on behalf of the vessel owner¹? Yes No
3. If you are making this application on behalf of another party, do you have authority to act as an agent for the purposes of this application and associated correspondence? Yes No
4. If the answer is yes, please provide a copy of the authority with your application (refer Page 5). Attached

B. Applicant details

Title (Mr, Mrs, Ms, etc.)	Surname	Given name/s
<input type="text"/>	<input type="text"/>	<input type="text"/>

Company / Business name

Trading name (if different to company name / business name)

ACN	ABN
<input type="text"/>	<input type="text"/>

Street name and number	Town / suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

¹ Note: where the vessel is in class with a recognised organisation (RO), this application must be reviewed and endorsed in section F by the RO prior to submission.

Postal Address

Same as street address

Town / suburb

State

Postcode

Phone

Mobile

Email

C. Vessel owner

Same as Section B.

Please complete the following details if this application is about a vessel, and the vessel owner is different to the applicant.

Title (Mr, Mrs, Ms, etc.)

Surname

Given name/s

Company / Business name

Trading name (if different to company name / business name)

ACN

ABN

Street name and number

Town / suburb

State

Postcode

Postal Address

Same as street address

Town / suburb

State

Postcode

Phone

Mobile

Email

D. Vessel details

Vessel name

Official number

IMO number

Vessel length (m)

Load line length (m)

Call sign

Port of registry

Vessel type (e.g. cargo, passenger)

Date keel laid

Gross tonnage (GT)

1. Type of variation being requested:

Exemption Equivalence Waiver Determination Other

2. What Marine Order or legislation applies to the application? (e.g. Marine Order XX, Schedule X, Division X) .

3. What reference documents are relevant to the application request? (e.g. SOLAS Ch XX, National Standards for Commercial Vessels, etc).

Regulatory Reference (e.g. SOLAS, MARPOL, COLREGS, NSCV)	
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Description of regulatory requirement	
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4. Describe the non-conformance?

5. Is there an extraordinary reason why you cannot comply with the relevant provision of the Navigation Act 2012?

6. How long is the exemption required for, and why is the exemption required for this period of time?

7. What are the possible consequences of the deviation from the requirements?

8. What arrangements do you propose to implement to ensure that the safety of the vessel, and other vessel(s), and persons on board will not be jeopardised?

9. Comments from applicable recognised organisation

E. Operational particulars

What service category is the vessel (refer to Marine Order 1)

Number of passengers (if any)

Number of crew

Number of special personnel

Intended maximum number of persons aboard

Describe the current operation (e.g. unmanned non-self propelled barge)

If applicable, describe the *proposed* operation (e.g. manned crane barge conducting construction works in smooth waters)

F. Endorsement by the recognised organisation (if applicable)

Please complete the following details if this application is about a vessel which is in class and certified by an Australian Maritime Safety Authority recognised organisation:

Endorsement by:

Name of endorsing surveyor:

Title (Mr, Mrs, Ms, etc.)

Surname

Given name/s

Designation of endorsing surveyor:

Phone

Mobile

Email

G. Invoicing details

Company name

Person responsible

Email (you can have multiple emails and must include your company's account email):

Company address/postal address

Purchase order number (if applicable)

Will the cost need to be advised to generate a purchase order number (Y/N)

Please ensure the invoicing details are correct. Once confirmed and the invoice has been issued, any request to change the invoice will incur additional charge.

H. Applicant's declaration and consent

I declare that:

- to the best of my knowledge the information provided by me in this application (and any attachments I have included with this application) is true and correct.
- I consent to the Australian Maritime Safety Authority, making all reasonable enquiries in order to verify that the information provided by me in this application (and any attachments I have included with this application) is true and correct.
- I understand and acknowledge that the Australian Maritime Safety Authority, may ask that I provide any information or document that the Australian Maritime Safety Authority reasonably consider necessary for consideration of this application.
- I understand and acknowledge that the Australian Maritime Safety Authority, may ask another person to provide any information, document or agreement that the Australian Maritime Safety Authority reasonably considers necessary for consideration of this application.
- I have authority to make this application.

Signature

Name

Date

Where to lodge: lodge via email to fsc@amsa.gov.au or by post to Flag State Control, AMSA, GPO Box 2181, Canberra ACT 2601

Privacy Statement

The collection of information requested in this form is required or authorised by the *Navigation Act 2012* (the Nav Act). It will be used for purposes related to the Act and may be provided to Australian Commonwealth or International Flag Administrations for the purposes of marine safety. Failure to provide the information may result in the transaction not being processed. To contact us, or for more information on how to access or correct your personal information, how to make a privacy complaint, or how your information may be used or disclosed for purposes beyond those described in this statement, visit www.amsa.gov.au/privacy/

Sample authority to act notification:

I, FULL NAME of ADDRESS authorise FULL NAME (or company name if applicable) of ADDRESS to act on my behalf with my dealings with AMSA so far as it pertains to an application for exemption/equivalent solution.

A photocopy/scan of this authority is a valid authority.

Signature

Print Full Name

Date