

Single Voyage Permit

APPLICATION FOR A PERMIT TO MAKE A SINGLE VOYAGE OUTSIDE OF RESTRICTED OR COASTAL LIMITS (MSF117)

1. Reason for the application

The permit is for a vessel that has been assigned:

- Restricted limits and needs a permit to make a single voyage within coastal limits
 Coastal limits and needs a permit to make a single voyage within offshore limits

The vessel undertaking the voyage is a:

- Passenger vessel
 Non-passenger vessel
 Fishing vessel
 Sailing vessel

The permit will be used for?

- A delivery
 Repair, inspection, dry docking or slipping, trials or tests
 Repositioning between different restricted limits

2. Applicant's details

Title: Mr Mrs Ms Miss

Given name(s): _____ Surname: _____

Phone (daytime): _____ Fax: _____

Mobile: _____

Postal address: _____

City: _____ Post code: _____

Physical address for service: _____

Preferred form of contact (*tick one only*)

- E-mail Post Phone Fax

E-mail Address: _____

3. Vessel details

Vessel name: _____

MNZ number: _____

Full name of the vessel owner(s) eg name of the organisation, individual or group of individuals:

Has a surveyor approved this vessel to undertake the proposed voyage?

Yes – please provide a copy of the Certificate of Survey

No

4. Voyage details

Estimated departure date: _____ Estimated arrival date: _____

Departure port: _____ Arrival port: _____

What is the maximum amount of time that you need this permit to be valid in order to complete your proposed voyage?
Note: the requested timeframe should not exceed more than 2 months.

5. Navigation and communications

Tick which of the following navigation and communication equipment will be carried on board this vessel for the proposed voyage:

MH/HF Radar VHF GPS Hand held VHF Call sign

Other: _____ MMSI No: _____

Who will be the shore-based and/or emergency contact(s) for the proposed voyage?

First Contact:

Name: _____ Contact number: _____

Physical address: _____

Second contact (optional):

Name: _____ Contact number: _____

Physical address: _____

6. Emergency equipment

Lifejackets

How many lifejackets will be on board this vessel for the proposed voyage? _____

Do they have a minimum buoyancy of 100N? Yes / No

The number of life jackets must be at least the same number as the people that will be on board the ship for the proposed voyage.

Flares

How many rocket flares will be on board this vessel for the proposed voyage? _____

How many smoke flares will be on board this vessel for the proposed voyage? _____

There must be a minimum of 4 rocket flares and 2 smoke flares on board the vessel for the proposed voyage.

Life raft

Will there be a life raft on board this vessel during the proposed voyage? Yes / No

What is the maximum capacity of the life raft? _____

What date was the life raft last serviced? _____

The life raft must be able to carry the same number of people that will be on board the vessel for the proposed voyage.

7. Manning

How will this vessel be crewed for the proposed voyage?

Proposed crew (you can add in other crew roles that are not listed in the blank rows)	Full name	Proposed number on board	Certificates
Master			
Engineer			
Watchkeeper			

8. Checklist

In order to process your application a copy of the following documents need to be provided to Maritime NZ:

- Voyage plan
- Certificate of Survey

9. Applicant declaration

I declare that to the best of my knowledge and belief, the statements made and the information supplied in this form and the attachments are true, complete and correct. Should any of the information change within this application, I will notify Maritime NZ ahead of that change.

I understand that providing fraudulent, misleading or false information to Maritime New Zealand is an offence under section 406 of the Maritime Transport Act.

As per rule 20.43, I confirm for the proposed voyage:

- no passengers will be carried on board; and
- the vessel will not be used for hire or reward.

As per any of rules 40A, 40C, 40C or 40E that apply to this particular vessel, I confirm that for the proposed voyage:

- the most recent charts and nautical publications will be carried on board for the covered area; and
- the voyage will only be made under favourable conditions.

I authorise the collection by the Director of Maritime New Zealand or his/her delegate (hereinafter referred to as "the Director") from, and the disclosure to the Director by, any person, organisation or government department of any details of my knowledge and compliance with transport safety regulatory requirements.

I authorise the Director to use, and disclose, the information obtained about me for any purpose under the Maritime Transport Act 1994, or other such purpose permitted by law.

Applicant's name:

Signature:

Date:

10. Surveyor declaration

I declare that to the best of my knowledge and belief the statements made, the information supplied in support of this application and any attachments are complete and correct.

I confirm that, as per rule 40, any relevant survey or safety requirements under the maritime rules that apply because of the ship's proposed area of operation are complied with.

I authorise the collection by the Director of Maritime NZ or his/her delegate (hereinafter referred to as "the Director") from, and the disclosure to the Director by any person, organisation or government department of any details of my knowledge and compliance with transport safety regulatory requirements.

I authorise the Director to use, and disclose the information obtained about me for any purpose under the Maritime Transport Act 1994, or other such purpose permitted by law.

Surveyor's name:

Signature:

Date:

11. Information guide

Fees and Payment

There is a fee for your application. This is charged at an hourly rate of \$245 (including GST). Refer to the Maritime NZ website for information about fees.

maritimenz.govt.nz/fees

Invoice

You will be invoiced once we have processed your application. A reference number and instructions explaining how to pay will be sent with the invoice.

Refer to the Maritime NZ website for more information about how to pay.

maritimenz.govt.nz/howtopay

You need to specify the name and address if the operator is a group of individuals, or if you want the invoice made out to a different entity or individual.

Name to use on invoice:

Postal address:

City:

Country:

Post code:

Payment:

Please tick to indicate how you want to pay the application fee:

Pay online using a credit or debit card

Internet banking or bank deposit

Where to send your application

Send your application form and completed plan and the other documents required to Maritime NZ by email, courier or post.

Email your application to:

operators@maritimenz.govt.nz

Or

Courier your application to:

Operator Certification
Maritime New Zealand
1 Grey Street
Wellington 6011
NEW ZEALAND

Or

Post your application to:

Operator Certification
Maritime New Zealand
PO Box 25620
Wellington 6140
NEW ZEALAND