



BoatCode Application for a Hull Identification Number (HIN)



Important – To obtain a HIN the applicant must complete Section 1; and

- Provide Proof of Identity (PoI). For a full list of acceptable documents visit: www.transport.wa.gov.au/imarine/boatcode-and-hin.asp
- Provide Proof of Acquisition (PoA) (*a copy of Bill of Sale, Receipt, Consignment Note*) for the purchase of the vessel or complete a Statutory Declaration.
- If the vessel is registered, provide a copy of the vessel's registration certificate.
- Applicants who are unable to present this application in person may elect a representative to act on their behalf. Both the applicant and representative must provide proof of identity. Section 2 must be completed by the representative and authorised by the applicant.

SECTION 1: Details of applicant

Organisation (*Block Letters*): _____ ACN _____

Surname: _____ Other Names: _____

Date of Birth (*dd mm yy*): Vehicle Driver's Licence No.

Residential Address: _____
(PO Box No. is not acceptable. HIN will not be issued unless residential address is supplied)

Suburb: _____ State: _____ Postcode: _____

Telephone Private: (____) _____ Business or Mobile: _____

Postal Address: _____ Suburb: _____ State: _____ Postcode: _____
(If different to residential)

Email Address: _____

SECTION 2: Details of applicant's representative (*if applicable*)

Representative's Surname: _____ Other Names: _____

Date of Birth (*dd mm yy*): Vehicle Driver's Licence No.

Residential Address: _____
(PO Box No. is not acceptable. HIN will not be issued unless residential address is supplied)

Suburb: _____ State: _____ Postcode: _____

Email Address: _____

Authority to Represent

I hereby authorise: (*please print*) _____

to act as my representative for the purpose of affixing a HIN to my vessel.

Applicant's Signature: _____ **Representative's Signature:** _____

Applicant's Declaration

I hereby declare that the above information is true and correct.
I understand that if any detail is found to be incorrect this HIN may be cancelled without notice.

Applicant's Signature: _____ **Date:** _____ / _____ / _____

Boatcode Examiner Use Only

EXAMINER USE ONLY – POI **APPLICANT** **REPRESENTATIVE**

Full Proof of ID Type: _____ Document No. _____

Primary Proof of ID Type: _____ Document No. _____

Secondary Proof of ID Type: _____ Document No. _____

Signature of Authorised Officer (BoatCode Examiner): _____

Official Stamp

EXAMINER USE ONLY – VESSEL DETAILS

Registration Number: _____ Vessel Name: _____

Vessel Type: _____ Hull Material: _____ Hull Colour: _____

Manufacturer's Name: _____ (if known) Manufacturer's Model: _____ (if known)

Hull Length (L_H) in metres: _____ **NOTE:** The L_H is measured from the foremost point of the bow to the aftermost point of the transom, excluding bow sprits, outboard motors and other appendages.

If the above details are not the same as those on the vessel registration certificate, please circle the changes.

EXAMINER USE ONLY – ENGINE DETAILS (If more than two engines please supply details on separate sheet)

Engine Particulars – 1st engine (engine serial numbers must be provided)

Fuel:- Petrol Diesel Other

Propulsion:- Inboard Outboard Sterndrive Jet Sail

Manufacturer's Name: _____ Serial No. _____

Engine Horsepower: _____

Engine Particulars – 2nd engine (engine serial numbers must be provided)

Fuel:- Petrol Diesel Other

Propulsion:- Inboard Outboard Sterndrive Jet Sail

Manufacturer's Name: _____ Serial No. _____

Engine Horsepower: _____

EXAMINER USE ONLY – HIN EXAMINER DETAILS

BoatCode Provider Name: _____ Examiner Name: _____

- Have you: Checked the Applicants or Representatives ID? Yes No
 Photocopied the Proof of Acquisition Documents? Yes No
 Checked the Statutory Declaration if applicable? Yes No
 Signed the POI Section of this application? Yes No

	Country Code	Authority Code	Plate Serial Number	Agent Code	Year Issue
HIN					
Manufacturer's Format	Country Code	MIC Code	Serial Number	Prod. Month	Prod. Year

HIN Certificate Number:

Examiner's Signature: _____ Examiner Number: _____ Date: _____

HIN Examiner must attach this Application for HIN to the original (blue) HIN Certificate and POA documents and forward to the — Department of Transport, GPO Box C102, PERTH WA 6839 — within five (5) working days of issue.