



This application must be completed, signed and submitted to the Department of Transport (DoT) for consideration and if approved a "Commercial Mooring Licence" will be issued. Please be advised that installation of the mooring and use of the relevant waters for the mooring MUST NOT commence prior to the receipt of approval/notification from the Department of Transport.

SECTION ONE: APPLICANT DETAILS (Potential Details)

Full Name of Applicant (contact person):
Company Name: ABN:
Postal Address:
State: Postcode:
Phone: (W) Fax:
Mobile: Email:

SECTION TWO: PURPOSE OF MOORING

Please outline the intended purpose and justification for the proposed Commercial Mooring Licence:
Is the mooring relevant to a specific Resource Project: Yes No
If Yes please provide details of the Project:
Outline the relationship between the applicant and the Project:
Please attach a copy of endorsement/memorandum of Associated/Certificate of Incorporation or other documented proof of affiliation.

SECTION THREE: PROPOSED MOORING LOCATION DETAILS

Moorings Location (Area): Region:
DGPS Position (degrees and decimal minutes):
Latitude Longitude:
Chart Datum: Bottom Type:
Water Depth:

SECTION FOUR: DESCRIPTION OF SEABED (Please tick)

Sand Sand and Mud Coral Mud Sand and Rock Seagrass Reef
Other (please specify)

SECTION FIVE: DESCRIPTION OF SEABED (Please tick)

Moorings Type: Cyclone Operational/Day General Single Use Multiple Vessel Use

Permanent Installation Temporary Installation (specify duration) _____

Anticipated date of installation if approved _____

If operational, please provide a brief description of intended use: _____

SECTION SIX: PROPOSED LICENSED VESSEL OWNER DETAILS

REGISTERED OWNER DETAILS:

Full Name of Applicant (contact person): _____

Company Name: _____ ABN: _____

Postal Address: _____

State: _____ Postcode: _____

Phone: (W) _____ Fax: _____

Mobile: _____ Email: _____

SECTION SEVEN: PROPOSED LICENSED VESSEL DETAILS

Vessel Name: _____

Vessel Registration/Survey Details IMO Number: _____

Nationality/Port of Registry: _____ Hull Construction: _____

Vessel LOA Metres: _____ Vessel Type: _____

Vessel Gross Tonnage: _____ Vessel Draft: _____

SECTION EIGHT: MAXIMUM MOORING CAPACITY

Maximum Mooring Loading (tonnes): _____

Maximum Vessel Gross Tonnage: _____ Maximum Vessel Length (LOA): _____

Maximum Mooring Swing: (metres) _____ Vessel Draft: _____

SECTION NINE: HAWSER DETAILS

Length of Hawser: _____

Material of Hawser: _____

Is the Hawser certified: Yes No Age of Hawser: _____

Certification Number: _____ Date: ____ / ____ / ____

SECTION EIGHT: CONTRACTORS DETAILS for CYCLONE MOORING

Full Name (contact person): _____ Company Name: _____

Postal Address: _____

State: _____ Postcode: _____ Email: _____

Phone: (W) _____ Fax: _____ Mobile: _____

SECTION EIGHT: CONTRACTORS DETAILS for OPERATIONAL/GENERAL USE MOORING

Full Name (contact person): _____ Company Name: _____

Postal Address: _____

State: _____ Postcode: _____ Email: _____

Phone: (W) _____ Fax: _____ Mobile: _____

SECTION TEN: CONSULTATION

Have you consulted with other Government Agencies e.g. Department of Environment and Conservation (DEC), Port Authorities, Department of Fisheries, R.D.L (Lands), stakeholders in relation to this application? If yes please list all agencies consulted and provide relevant responses or approvals: _____

Please attached all relevant consultation documents

SECTION ELEVEN: NOTICE TO MARINERS (NTM)

Please be advised that the Department of Transport (DoT) may be required to post a "Notice to Mariners" for some installations. The applicant will be responsible for all associated costs for this process. The Commercial Mooring Installation Approval Notification will indicate if this will be necessary and provide further details.

SECTION TWELVE: APPLICANT SIGNATURE

I declare that the contents of this form to be true and correct and understand that my role and duties in accordance with the Commercial Mooring Licence requirements.

I hereby declare that

- Mooring has been designed fit for purpose by a recognised Contractor with current insurance (public liability, Professional indemnity, product insurance)
- The mooring will be utilised in accordance with the above Mooring Contractors Mooring analysis, design and specifications
- I have provided the above mooring contractor geotechnical/Bathymetric specifications and analysis to determine a safe, fit for purpose mooring design to safely maintain the above vessel at the designated position at all times.
- I have ensured that the nominated vessel is within the specified dimensions of the mooring design and specifications.
- I have Current Insurance (Public Liability, Personal Indemnity) \$10,000,000

I can provide, should the Department of Transport require copies if the following within 7 days of a request to do so

- Mooring analysis, design and specifications,
- Contractor current Insurance details
- Copy of Endorsement / Memorandum of Association or Certificate of Incorporation if not a natural person)
- Relevant Consultation /Geotechnical documentation
- Current Insurance Policies (Personal Indemnity, Public Liability)
- Pollution contingency plan.

I understand that I cannot install or use this mooring *prior* to approval by The Department of Transport in the form of a Commercial Mooring Site Licence. I understand this mooring will only be used in accordance with Mooring design specifications and Commercial Mooring Site Licence terms and conditions. Please be advised that this information may be released to relevant stakeholders for comment.

Company Name: _____

Name: _____

Signature: _____ Date: ____ / ____ / ____

****All sections of this form MUST BE completed for consideration. INCOMPLETE forms will not be considered****

Please forward complete form to:

Moorings Officer
Marine Safety, Department of Transport
GPO BOX C102
FREMANTLE WA 6839
Phone: 13 11 56

Email: moorings@transport.wa.gov.au | Web: www.transport.wa.gov.au/imarine

Office Use Only	NSQ Reference Number:	Date: ____ / ____ / ____
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