



# APPLICATION FOR ACCREDITATION AS A MARINE SURVEYOR (NON-GOVERNMENT)

## A. Applicant details

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

Date of birth	Nationality	Place of birth (town, state, country)
<input type="text"/>	<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"/>

Postal Address

Same as street address

<input type="text"/>	Town / suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Phone	Mobile	Email
<input type="text"/>	<input type="text"/>	<input type="text"/>

If you have a company relating to survey, or are employed by such a company

Company or trading name	ABN / ACN
<input type="text"/>	<input type="text"/>

List the geographical area(s) in which you are most likely to be conducting your survey business (e.g. Gold Coast, Port Lincoln)

## B. Categories of accreditation

Please indicate the categories you are applying for accreditation.

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| (a) Initial survey – plan approval   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (b) Initial survey – stability approval  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (c) Initial survey – loadline – assignment   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (d) Initial survey – electrical – extra low voltage                                | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (e) Initial survey – electrical – low voltage                                      | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (f) Initial survey – electrical – high voltage                                     | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (g) Initial survey – construction or alteration – hull, deck and superstructure    | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (h) Initial survey – construction or alteration – machinery                        | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (i) Initial survey – construction or alteration – loadline conditions and markings | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (j) Initial survey – construction or alteration – equipment                        | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (k) Initial survey – construction or alteration – commissioning                    | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (l) Periodic survey  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (m) Periodic survey – electrical   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (n) Periodic survey – loadline   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (o) Survey of safety equipment   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (p) Survey of communications equipment   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

List any areas where your qualifications or experience is limited (e.g. length, hull material, propulsion type/size etc.)

## C. Suspension / revocation

Have you ever held accreditation (however described) as a marine surveyor which has been suspended or revoked?  Yes  No

Have you ever had your membership of a professional association related to vessel building, vessel design, vessel engineering or vessel survey revoked, suspended or involuntarily cancelled?  Yes  No

If 'Yes', please provide details below

## D. Professional referees

### First referee

Title (Mr, Mrs, Ms, etc.)	Surname	Given name(s)		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Length of relationship	Relationship	Place of employment and position		
<input type="text"/>	<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"/>	
Postal Address	Town / suburb	State	Postcode	
<input type="checkbox"/> Same as street address	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Phone	Mobile	Email		
<input type="text"/>	<input type="text"/>	<input type="text"/>		

### Second referee

Title (Mr, Mrs, Ms, etc.)	Surname	Given name(s)		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Length of relationship	Relationship	Place of employment and position		
<input type="text"/>	<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"/>	
Postal Address	Town / suburb	State	Postcode	
<input type="checkbox"/> Same as street address	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Phone	Mobile	Email		
<input type="text"/>	<input type="text"/>	<input type="text"/>		

## E. Satisfaction of eligibility requirements

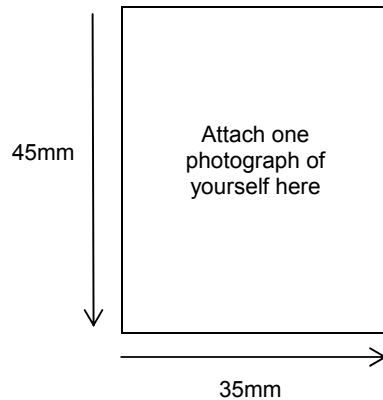
### Checklist of documents to be attached or sighted:

- A copy of your current curriculum vitae.
- A certified copy of each of your qualifications relevant to the application.
- Evidence that you can, or will soon be able to, conduct your surveying either:
  - under the Quality Management System of ISO 9001:2008 or an equivalent management system; or
  - in accordance with the *National Law – Marine Surveyors Accreditation Guidance Manual 2014*.  
This may be a certificate of compliance with ISO or letter of undertaking.
- A copy of the professional indemnity insurance certificate, or similar document, that provides indemnity insurance for you of at least \$1,000,000, or if you have not yet obtained insurance, a copy of a quote for insurance.
- Evidence of current professional association membership. This may be certificates or letters issued by an association or associations confirming membership.
- Evidence of any continuing professional development you have or are currently undertaking with a professional association related to vessel survey, vessel design, vessel engineering or vessel building.
- An original or certified copy of a document that provides evidence of your identity in Australia, which may be either:
  - an original or certified copy of a document issued to you by an Australian government department or agency that provides proof of your identity (birth certificate, immigration papers, drivers licence, passport, etc); or
  - a certified copy of your foreign passport.
- Any other information that you consider relevant. Please provide details below.

<input type="text"/>
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## F. Applicant's photograph

Include two photographs of yourself, taken within the previous six months. Attach one below and include a second with this application. Both photographs must have dimensions of 45mm x 35mm (not including a border), as indicated below.



## G. 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 understand that the Australian Maritime Safety Authority, as the National Regulator, may ask that I provide any information or document that the National Regulator reasonably considers necessary for consideration of this application.
- I understand that the Australian Maritime Safety Authority, as the National Regulator, may ask another person to provide any information, document or agreement that the National Regulator reasonably considers necessary for consideration of this application.

I consent to the Australian Maritime Safety Authority, as the National Regulator, making all reasonable enquiries to verify that the information provided by me in this application (and any attachments I have included with this application) is true and correct.

In addition to my name and accredited categories being published on the Schedule of Accredited Marine Surveyors, which will be available on the AMSA website ([www.amsa.gov.au](http://www.amsa.gov.au)), I consent to the National Regulator publishing my telephone number, email address and the geographical areas in which I will conduct surveys.  Yes  No

Signature

Name

Date

Please use a **BLACK** pen and **ensure your signature fits inside the signature box**

## H. How to lodge

Post or lodge your completed application and attachments to the Australian Maritime Safety Authority (Domestic Vessels).

If lodging in person, please deliver to:

**Australian Maritime Safety Authority**  
Attention: Domestic Vessels  
82 Northbourne Avenue  
Braddon ACT 2612

For all postal applications, please address to:

**Australian Maritime Safety Authority**  
Attention: Domestic Vessels  
GPO Box 2181  
Canberra ACT 2601, Australia

### Privacy Statement

The collection of information requested in this form is required or authorised by *Schedule 1 of the Marine Safety (Domestic Commercial Vessel) National Law Act 2012* (the Act). It will be used for purposes related to the Act and may be provided to Commonwealth or State/Territory government agencies 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 <http://www.amsa.gov.au/privacy>