

IMPORTANT

- Applications must be accompanied by Proof of Identity (POI) and the prescribed fee. For a full list of acceptable POI documents, current fees and further information visit rms.nsw.gov.au or contact us on 13 77 88
- If you wish to pay via credit card please complete the credit card authority form available at rms.nsw.gov.au/documents/maritime/credit-card-authority-form.pdf and attach with this application
- Complete the Representative's Authority section (overleaf) if authorising another person to apply for a replacement product on your behalf
- If your application is for a replacement Personal Watercraft (PWC) licence, you must also complete an Application for PWC Photo Licence, provide 2 colour passport acceptable photographs and have your identification verified.

DETAILS OF APPLICANT

Surname

Given name(s)

Gender Male Female Date of birth/...../.....

Telephone

Private () Business ()

Mobile () Facsimile ()

E-mail

Applicant's signature

Residential/business address *(PO Box No. is not acceptable – application will not be processed unless residential address is supplied)*

Suburb State P/code

Postal address *(If same as residential/business please write "as above")*

Suburb State P/code

Date/...../.....

REPLACEMENT PRODUCT *(please tick appropriate box/es)*

- General Boat Driving Licence
- PWC Driving Licence *(an application for Photo Licence must also be completed)*
- Vessel Registration Certificate

Boat licence number (if known)

Registration number (if known)

These product/s have been lost/destroyed under the following circumstances and to the best of my knowledge no improper use has or is being made of these document/s:

.....

.....

PROOF OF IDENTITY

This section must be completed by applicants intending to forward their application by mail or have an authorised representative act on their behalf. Their proof of identity must be verified by an authorised signatory. Acceptable signatories include Police Officers, Justice of the Peace, Judge, Magistrate, Bank Manager, Solicitor, School Principal, Roads and Maritime/Service NSW Officer or Government Access Centre (GAC) Officers.

AUTHORISED SIGNATORY'S USE

Full proof of ID: Document name No.

Primary proof of ID: Document name No.

Secondary proof of ID: Document name No.

Authorised signatory's name

Authorised signatory's signature

Name of Agency Date/...../.....

Official
Stamp
(if applicable)

REPRESENTATIVE'S AUTHORITY

I authorise the person named below to apply for the replacement product on my behalf.

Applicant's signature

REPRESENTATIVE'S DETAILS

Surname Given name(s)

Address or daytime contact phone no.

Representative's signature Date/...../.....

OFFICIAL USE ONLY: (REPRESENTATIVE'S IDENTIFICATION)

Full proof of ID: Document name No.

Primary proof of ID: Document name No.

Secondary proof of ID: Document name No.

Authorised officer's name

Authorised officer's signature Date/...../.....



Please return this form to:

Agency Business Centre

PO Box 21

PARKES NSW 2870