

APPLICATION FOR TRADE PLATES

Marine Safety (General) Regulation 2009



IMPORTANT:

To obtain a Trade Plate Licence the applicant **must:**

- Be trading to provide approved marine type services to the boating public.
- Provide Proof of Identity (POI) for both the applicant and nominated representative. For further information visit rms.nsw.gov.au/maritime or phone **13 12 56** within NSW or (02) 9563 8557 for all other areas.
- Please return this form by mail to: Dealer Service Centre, Roads and Maritime Services, Level 3 Suite H, 110 George Street, Parramatta NSW 2151.

DETAILS OF APPLICANT

Organisation *(block letters)*

ACN

Contact name

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

Suburb State P/code

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

Suburb State P/code

NOMINATED REPRESENTATIVE OF THE ORGANISATION

(written authorisation on organisation's letterhead required)

Surname *(block letters)*

Given names

Position held Date of birth/...../.....

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

Suburb State P/code

Telephone

Private () Business ()

Mobile () Facsimile ()

E-mail

NOMINATED REPRESENTATIVE'S DECLARATION

I hereby apply for a Trade Plate Licence and declare that:

- I am authorised by the Organisation referred to above to make this application on its behalf
- The purpose by which such Trade Plates are to be used and every class of vessel concerned are as follows
.....

(iii) I acknowledge that, in the event of my non-compliance with the various regulations and conditions relating to Trade Plate Licences, the licence will be subject to cancellation at which time I will be required to return the Trade Plate/s and certificate

(iv) The statements made in this application are true and correct

I acknowledge that I have read and understood Roads and Maritime Services' brochure entitled "Use of Personal information Under the Privacy Act – 1998" and agree that my personal information may be disclosed to the persons/agencies listed in the brochure.

Nominated Representative's Signature Date/...../.....

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 are any Police Officer, Justice of the Peace, Judge, Magistrate, Bank Manager, Solicitor, School Principal, Roads and Maritime Services or 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.

Organisation's proof of ID: Document name: No.

Authorised signatory's name Date/...../.....

Authorised signatory's signature Name of Agency:

