

**This application form is only to be used when both the Certificate of Registration and an acceptable receipt cannot be provided and must be accompanied by a HIN (Boatcode) Certificate.**

**IMPORTANT:**

- Please ensure you have addressed/supplied all the items listed on Page 4 prior to submitting your application otherwise your application will not be processed
- **An application can be completed by mail or in person at a registry or service centre within 14 days of purchasing/ acquiring a vessel or a late application fee will be charged**
- You must be at least 16 years of age to register a vessel
- For more information on transferring your registration visit [rms.nsw.gov.au/maritime](http://rms.nsw.gov.au/maritime) or telephone **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](http://rms.nsw.gov.au/documents/maritime/credit-card-authority-form.pdf) and attach with this application
- **NOT TO BE USED FOR COMMERCIAL VESSELS** - Please complete an Application to transfer a Certificate of Operation.

**DETAILS OF NEW OWNER**

Surname .....

Given name(s) .....

Gender  M  F  X      Date of birth ...../...../.....

Are you of Aboriginal and/or Torres Strait Islander origin?  
 Yes  No

Organisation (if applicable) .....

ACN .....

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

Postal address *(If same as residential/business please write "as above")*  
 .....  
 .....  
 Suburb ..... State ..... P/code .....

**Telephone**

Private ( ) ..... Business ( ) .....

Mobile ( ) ..... Facsimile ( ) .....

E-mail .....

**NOMINATED CONTACT OF THE ORGANISATION**

*(written authorisation on organisation's letterhead required)*

Surname .....

Given names .....

Gender  M  F  X      Date of birth ...../...../.....

Are you of Aboriginal and/or Torres Strait Islander origin?  
 Yes  No

Residential 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 please write "as above")*  
 .....  
 .....  
 Suburb ..... State ..... P/code .....

**Telephone**

Private ( ) ..... Business ( ) .....

Mobile ( ) ..... Facsimile ( ) .....

E-mail .....

**HAVE YOU PREVIOUSLY BEEN ISSUED WITH A MARITIME PRODUCT?**

**(Boat Driving Licence, Vessel Registration, Mooring Licence)**

Yes  No    If yes, provide product numbers (if known) .....

## DETAILS OF SELLER

Was the vessel purchased from a licensed dealer/auction house?

**Yes** Receipt/Bill of Sale or consignment note must be supplied with this application.

Name of licensed dealer/auction house: ..... Now go to DETAILS OF VESSEL

**No** Please complete details below and statutory declaration on page 4.

Surname or organisation name ..... Reason why registration certificate and acceptable receipt cannot be provided .....

Given name(s) .....

Address .....

Suburb ..... State ..... P/code .....

## CONCESSION DETAILS (If applicable)

Pensioner concession requested?  Yes  No In order to qualify you must hold one of the following:

- Current Pensioner Concession Card issued by Centrelink or Department of Veterans' Affairs.
- Current Repatriation Health Card issued by Department of Veteran's Affairs.

Pension number

Date of grant

Pension expiry date ...../...../.....

Pension type

If you wish to claim the concession, you must present your concession card in person to any registry or service centre or forward a copy (both sides) by mail, together with this application and payment to Agency Business Centre, Roads and Maritime Services, PO Box 21 PARKES NSW 2870.

Please note that information in relation to your concession may be matched with Centrelink records.

## DETAILS OF VESSEL

I purchased in full settlement, vessel registration number ..... on ...../...../.....

HIN (Boatcode) (if applicable) .....

Vessel name (if applicable) ..... Vessel length (m) .....

Vessel manufacturer (if known) ..... Year vessel built .....

Where is the vessel kept	Vessel use	Construction material	Vessel type	Hull colour	Topside colour
<input type="checkbox"/> Marina berth	<input type="checkbox"/> Wakeboarding	<input type="checkbox"/> Steel	<input type="checkbox"/> Cabin runabout	<input type="checkbox"/> White	<input type="checkbox"/> White
<input type="checkbox"/> Trailer	<input type="checkbox"/> Skiing	<input type="checkbox"/> Aluminium	<input type="checkbox"/> Inflatable	<input type="checkbox"/> Black	<input type="checkbox"/> Black
<input type="checkbox"/> Slipway	<input type="checkbox"/> Fishing	<input type="checkbox"/> Plywood	<input type="checkbox"/> Barge	<input type="checkbox"/> Blue	<input type="checkbox"/> Blue
<input type="checkbox"/> Boatshed	<input type="checkbox"/> Cruising	<input type="checkbox"/> Fibreglass (GRP)	<input type="checkbox"/> Sailvessel (Yacht)	<input type="checkbox"/> Red	<input type="checkbox"/> Red
<input type="checkbox"/> Mooring	<input type="checkbox"/> Sailing	<input type="checkbox"/> Vinyl/plastic/textile	<input type="checkbox"/> Open runabout	<input type="checkbox"/> Yellow	<input type="checkbox"/> Yellow
<input type="checkbox"/> Dry storage	<input type="checkbox"/> Other	<input type="checkbox"/> Timber	<input type="checkbox"/> Mtr cruiser	<input type="checkbox"/> Green	<input type="checkbox"/> Green
<input type="checkbox"/> Jetty	(Please specify): .....	<input type="checkbox"/> Ferrocement	<input type="checkbox"/> Punt	<input type="checkbox"/> Brown	<input type="checkbox"/> Brown
<input type="checkbox"/> Other	.....	<input type="checkbox"/> Composite	<input type="checkbox"/> PWC	<input type="checkbox"/> Cream	<input type="checkbox"/> Cream
(Please specify): .....	.....	<input type="checkbox"/> Rubber	<input type="checkbox"/> Houseboat	<input type="checkbox"/> Silver	<input type="checkbox"/> Silver
.....	.....	<input type="checkbox"/> Carbon fibre	<input type="checkbox"/> Catamaran	<input type="checkbox"/> Unpainted	<input type="checkbox"/> Unpainted
.....	.....	<input type="checkbox"/> Polyethylene	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other
.....	.....	<input type="checkbox"/> Other	(Please specify): .....	(Please specify): .....	(Please specify): .....
		(Please specify): .....	.....	.....	.....
		.....	.....	.....	.....
		.....	.....	.....	.....

Has MicroDot technology been applied to this vessel?  Yes  No

Does this vessel display an Australian Builders Plate (ABP)?  Yes  No

(An ABP must be affixed by the vessel builder (excluding owner builders), the vessel importer or other persons as approved by Roads and Maritime Services).

## ENGINE DETAILS

Applications may not be accepted without engine details (if more than two engines supply details on a separate sheet)

### Engine particulars – 1st engine

#### Propulsion

- Inboard  
 Outboard  
 Sterndrive

#### Fuel

- Petrol  
 Diesel  
 Other (Please specify): .....

Manufacturer's name .....

Serial no. (please specify) .....

Horsepower ..... Kilowatt .....

### Engine particulars – 2nd engine

#### Propulsion

- Inboard  
 Outboard  
 Sterndrive

#### Fuel

- Petrol  
 Diesel  
 Other (Please specify): .....

Manufacturer's name .....

Serial no. (please specify) .....

Horsepower ..... Kilowatt .....

## DECLARATION

I declare that I am authorised to act as the owner of this vessel on behalf of all/any interested parties and that the information supplied is true and complete. I understand that if any detail is found to be incorrect this registration may be cancelled.

I acknowledge that I have read and understood Roads and Maritime Services' brochure entitled "Proof of Identity and 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.

Owner's signature ..... Date ...../...../.....

## REPRESENTATIVE'S AUTHORITY

I authorise the person named below to register this vessel in my name

Owner's signature .....

## REPRESENTATIVE'S DETAILS

Surname ..... Given names .....

Address or daytime contact phone no. ....

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

## PROOF OF IDENTITY

This section must be completed by owners 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/ Service NSW Officer or Government Access Centre (GAC) Officers.

Official  
Stamp  
(if applicable)

## 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 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 signatory's name .....

Authorised signatory's signature ..... Date ...../...../.....

Official  
Stamp

## STATUTORY DECLARATION – VESSEL OWNERSHIP

I, .....  
(Full Name)

of .....

.....  
(Full Address)

in the State of New South Wales, in making this application  
**DO SOLEMNLY AND SINCERELY DECLARE THAT**

I am the sole owner or at least the equal majority shareholder  
and registered owner of the following vessel:

Vessel Registration Number .....

HIN (Boatcode) .....

Vessel type .....

Vessel length (metres) .....

Vessel name (if applicable) .....

It is understood, and accepted, that the above vessel was  
lawfully obtained by me and that I am entitled to be registered  
as the owner by Roads and Maritime Services.

**NOTE:** Roads and Maritime Services notes that in addition to action which  
may be taken for making a false Statutory Declaration, the provision of  
false information may result in cancellation of the vessel registration.

**I make this solemn declaration conscientiously believing it  
to be true and by virtue of the Oaths Act, 1900.**

**MADE AND DECLARED AT** .....

this ..... day of ..... 20\_\_ \_\_

Applicant's signature .....

In the presence of an authorised witness who states:

I, .....  
[Name of authorised witness]

A, [qualification of authorised witness, tick below]

Justice of the Peace .....  
[Supply JP number]

Legal practitioner (with a current practising certificate)

Notary Public

Certify the following matters concerning the making of this  
statutory declaration by the person who made it:

[\*please cross out the text that doesn't apply]

1. \* I saw the face of the person

**OR**

\* I did not see the face of the person because the person  
was wearing a face covering, but I am satisfied that the  
person had a special justification for not removing the  
covering, and

2. \* I have known the person for at least 12 months

**OR**

\* I have not known the person for at least 12 months, but I  
have confirmed the person's identity using an identification  
document and the document I relied on was:

.....  
[describe identification document relied on]

.....  
(signature of authorised witness)

.....  
(date)

### CHECK LIST

To allow your application to be processed the following must be supplied where applicable

- Prescribed fee
- HIN (Boatcode) certificate
- Proof of identity
- Proof of acquisition (bill of sale/receipt) or Statutory Declaration
- Copy of Certificate of Incorporation, Certificate of Registration, an Extract of the Company, a Certificate of Registration on Change of Name, extract from the ASIC website, or letter naming the Act under which the organisation is incorporated
- Written authorisation, on organisation's letterhead, for the nominated representative to act on behalf of the applicant
- Representative's authority (if applicable)
- Copy of concession card (both sides) if applicable.

### Please return this form to:

Agency Business Centre  
PO Box 21  
Parkes NSW 2870