



<b>NAMES &amp; FLAGS OF SHIPS YOU WISH TO PILOT WITH YOUR EXEMPTION CERTIFICATE:</b>	<b>NAME:</b>	<b>FLAG:</b>
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<b>AREAS FOR WHICH YOU REQUIRE EXEMPTION:</b>	<p>a. All areas within District*</p> <p>b. Sea to Millbay*</p> <p>c. Sea to Cattewater and Sutton Harbour berths*</p> <p>d. Sea to Hamoaze commercial berths*</p> <p><i>* (Delete as appropriate)</i></p>
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**EXPERIENCE OF MOVEMENTS IN PLYMOUTH DURING PAST 12 MONTHS:**

<u>Date</u>	<u>Ship</u>	<u>From / To</u>	<u>Day / Night</u>	<u>Bona Fide Deck Officer</u>

**DATE AND PLACE OF ISSUE OF CERTIFICATE AS *BONA FIDE* DECK OFFICER:**

**DATE:** \_\_\_\_\_ **PLACE:** \_\_\_\_\_

**CERTIFICATE:** \_\_\_\_\_ **CERTIFICATE NO:** \_\_\_\_\_

**PREVIOUS PLYMOUTH PILOTAGE EXEMPTION CERTIFICATE:**

**NUMBER:** \_\_\_\_\_ **DATE OF ISSUE:** \_\_\_\_\_

**I enclose a copy of my current medical fitness form, dated from ..... to ..... issued by a Medical practitioner as per *Section 4.(h)* 'Rules Governing the Issue & Renewal of Pilotage Exemption Certificates for *Bona Fide Deck Officers*'.**

**I enclose a fee of £..... in respect of:**

- |    |   |           |
|----|---|-----------|
| a. | Examination and issue of Pilotage Exemption Certificate for a <u>single</u> part of the port.     | £177.50 * |
| b. | Examination (without certificate - i.e. re-examination) for a single part of the port.            | £114.00 * |
| c. | Examination and issue of Pilotage Exemption Certificate for <u>two</u> or more parts of the port. | £253.50 * |
| d. | Renewal of Pilotage Exemption Certificate.  | £64.00 *  |

*\* Note: These rates valid until 31<sup>st</sup> March 2021*

**I certify that I am fully conversant with the following:**

- **Dockyard Port of Plymouth Order 1999**
- **Millbay, Cattewater, Sutton and Cattedown Byelaws (as appropriate)**
- **Pilotage Direction for the Port of Plymouth 2014**
- **and I further confirm that I have a satisfactory knowledge of the English language for the purposes of navigation in the Port of Plymouth.**
- **and that I have completed the required number of trips to qualify for an exemption or the renewal of an exemption.**

**I certify that the above answers are true and correct and I acknowledge that any false or incorrect answers may result in the Competent Harbour Authority refusing to grant a certificate.**

**Signed :** ..... **Date :** .....

**Name**  
*(in block capitals)* : ..... **Position in Company**