

PLEASE COMPLETE AND FORWARD TO:

PILOTAGE ADMINISTRATION HARBOUR MASTER'S DEPT ASSOCIATED BRITISH PORTS OCEAN GATE ATLANTIC WAY SOUTHAMPTON SO14 3QN

FULL NAME:

RANK:

MASTER / FIRST MATE (Delete as appropriate)

VESSELS FOR WHICH A PILOTAGE EXEMPTION CERTIFICATE IS REQUIRED:

| VESSEL NAME | VESSEL TYPE | LENGTH<br>OVERALL<br>(MTS) | LOAD DRAFT<br>(MTS) | GROSS<br>TONNAGE<br>(GT) |
|-------------|-------------|----------------------------|---------------------|--------------------------|
|             |             |                            |                     |                          |
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Pilotage Manager

August 2022: Issue 2



#### PLEASE COMPLETE THE FOLLOWING IN BLOCK CAPITALS:

I hereby submit my application for the Issue of a Pilotage Exemption Certificate (PEC)

| 1  | FULL NAME:                                                                                |                                 |       |                                  |                             |
|----|-------------------------------------------------------------------------------------------|---------------------------------|-------|----------------------------------|-----------------------------|
| 2  | ADDRESS:                                                                                  |                                 |       |                                  |                             |
| 3  | TELEPHONE NUMBER:<br>EMAIL ADDRESS:                                                       |                                 |       |                                  |                             |
| 4  | DATE OF BIRTH:                                                                            |                                 | 5     | NATIONALITY:                     |                             |
| 6  | NAME & ADDRESS                                                                            | S OF EMPLOYER /                 | / SHI | PPING COMPANY                    | :                           |
| 7  | NAME & ADDRESS OF LOCAL AGENT:                                                            |                                 |       |                                  |                             |
| 8  | POSITION / RANK IN WHICH PEC IS TO BE USED:<br>Master / First Mate (delete as applicable) |                                 |       |                                  |                             |
| 9  | AREA FOR WHICH<br>Full CHA Area (To<br>Partial CHA Area (<br>Restricted CHA Are           | Outer Limit)<br>To Inner Limit) | ΗT    |                                  |                             |
| 10 | (a) Applicants Grad<br>Competency:                                                        | e of Certificate of             |       | (b) Number of Ce<br>Date Issued: | rtificate of Competency and |



| Nun | nber of Transits                        | between     | and                                                              |                       |
|-----|-----------------------------------------|-------------|------------------------------------------------------------------|-----------------------|
|     |                                         |             |                                                                  |                       |
|     |                                         | between     | and                                                              |                       |
|     |                                         | between     | and                                                              |                       |
|     |                                         |             |                                                                  |                       |
|     | Supply copy of e                        | vidence, eg | Log book entries / Pilotage Doo<br>Employer / Master's affidavit |                       |
| (b) | Supply copy of e<br>Prior to the last 1 |             | 5                                                                |                       |
| ``  | Prior to the last 1                     |             | 5                                                                | PEC/ Pilot assessment |

#### 12 DECLARATION

T

I hereby declare that the above information is correct and confirm the following:

#### (a) I have studied and am familiar with the following:

| The Southampton Pilotage Directions including the areas and vessels to whi | ch |
|----------------------------------------------------------------------------|----|
| they apply and the syllabus for local knowledge.                           |    |
| The International Regulations for the prevention of collisions at sea.     |    |
| The Southampton VTS reporting procedures.                                  |    |
| The Southampton Harbour Bye Laws                                           |    |



| Notices to Mariners in                            | n force for the Port of Southampton and the I  | Dockyard Port of   |  |
|---------------------------------------------------|------------------------------------------------|--------------------|--|
| Portsmouth.                                       |                                                | [                  |  |
| The Southampton Po                                | rt Users Information & Navigational Guidelin   | es. [              |  |
| The Dangerous Subs                                | tances in Harbour Areas Regulations 1987 (     | where applicable). |  |
| The tides in the pilota                           | ge area.                                       | [                  |  |
| I have studied and an                             | n familiar with the Port of Southampton's Ge   | neral Directions [ |  |
| (b) I have an understandi standard marine vocabul | ng of the English Language and knowled<br>ary. | ge of the use of   |  |
| Evidence of Medical Fitne                         | ess (ENG1 Certificate or equivalent) is en     | closed.            |  |
| -                                                 | pton Vessel Traffic Services Centre within th  |                    |  |
| Signed                                            | Date                                           |                    |  |
| NAME OF APPLICANT                                 |                                                |                    |  |
| NAME OF EMPLOYER /<br>SHIPPING COMPANY            |                                                |                    |  |
| VTS VISIT                                         |                                                |                    |  |
| DATE OF VISIT<br>VERIFIED BY                      |                                                | (VTS Officer)      |  |
|                                                   |                                                |                    |  |

#### **ASSESSMENT TRIPS**



The candidate has satisfactorily demonstrated to the assessor that he is ready to be examined

| INWARD PASSAGE<br>SHIP / DATE  |                                     |                      |
|--------------------------------|-------------------------------------|----------------------|
|                                |                                     | (Pilot / PEC holder) |
| OUTWARD PASSAGE<br>SHIP / DATE |                                     |                      |
|                                |                                     | (Pilot / PEC holder) |
| FAMILIARISATION T              | <b>RIPS</b> {see Schedule 3.1a(ii)} |                      |
| SHIP / DATE                    |                                     | (Pilot)              |
| TUG / SHIP/DATE                |                                     | (Tug Master)         |

## IF APPLYING FOR A PEC WITH TUG ENDORSEMENT, A MINIMUM OF 4 ACTS WITH TUGS AND PILOTS REQUIRED AS PER THE PILOTAGE DIRECTIONS SECTION 4.2.1.3

| Ship Name | Pilot/PEC Holder | Tug Name(s) | Date/Time |
|-----------|------------------|-------------|-----------|
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Pilotage Manager



#### **EXAMINATION**

EXAMINED BY

DHM / AHM

Pilot

PEC TO BE ISSUED / NOT TO BE ISSUED

### FEES RELATED TO THE ISSUE, EXAMINATION AND **RENEWAL OF PILOTAGE EXEMPTION CERTIFICATES FOR** BONA FIDE DECK OFFICERS OF VESSELS.

|   | Pilotage Tariff 2021                                                                                 | Cost    |
|---|------------------------------------------------------------------------------------------------------|---------|
| A | Issue of a pilotage exemption certificate by examination for part of, or whole of the pilotage area. | £354.35 |
| в | Issue of first PEC certificate and any reissue of lost or damaged certificates                       | £177.18 |
| С | Renewal of a pilotage exemption certificate for part of, or the whole of the pilotage area.          | £177.18 |

Please note we no longer accept cheques.

The completed PEC application form should be sent to: PEC Administrator, Associated British Ports, Ocean Gate, Atlantic Way, Southampton and email: HMSouthampton@abports.co.uk