



Application to Transfer Nominated Representative - Boat Driving Licence Training Provider

This application form is for Nominated Representatives (Examiners, Practical Trainers and Assistants) transferring from one Provider to another.

Details of Boat Driving Licence Training Provider

Registered business name

Trading name/Organisation name

Business address

Postal address (if different from above)

Business phone number

Business email address

Details of the Nominated Representative

First name

Surname

Position

Day contact phone number

Mobile number

Email address

I am an employee of the Applicant Yes

I work for or am a subcontractor for the Applicant Yes

Complete Contractors/
sub-contractors section
and provide required
evidence

Contractors/Sub-contractors

Business/Company Name

ABN/ACN

Providers must ensure that the contractors/sub-contractors hold the following:

- A copy of the Certificate of Registration for a business or corporation
- A copy of appropriate insurance cover (\$20m Public Liability, Marine Hull, \$5m Professional Indemnity)
- A copy of the Certificate of Survey and Operation or relevant Exemption(s)

The Provider must ensure that the Nominated Representative:

	Evidence checklist	Official Use Only
• Provides a request to transfer on company letterhead	<input type="checkbox"/>	<input type="checkbox"/>
• Holds a current First Aid Certificate (HLTAID003 Provide First Aid equivalent or above)	<input type="checkbox"/>	<input type="checkbox"/>
• Holds a current Working with Children Check	<input type="checkbox"/>	<input type="checkbox"/>
• Has no previous criminal history (if yes, a new National Police History Check is required)	<input type="checkbox"/>	<input type="checkbox"/>

Additionally, Examiners and Practical Trainers must:

• Hold a current and valid Certificate IV in 'Training and Assessment' qualification (equivalent or above)	<input type="checkbox"/>	<input type="checkbox"/>
• Hold a current and valid General Boat Driving Licence and have held that licence for a minimum of 3 consecutive years without conditions, or a higher grade of qualification	<input type="checkbox"/>	<input type="checkbox"/>
• Hold a National Certificate of Competency appropriate for the training vessel being operated	<input type="checkbox"/>	<input type="checkbox"/>

Nominated Representatives may be required to complete a Code of Conduct for Transport for NSW if not completed within the previous 12 months.

Proof of Identity must be certified by an authorised signatory. A list can be found at www.nsw.gov.au/topics/maritime-licences/boat-and-pwc-licences/proof-of-identity Transport for NSW reserves the right to request further information and evidence from the Nominated Representative to support the application.

Boat Driving Licence Training Provider Declaration

I declare that the Nominated Representative specified in this form is appropriately qualified and experienced to meet the requirements of the Boat Driving Licence Training Provider Scheme in relation to:

Provider name

Name and position of providers authorised representative

Signature

Date

Privacy Statement

Transport for NSW is collecting your personal information in connection with your application to become a Nominated Representative under the Boat Driving Licence Provider Scheme and we may retain and use it for marine legislation purposes. Providing this information is voluntary but we may not be able to assess your application unless you provide it. We may disclose your personal information in order to assess your application or verify the information you provide. We may also share your information in respect of inquiries regarding marine accidents, and to other agencies responsible for marine management or vessel registration and licencing. Otherwise we will not disclose your personal information without your consent unless authorised by law. Your personal information will be held and managed by Transport for NSW in accordance with the Privacy and Personal Information Protection Act 1998. To access or amend your personal information please use the access and amendment application forms available at www.transport.nsw.gov.au/about-us/transport-privacy

Name of Nominated Representative (Examiner/Practical Trainer/Assistant)

Signature

Date

Please submit completed form to:
boatlicenceprovider@transport.nsw.gov.au

Official Use Only

Proof of Identity Record

Stand alone or primary proof

Secondary proof

Document number/Expiry date

Document number/Expiry date

Approval

Has the Nominated Representative previously been suspended or terminated by Transport for NSW from delivering any licencing components under the Boat Driving Licence Training Provider Scheme. Yes No

Code of Conduct completed in the previous 12 months Yes No

Criteria met and application to transfer approved Yes No

Manager or delegate name

Manager or delegate signature

Date