

香港特別行政區政府 — 海事處

THE GOVERNMENT OF THE HONG KONG SPECIAL ADMINISTRATIVE REGION — MARINE DEPARTMENT

本地船隻運作牌照續期申請書

APPLICATION FOR RENEWAL OF OPERATING LICENCE FOR LOCAL VESSEL

註：請參閱附頁的“填表須知”，並以正楷填寫各項資料。

(本表格免費派發)

Note: Please read the "Guidance Notes" attached and complete all items in BLOCK LETTERS.

(This form is issued free of charge)

第一部 申請事項

Part I Details of Application

正式牌照 臨時牌照 所申請牌照的有效期 () 月 (見“填表須知”注意事項第1項)
Full Licence Temporary Licence Licence validity period applied for: () month(s) (See Item 1 under "Attention" of the "Guidance Notes")

第二部 船隻資料

Part II Particulars of Vessel

擁有權證明書號碼 船隻名稱 (如有)
Certificate of Ownership No.: _____ Name of Vessel (if any): _____
驗船證明書編號 (如適用) 有效期至
Certificate of Survey No. (if applicable): _____ Valid Up To: _____
有效第三者風險保險 (見“填表須知”注意事項第2項) Valid Third Party Risks Insurance (See Item 2 under "Attention" of the "Guidance Notes") :-
獲授權保險人 (並非代理) 名稱
Name of Authorized Insurer (not Agent): _____
保險單號碼 Policy No.: _____ 有效期 Validity Period: 由 from _____ 至 to _____

第三部 申請人資料

Part III Particulars of Applicant

*船東/代理人的姓名/名稱
Name of *Owner/Agent: _____
英文 (先填寫姓氏) English (surname first) _____ 中文 Chinese _____
*香港身份證號碼/公司編號及商業登記證號碼
*HK Identity Card No./Company Registration No. & Business Registration Certificate No.: _____
地址及電話號碼 (如船東或代理人的地址或電話號碼有所更改, 請填寫此部。)
Address and Tel. No. (Please complete this part if there is any change in the address/telephone number of the owner/agent): _____

電話號碼
Tel. No.: _____

第四部 郵遞申請 (如適用)

Part IV Application by Post (if applicable)

(1) 請在支票背面寫上船隻擁有權證明書號碼 Please write down the Certificate of Ownership number on the back of the cheque.
(2) 請填上付款資料 Please fill in your remittance details:-
銀行名稱
Name of Bank: _____
付款總額 *支票/銀行本票號碼
Amount Paid: _____ *Cheque/Cashier Order No.: _____

第五部 委託聲明 (如適用)

Part V Authorization (if applicable)

我/我們委託 _____ *先生/太太/女士/小姐 (香港身份證號碼: _____) 代辦申請。
I/We authorize *Mr./Mrs./Ms./Miss _____ (HK ID No.: _____) to act on my/our behalf.
 請把新牌照寄往船東的登記地址。
Please send the new licence to the owner's registered address by mail.
(請在適當方格內加上“✓”號 Please insert a “✓” in the appropriate box)

第六部 聲明

Part VI Declaration

我/我們謹此聲明, 就我/我們所知所信, 所有填報於此申請書及一併提交的資料均真確無誤。我/我們明白, 按照《商船 (本地船隻) (證明書及牌照事宜) 規例》第 52 條的規定, 如明知而作出在具關鍵性詳情上是虛假或具誤導性的陳述, 可處罰款 10,000 元及監禁 6 個月。
I/We hereby declare that all information provided in and with this application form is true and correct to the best of my/our knowledge and belief. I/We understand that, if I/we knowingly make any statement which is false or misleading as to a material particular, I/we shall be liable under section 52 of the Merchant Shipping (Local Vessels) (Certification and Licensing) Regulation to a fine of \$10,000 and to imprisonment for 6 months.

日期

Date: _____

*船東/代理人簽署 Signature of *Owner/Agent

如屬公司, 請填寫委託聲明及加蓋公司印章。

*刪去不適用者 Delete if inapplicable

For company, please fill in the authorization and affix the company seal/stamp.

第七部 領證聲明

Part VII Collection of New Certificate(s) and/or Licence

我 (香港身份證號碼: _____) 謹此確認已領取下列新證明書及/或牌照:
I, _____ (HK ID Card No.: _____) hereby confirm that I have collected the following new certificate(s) and/or licence:

擁有權證明書核數號碼 Certificate of Ownership Audit Control No.: _____

運作牌照核數號碼 Operating Licence Audit Control No.: _____

驗船證明書編號 Certificate of Survey No.: _____

日期

Date: _____

簽署

: Signature _____

只供本處人員填寫 FOR OFFICIAL USE ONLY

C.O.O. No.: _____ Audit No. of Renewed O.L.(*Full/Temporary): _____

Licence Fee: from _____ to _____ Amount Paid (\$): _____

Licence Validity: from _____ to _____

D/N No. _____

A/R No. _____

Declaration of Safety & Equipment:

Y	NA
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P	NP
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AC Ex:

Y	N
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 Validity of AC Ex: from _____ to _____

D/N No. of AC Ex: _____ Audit Roll No. of AC Ex D/N: _____

E:

Y	N	NR
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 ECIP:

H	O
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Y	N
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P	NP
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Registered Mail Delivery Record No.: _____ Date of Delivery: _____

Class I: _____

Class II: _____

Class III: *Fish Carrier/Fishing Sampan/Fishing Vessel/Outboard Open Sampan

Class IV: *Auxiliary Powered Yacht/Cruiser/Open Cruiser

Remarks: _____

Name & Signature: _____

Name & Signature: _____

Verified by: ACO/CA/ Marine Office

Officer-in-charge/ Marine Office

Date: _____

Date: _____