



香港特別行政區政府海事處
MARINE DEPARTMENT
THE GOVERNMENT OF THE HONG KONG SPECIAL ADMINISTRATIVE REGION

允許在香港水域內航行申請書
APPLICATION FOR PERMISSION TO NAVIGATE IN WATERS OF HONG KONG

(只適用於訪港遊艇/遊樂船)
(FOR VISITING YACHT/PLEASURE VESSEL ONLY)

註：請參閱附頁‘填表須知’並以正楷填寫各項資料。

Note: Please read the ‘Guidance Notes’ attached and complete all items in BLOCK LETTERS

第一部 船東/船長資料

Part I Particulars of Owner/Master

船東/船長姓名
Name of Owner /
Master:

英文(先填寫姓氏) English (surname first) 中文 Chinese (如有 if any)

*香港身份證號碼/公司編號及商業登記證/護照號碼/其他證件號碼(請註明)

*HK Identity Card No./Company Registration No. & Business Registration Certificate No./Passport No./Other Document No.(Please specify):

香港地址(如有)

Address in Hong Kong (if any):

電話號碼

Tel. No.:

流動電話號碼

Mobile Phone No.:

傳真號碼

Fax. No.:

第二部 代理人資料(如已委任)

Part II Particulars of Agent (if appointed)

代理人姓名/名稱
Name of Agent:

英文(先填寫姓氏) English (surname first) 中文 Chinese (如有 if any)

*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.:

香港地址

Address in Hong Kong:

電話號碼

Tel. No.:

流動電話號碼

Mobile Phone No.:

傳真號碼

Fax. No.:

第三部 船隻資料

Part III Particulars of Vessel

船隻名稱(如有)

Name of Vessel (if any):

綜合許可證號碼

Composite Permit No.:

海事處參考編號

MD Ref. No.:

呼叫信號

Call Sign:

國際海事組織編號

IMO No.:

國籍

Nationality:

註冊證明書號碼

Certificate of Registry No.:

船隻類型 Type of Vessel:

總長度(米)

Length Overall (m):

最大寬度(米)

Extreme Breadth (m):

深度

Depth (m):

總噸位 (如有)

船體物料

船體顏色 (主色/副色)

Gross Tonnage (if any):

Material of Hull:

Colour of Hull (Main/Sub):

引擎資料 Particulars of Engine	引擎製造商名稱 Maker of Engine	引擎類型 Type of Engine	編號 Serial No.	功率 (千瓦) Power (kW)
推進引擎 Propulsion Engine(s)		*舷內機 Inboard/ 舷外機 Outboard *柴油 Diesel/ 汽油 Petrol		
輔助引擎 Auxiliary Engine(s)		*舷內機 Inboard/ 舷外機 Outboard *柴油 Diesel/ 汽油 Petrol		

總運載人數

(包括: 船員人數 _____)

Total Carrying Capacity:

(including: crew members: _____)

停泊地點 Berthing Location:

第四部 申請詳情

Part IV Details of Application

目的 Purpose:

申請時段

Period applied for:

第五部 有效第三者風險保險

Part V Valid Third Party Risks Insurance

保險公司名稱 (並非代理) Name of Insurance Company (not agent):

投保額 Amount of Insurance Cover:

保險單號碼 Policy No.:

有效期 Validity Period: 由 from _____ 至 to _____

受保法律責任的款額 (港幣) Amount of liability insured (HK dollars):

第六部 委託聲明 (如適用)

Part VI Authorization (if applicable)

*我/我們委託

(香港身份證號碼: _____)

) 代辦申請。

*I/We authorize _____

(HK ID Card No.: _____)

) to act on my/our behalf.

第七部 聲明

Part VII Declaration

*我/我們謹此聲明
I/We hereby declare that

- (a) *此船從未在香港領取牌照/此船曾在香港領取牌照, 但有關牌照已於 _____ 取消;
*this vessel has never been licensed in Hong Kong/this vessel was licensed in Hong Kong but the licence was cancelled on _____;
- (b) 此船已配備足夠的救生裝置及滅火器具; 以及
this vessel is equipped with sufficient life-saving appliances and fire-fighting apparatus; and
- (c) *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) 條例》第 78 條的規定, 如明知而提供在具關鍵性詳情上屬虛假或有誤導性的資料, 可處罰款 5,000 元及監禁 6 個月。
*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 give any information which is false or misleading as to a material particular, *I/we shall be liable under section 78 of the Merchant Shipping (Local Vessels) Ordinance to a fine of \$5,000 and to imprisonment for 6 months.

日期

Date:

*船東/船長簽署 Signature of *Owner / Master

如屬公司, 請填寫委託聲明及加蓋公司印章。

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

*刪去不適用者 Delete if inapplicable

Personal Data Collection Statement 收集個人資料聲明

In accordance with the Personal Data (Privacy) Ordinance (Cap. 486), data subjects have a right to request access to and correction of their personal data provided in the application form. For access to or correction of personal data in the application form, please contact the Officer-in-charge, any District Marine Office of the Marine Department.

根據《個人資料（私隱）條例》（第 486 章），資料當事人有權要求查閱及改正在此申請表提供的個人資料。如須查閱或改正此申請表的個人資料，請與海事處任何海事分處聯絡。

只供本處人員填寫 **FOR OFFICIAL USE ONLY**

Application is *approved/not approved.

Reason for Disapproval: _____

Permit No.: _____

Validity from: _____ to _____

Amount Paid (\$): _____

D/N No.: _____ A/R No. _____

Name & Signature: _____

Name & Signature: _____

Verified by: ACO/CA/ Marine Office

Officer-in-charge/ Marine Office

Date: _____

Date: _____