



香港特別行政區政府海事處

MARINE DEPARTMENT

E

THE GOVERNMENT OF THE HONG KONG SPECIAL ADMINISTRATIVE REGION

本地船隻合格證明書延展有效期申請表
Application for extension of Certificate of Competency for local vessels

商船(本地船隻)條例(第 548 章)

Merchant Shipping (Local Vessels) Ordinance, Cap. 548

申請人姓名
Name of Applicant _____ (_____)
(英文 in English) (中文 in Chinese)

香港身分證 / 護照號碼
H.K.I.D. / Passport No. _____ 出生日期
Date of Birth _____ / _____ / _____
日 Day / 月 Month / 年 Year

國籍
Nationality _____ 性別
Sex _____ 日間聯絡電話
Daytime Tel. No _____

地址
Address _____

列明現時持有的有效合格證明書類別:

Type of existing valid Certificate of Competency: _____

證書編號:

Certificate number: _____

該證書及申請人的香港身分證或護照的影印副本必須一同呈交以作核對。

Photocopy of the certificate and applicant's H.K.I.D. / Passport are also required to be submitted for verification.

本人身體並無殘缺 / 如有者請列明:

I do not suffer from any physical handicap / Please list out if you have any physical disability:

本人謹此聲明,就本人所知所信,上述所填報的資料均屬正確無訛。

I hereby declare that the above particulars are correct and true to the best of my knowledge and belief.

日期 Date _____ 申請人簽署 Signature of Applicant _____

注意 Notes :- 1. 填報失實,即屬違法,特此警告。

Applicants are warned that it is an offence to make a false declaration.

2. 申請人所提供的資料會用作申請證明書之用,並可能送交執法機構及有關部門,以便進行與其有關的事宜。

The information provided will be used for application for a certificate and may be divulged to departments/agencies authorised to process the information for the mentioned purpose.

3. 成功申請人的有限個人資料也會用於海事處的互聯網網頁以供第三者查證本處所發出的證書。

Limited personal data of successful applicants may be used via the Marine Department's Internet web site for verification of the issued certificate by any third party.

通訊地址 (請填妥以下各部份)

Correspondence Address (Please complete the following parts)

姓名
Name _____

地址
Address _____

姓名
Name _____

地址
Address _____

For official use only

Result of Sight Test:

Physical Fitness:

Valid Until:

Name and Signature of MD Officer:

Date: