

 KIMBERLEY PORTS AUTHORITY <i>Broome Port Services</i>	APPLICATION FOR NEW MOORING SITE PERMIT	File ref: MOO
		Version: 2.0 / 179763
		Issue date: March 2020

All applicants must read and acquaint themselves with the Mooring Procedures document, in particular Section 6.2, PRIOR to making any application. This will ensure applicants have all the information required to complete the application properly. Applicable insurance shall be at the minimum outlined in the table, under "Insurance Details" on page 3.

If an applicant has any questions please contact KPA via operations@kimberleyports.wa.gov.au or via the website: www.kimberleyports.wa.gov.au

MOORING	Proposed site by: <input type="checkbox"/> KPA <input type="checkbox"/> Owner	
Latitude: _____ 'S	Mooring Type: <input type="checkbox"/> Cyclone <input type="checkbox"/> Storm	
Longitude: _____ 'E	Water Depth @ LAT: _____ m	
Analysis type provided: <input type="checkbox"/> Static <input type="checkbox"/> Dynamic		
Prospective Owner must ensure they comply with Section 6.2 of the Mooring Procedures document and supply the appropriate Design Analysis.		

OWNER'S DETAILS	Name: _____
Postal Address: _____	Residential Address: _____
Mobile: _____	Email: _____
Emergency Contact: _____	Ph: _____

VESSEL DETAILS	Name: _____	Registration No.: _____
Type of Vessel: <input type="checkbox"/> Yacht <input type="checkbox"/> Multi-Hull <input type="checkbox"/> Commercial <input type="checkbox"/> Other _____		
Colour of Hull / Superstructure: _____		
Construction: <input type="checkbox"/> Steel <input type="checkbox"/> Aluminium <input type="checkbox"/> Timber <input type="checkbox"/> Fibreglass		
LOA.: _____ m	Max Beam: _____ m	Draft: _____ m Displacement: _____ MT
Fuel Capacity: _____ Litres	Fuel: <input type="checkbox"/> Petrol <input type="checkbox"/> Diesel	LPG on Board: <input type="checkbox"/> Yes <input type="checkbox"/> No

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NOMINATED NAVAL ARCHITECT / DESIGNER'S DETAILS		Name: _____
Postal Address: _____	Residential Address: _____	
Mobile: _____	Email: _____	

NOMINATED MOORING SERVICE PROVIDER DETAILS		Name: _____
Postal Address: _____	Residential Address: _____	
Mobile: _____	Email: _____	
Emergency Contact: _____	Ph: _____	

CHECKLIST	<i>A copy of this application will be returned to you upon approval.</i>
<input type="checkbox"/> Application Form completed and signed; <input type="checkbox"/> Insurance Certificate of Currency enclosed; <input type="checkbox"/> Design Analysis requirements as per 6.2 of Mooring Procedures.	

ADDITIONAL DOCUMENTS FOR REVIEW
Kimberley Ports Authority's: <ul style="list-style-type: none"> <input type="checkbox"/> (a) Terms and Conditions; <input type="checkbox"/> (b) Mooring Procedures; and <input type="checkbox"/> (c) Cyclone Contingency Plan. These documents are available on www.kimberleyports.wa.gov.au . It is very important that you read these documents and retain them for your records. Failure to comply with the KPA's requirements could, amongst other things, result in KPA revoking approval.

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INSURANCE DETAILS: <i>Applicable insurance is mandatory. Certificate of Currency must be attached.</i>	
PROFESSIONAL INDEMNITY: \$10,000,000	
Underwriter: _____	Valid to: _____
Policy Number: _____	Certificate attached: <input type="checkbox"/> Yes <input type="checkbox"/> No
PUBLIC LIABILITY: \$20,000,000	
Underwriter: _____	Valid to: _____
Policy Number: _____	Certificate attached: <input type="checkbox"/> Yes <input type="checkbox"/> No
CONTRACT WORKS (if KPA deems applicable): Reinstatement value of the works	
Certificate attached: <input type="checkbox"/> Yes <input type="checkbox"/> No	
MOTOR VEHICLE THIRD PARTY LIABILITY (if KPA deems applicable): \$20,000,000	
Certificate attached: <input type="checkbox"/> Yes <input type="checkbox"/> No	

DECLARATION – TO BE SIGNED BY APPLICANT	
<ul style="list-style-type: none"> • I declare that the information provided by me in this application is true to the best of my knowledge. • I understand that I must notify the Kimberley Ports Authority in writing if there are any changes to the details set out in this application. 	
Signed: _____	Date: _____
Name and position of signatory: _____	

HARBOUSMASTER'S DECISION	
The Harbour Master has reviewed the application and based on the information provided:	
Approves this application	<input type="checkbox"/>
Rejects this application	<input type="checkbox"/>
Approves this application	<input type="checkbox"/> with the following conditions:

Signed: _____	Name: _____
HARBOUR MASTER	

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FOR OFFICIAL USE ONLY			INITIALS	DATE
Position of Mooring Site Approved:	<input type="checkbox"/> GPS Position ° 'S ° 'E			
Documents Processed:	Design: <input type="checkbox"/> Static <input type="checkbox"/> Dynamic			
Applicant Advised:	<input type="checkbox"/> Harbour Master's Approval <input type="checkbox"/> Harbour Master's Rejection			
Invoice request sent to Finance Department:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Details Entered (Ops):	<input type="checkbox"/> File <input type="checkbox"/> Database <input type="checkbox"/> Chart			
Details entered into ELO:	<input type="checkbox"/> Yes <input type="checkbox"/> No			