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|  | Questions are followed by answer fields. Use the ‘Tab’ key to navigate through. Replace Y/N or Yes/No fields with your answer. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Before you apply, you should read the Darwin buoy mooring standards on the NTG website.  You must not install a mooring without the written approval of the Regional Harbourmaster (RHM), as required by Section 53 of the *Ports Management Act 2015*.  Email your completed form to the regional harbourmaster at [RHM@nt.gov.au](mailto:RHM@nt.gov.au) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Application type – select one (mark with an X) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Private | | | |  | | | | | | | | | | Commercial | | | | |  | | | | | Temporary (up to six months) | | | | | |  | |
| Applicant details | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of organisation - if applicable | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| Surname | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| First name | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Residential or business street address | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| Suburb | |  | | | | | | | | | | | | | | | | | | | | Postcode | | | | |  | | | | |
| Email address | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Daytime contact no. | | | | | | | | |  | | | | | | | | | | | | | Mobile no. | | | | | | |  | | |
| Proof of identity | | | | | | | |  | | | | | | | | | | | | | | Document no. | | | | | | |  | | |
| Signature of applicant or authorised company representative | | | | | | | | | | | | | | |  | | | | | | | Date | | | |  | | | | | |
| Vessel details | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of vessel | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| For a private buoy mooring, you must provide/attach either of the below:   * a proof of vessel ownership or * an evidence of being in the process of purchasing the vessel, for which the mooring permit is being applied for. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Maximum length | | | | | | |  | | | | | | | | | | Displacement of vessel | | | | | | | | |  | | | | | |
| Mooring details | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Proposed position | | | | | | | | | | | Lat. | |  | | | | | | | | Long. | |  | | | | | | | | |
| Describe below or attach your cyclone plan | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Is the mooring cyclone-rated? | | | | | | | | | | | | | | | | Yes / No | | | | | | | | | | | | | | | |
| You must provide/attach particulars of mooring equipment.  For private mooring, see Annex B of the Darwin buoy mooring standard. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Do you have an equipment report by an appropriately qualified engineer confirming that the buoy moorings equipment is:   * made of quality materials * fit for purpose? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes / No |
| If your answer above is:   * yes - you must attach the equipment report * no - you must attach a statement attesting the suitability of the mooring for the size of vessel utilising it for the local weather and tidal conditions and cyclone plan. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Description of the buoy mooring (for private moorings, reflective tape maybe used in lieu of lighting) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Size** | |  | | | | | | | | | | | | | | | | **Colour** | | | |  | | | | | | | | | |
| **Markings** | |  | | | | | | | | | | | | | | | | **Lighting or reflective tape** | | | | | | | | | |  | | | |
| **Addition information** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Office use only | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Organisation | | |  | | | | | | | | | | | | | | | | | Email/phone | | | | |  | | | | | | |
| End of form | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |