PORT AUTHORITY
OF NEW SOUTH WALES

APPLICATION FOR CERTIFICATE OF LOCAL KNOWLEDGE (COLK)
(Marine Safety Act 1998)

Name:

E-mail:

Phone: H: M:

Employer:

Areas for COLK applying for *(Please tick boxes for all areas you require)*

☐ Botany Sydney: ☐ Main Harbour ☐ Whole Harbour

(Please tick applicable box)

☐ New COLK Application ☐ COLK Renewal (every 5 years) ☐ Maintain COLK (each year)

For COLK maintenance, please complete this form **only if your details have changed within the past 12 months**.
For all COLK enquiries, please email colkexams@portauthoritynsw.com.au

On the day, please bring the **original documents** listed below for **new or renewal** COLK applications.

New		Renew		Maintain	
Evidence of Qualifying Time or Experience (letter from employer or record of service book)		Evidence of Qualifying Time or Experience (letter from employer or record of service book)		Evidence of Qualifying Time or Experience (letter from employer or record of service book)	
A valid Certificate of Competency Cert #: ……		A valid Certificate of Competency Cert #: ……			
1102A valid Certificate of Medical Fitness that is required by the Certificate of Competency above		A valid Certificate of Medical Fitness that is required by the Certificate of Competency above			
Payment of $89		Payment $47			

By submitting this form, you agree that any personal information provided, including any additional personal information supplied as part of your application, will be (i) collected for the purpose of processing your application and (ii) handled in accordance with Port Authority's Privacy Statement (available at www.portauthoritynsw.com.au).

X _____
Verified PANSW

X _____
Applicants Signature