



## Application for Renewal Sailing Barge Masters Certificate of Competence

|                       |  |
|-----------------------|--|
| Full Name             |  |
| Address.              |  |
|                       |  |
| Post Code             |  |
| Contact telephone No. |  |
| Date of Birth         |  |
| Certificate Number    |  |

**I apply for revalidation of my Sailing Barge Masters Certificate of Competence.**

**I enclose:**

|  |  |
|--|--|
| Evidence of required level of fitness to ML5, ENG1 or DVLA (from D4) standards |  |
| Existing Sailing Barge Masters Certificate of Competence                       |  |
| Masters Log Book   |  |

### **DECLARATION OF COMPLIANCE**

I, the above named applicant, declare that since my last Sailing Barge Masters Certificate of Competence endorsement, I have kept up to date with relevant Notices to Mariners, Port Authority requirements and other directions relevant to the safe command of sailing barges and will continue to do so during the validity of the Certificate.

|           |      |
|-----------|------|
| Signature | Date |
|-----------|------|

Address for delivery of Certificate if different from address above.

|           |  |
|-----------|--|
| Address   |  |
|           |  |
| Post Code |  |

When completed, this form together with enclosures, should be sent to:

Peter Taylor  
Secretary – Association of Bargemen  
33 the Cross  
Wivenhoe  
Essex  
CO7 9QL