Department of **Transport**

BoatCode
Application for a Hull Identification Number (HIN)

BOAT CODE

Important – To obtain a HIN the applicant must complete Section 1; and

- Provide Proof of Identity (PoI). For a full list of acceptable documents visit: www.transport.wa.gov.au/imarine/boatcode-and-hin.asp

- Provide Proof of Acquisition (PoA) *(a copy of Bill of Sale, Receipt, Consignment Note)* for the purchase of the vessel or complete a Statutory Declaration.

- If the vessel is registered, provide a copy of the vessel's registration certificate.

- Applicants who are unable to present this application in person may elect a representative to act on their behalf. Both the applicant and representative must provide proof of identity. Section 2 must be completed by the representative and authorised by the applicant.

SECTION 1: Details of applicant

Organisation *(Block Letters)*: _____ ACN _____

Surname: _____ Other Names: _____

Date of Birth *(dd mm yy)*: ☐☐ ☐☐ ☐☐   Vehicle Driver's Licence No. ☐☐☐☐☐☐☐

Residential Address: _____
(PO Box No. is not acceptable. HIN will not be issued unless residential address is supplied)

Suburb:_____ State: _____ Postcode: _____

Telephone Private: (___) _____ Business or Mobile: _____

Postal Address: _____ Suburb:_____State: ____ Postcode: _____
(If different to residential)

Email Address:_____

SECTION 2: Details of applicant's representative *(if applicable)*

Representative's Surname: _____ Other Names: _____

Date of Birth *(dd mm yy)*: ☐☐ ☐☐ ☐☐   Vehicle Driver's Licence No. ☐☐☐☐☐☐☐

Residential Address: _____
(PO Box No. is not acceptable. HIN will not be issued unless residential address is supplied)

Suburb:_____ State: _____ Postcode: _____

Email Address:_____

Authority to Represent

I hereby authorise: *(please print)* _____

to act as my representative for the purpose of affixing a HIN to my vessel.

Applicant's Signature: _____ **Representative's Signature:** _____

Applicant's Declaration

I hereby declare that the above information is true and correct.
I understand that if any detail is found to be incorrect this HIN may be cancelled without notice.

Applicant's Signature: _____ Date: _____ / _____ / _____

Boatcode Examiner Use Only

EXAMINER USE ONLY — POI ☐ **APPLICANT** ☐ **REPRESENTATIVE**

Full Proof of ID Type:_____ Document No. _____

Primary Proof of ID Type:_____ Document No. _____

Secondary Proof of ID Type: _____ Document No. _____

Signature of Authorised Officer (BoatCode Examiner): _____

Official Stamp

EXAMINER USE ONLY — VESSEL DETAILS

Registration Number: _____ Vessel Name: _____

Vessel Type:_____ Hull Material: _____ Hull Colour: _____

Manufacturer's Name: _____ Manufacturer's Model: _____
(if known) _(if known)_

Hull Length (L_H) in metres: _____

NOTE: _The L_H is measured from the foremost point of the bow to the aftermost point of the transom, excluding bow sprits, outboard motors and other appendages._

If the above details are not the same as those on the vessel registration certificate, please circle the changes.

EXAMINER USE ONLY — ENGINE DETAILS _(If more than two engines please supply details on separate sheet)_

Engine Particulars – 1st engine _(engine serial numbers must be provided)_

Fuel:–   ☐ Petrol   ☐ Diesel   ☐ Other

Propulsion:–   ☐ Inboard   ☐ Outboard   ☐ Sterndrive   ☐ Jet   ☐ Sail

Manufacturer's Name: _____ Serial No. _____

Engine Horsepower: _____

Engine Particulars – 2nd engine _(engine serial numbers must be provided)_

Fuel:–   ☐ Petrol   ☐ Diesel   ☐ Other

Propulsion:–   ☐ Inboard   ☐ Outboard   ☐ Sterndrive   ☐ Jet   ☐ Sail

Manufacturer's Name: _____ Serial No. _____

Engine Horsepower: _____

EXAMINER USE ONLY — HIN EXAMINER DETAILS

BoatCode Provider Name: _____ Examiner Name: _____

Have you: Checked the Applicants or Representatives ID?   ☐ Yes   ☐ No
             Photocopied the Proof of Acquisition Documents?   ☐ Yes   ☐ No
             Checked the Statutory Declaration if applicable?   ☐ Yes   ☐ No
             Signed the POI Section of this application?   ☐ Yes   ☐ No

Provider Format

Country Code		Authority Code			Plate Serial Number						Agent Code			Year Issue

HIN [ ][ ] – [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

Manufacturer's Format Country Code / MIC Code / Serial Number / Prod. Month / Prod. Year / Year Issue

HIN Certificate Number: [ ][ ][ ][ ][ ][ ] [ ]

Examiner's Signature: _____ Examiner Number: _____ Date: _____

HIN Examiner must attach this Application for HIN to the original (blue) HIN Certificate and POA documents
and forward to the — Department of Transport, GPO Box C102, PERTH WA 6839 — within five (5) working days of issue.