



Navigation Safety Application for Exemption / Closed Water Area

THIS FORM IS TO BE USED FOR:

- 1. Application for a temporary exemption from legislative requirements**
- 2. Application for a temporary creation of a closed water area (Vessels and Swimming)**

- Applications must be submitted a minimum of 6 weeks prior to the nominated aquatic event date, or it may not be approved.
- Please ensure that you address all applicable sections of this form in relation to your exemption.
- Please provide detailed rationale and justification as to why this exemption is required and warranted.
- For more information regarding safety equipment please visit our website:
www.transport.wa.gov.au/imate/about-safety-equipment.asp

- If applying for Exemption - Complete sections 1, 2, 3 and 5**
- If applying for Closed Water Area - Complete sections 1, 4 and 5**

SECTION 1. DETAILS

Organisation: _____

Applicant Surname: _____ Other names: _____

Date of Birth: _____ Position Title (if applicable): _____

Postal Address: _____ Postcode: _____

Telephone: _____ Mobile: _____

Email: _____

Official Title of Event: _____

Designated Contact During the Event

Name: _____ Mobile: _____

SECTION 2. EXEMPTIONS

Do you require this exemption for the event to proceed? Yes No

Has an exemption for this event been issued previously? Yes No *(If Yes, please provide a copy of your previous exemption)*

Is the exemption required only for the event to take place or are there any other prior training needs?

Event only

Training

Event Date(s): _____ Event Times(s): _____

Training Date(s): _____ Training Time(s): _____

Geographical area that exemption would apply to (Please attach a detailed chart/map)

SECTION 3. LEGISLATIVE EXEMPTIONS

What legislative requirements are you requesting exemption from? (Please check below where applicable and provide supporting comments)

SPEED RESTRICTIONS (s.67 WAMA or r.48 NWR) - specify which area (provide coordinates / chart / map)

- Gazetted Speed Limit (s.67 WAMA)
- In any water depth of less than 3 metres (r.48 (a) (i) NWR)
- Within 50 metres of a river bank or water's edge (r.48 (a) (ii) NWR)
- Within 15 meters of a vessel underway (r.48 (c) NWR)
- Within 50 meters of a moored vessel (r. 48 (d) (i) NWR)
- Within 50 meters of a Jetty or Wharf (r. 48 (d) (iv) NWR)
- Through an arch of a bridge (r. 48 (e) NWR)
- Competitor vessel: [____] number of craft. Safety/support vessel: [____] number of craft.

Why would it be unreasonable or impractical to comply with this requirement?

What will you do to mitigate the risks so that the safety of participants / other users are not endangered?

ENTRY INTO 'CLOSED WATERS' AREA (s.66 WAMA) – specify which area (provide coordinates / charts / map)

- Competitor vessel: [____] number of craft. Safety/support vessel: [____] number of craft.

Why would it be unreasonable or impractical to comply with this requirement?

What will you do to mitigate the risks so that the safety of participants / other users are not endangered?

LIFEJACKETS (r.50B / r.52A /r.52BAC NWR) (Personal Flotation Devices or PFDs)

- Competitor vessel: [____] number of craft. Safety/support vessel: [____] number of craft.

Why would it be unreasonable or impractical to comply?

What will you do to mitigate the risks so that the safety of participants is not endangered?

FLARES (r.52B / r.52 BAC / r.52 BAD NWR)

- Competitor vessel: [____] number of craft. Safety/support vessel: [____] number of craft.

- Inshore Flare Kit (Only) Offshore Flare Kit (Only)

Why would it be unreasonable, impractical or unsafe to comply?

What will you do to mitigate the risks so that the safety of participants is not endangered?

DISTRESS BEACONS (EPIRB / PLB) (r.52BAB / r.52BAC / r.52BAD NWR)

Competitor vessel: [____] number of craft. Safety/support vessel: [____] number of craft.

Why would it be unreasonable, impractical or unsafe to comply?

What will you do to mitigate the risks so that the safety of participants is not endangered?

ANCHOR (r.52 CA NWR)

Competitor vessel: [____] number of craft. Safety/support vessel: [____] number of craft.

Why would it be unreasonable or impractical to comply?

What will you do to mitigate the risks so that the safety of participants is not endangered?

MARINE RADIO (r.52BAA NWR)

Competitor vessel: [____] number of craft. Safety/support vessel: [____] number of craft.

Why would it be unreasonable or impractical to comply?

What will you do to mitigate the risks so that the safety of participants is not endangered?

BEYOND 5 NM FROM SHORE (vessels <3.75m eg. Jetski) (r.19(2) NWR)

Competitor vessel: [____] number of craft. Safety/support vessel: [____] number of craft.

Why would it be unreasonable or impractical to comply?

What will you do to mitigate the risks so that the safety of participants is not endangered?

Exemption from equipment or legislative requirements not listed above (please specify below):

Is the exemption request based purely on the grounds of a financial impost to competitors and/ or organisers?

Yes No If Yes, please provide details:

SECTION 4. CLOSED WATERS AREA

Please indicate if you require the creation of a close waters area for the event to occur.

Yes No

Swimming closure

Vessel closure: All vessels or Motorised vessels only

Why would it be required (justification)?

SECTION 5. DECLARATION

Has your organisation completed a safety management system (SMS), including risk assessment, in relation to this exemption?

Yes No

NB a copy of your SMS must be submitted with this application for consideration of the exemption.

Declaration and Agreement by Applicant

I hereby declare that I am authorised to act for the organisation as detailed on this form and that the information contained in this application is true and correct to the best of my knowledge.

I hereby agree that I will accept costs incurred by the Department of Transport relating to placement of advertisements pertaining to any closure of navigable waters, any Temporary Notices to Mariners and the cost of any publication in the Government Gazette, where this is required.

Signature of Applicant: _____ Date ____/____/____

Name: _____

Note: Following assessment by the Department, applicants will be advised in writing of the outcome of this application which may be subject to conditions.