

SHIP PRE-ARRIVAL REPORT

Please open this form using Adobe Acrobat Reader. Either type in the fields provided or print this form and complete it using a pen and BLOCK LETTERS. Tick where applicable

This form is to be lodged with the Department of Home Affairs (the Department) at the same time the Report Of Crew (Form 3B) and/or Report Of Passengers (Form 2B) is made. Timeframes for reporting are defined in the *Customs Act 1901* and the Customs Regulations 2015. Those vessels reporting to the Department via Advanced Passenger Processing (APP) are still required to lodge a Passenger or Crew Report to the Department.

PART ONE: We request this information in order to assess vessels and crew for the risk they may present in relation to a range of Commonwealth laws. This information may be disclosed to a number of agencies including the Department of Infrastructure and Regional Development, the Australian Federal Police, Australian Crime Commission, Attorney-General's Department and the Department of Foreign Affairs and Trade.

PART TWO: We require this information under Regulations 4.80 and 5.10 of the Maritime Transport and Offshore Facilities Security Regulations 2003. This information will be disclosed to the Department of Infrastructure and Regional Development.

PART THREE: We require this information under the Navigation Act 1912, Protection of the Sea (Shipping Levy Collection) Act 1981, Marine Navigation Levy Collection Act 1989 and the Marine Navigation (Regulatory Functions) Levy Collection Act 1991. This information may be disclosed to the Australian Maritime Safety Authority.

and the Marine Navigation (Regulatory	Functions) Levy (Collection Act	1991. This informa	ition ma	y be disclosed to the	Australian Mariti	me Saf	ety Authority.		
PART ONE – SHIP PARTICULAI	RS									
Name of Ship:	Country of Registration:			Port of Regis			tration:			
MO number: Call Sign:		n:		Previous Name/s:		Official Number:				
Port of Arrival: Estimated		ed Date of Arrival:		Estimated Time of Arrival:			Estimated Date of Departure:			
Name of Local Ship's Agent: Name		e of Ship's Owner:			Name of Ship's Operator:			Name of Ship's Charterer:		
Number of Crew (Incl. Master): Numb		ber of Passengers:			Stowaways on Board?			Firearms/Weapons (not cargo) on Board		
Net Tonnage: Gross		s Tonnage:			Yes No (If yes provide details)			Yes No (If yes provide details)		
PART TWO – SHIP SECURITY F	REPORT									
ISSC Number: ISSC	Issued by:			ISSC Expiry Date:		Current Ship Security Level (1,2 or 3):				
Last ten ports of call (including Aus	tralian ports) in o	rder (most r	ecent first), and the	ne sec	urity level that the	ship operated	l at wh	nile in those ports	S:	
PORT & COUNTRY		DEPARTURE SECURITY DATE LEVEL		PORT & COUNTRY				DEPARTURE DATE	SECURITY LEVEL	
1.				6.						
2.				7.						
3.				8.						
4.				9.						
5.				10.						
Were there any special or additional undertaken at any of the above policy.		_	es provide details)							
Did the ship engage in any ship to	ship activity at a	<u> </u>	oove ports?							
Next four ports of call (including Aust	ralian ports) in or	der:								
PORT & COUNTRY		ARRIVAL DATE			PORT & COUNTRY			ARRIVAL DATE		
1.				3.						
2.				4.						
PART THREE – SHIP SAFETY F	REPORT									
CERTIFICATE		EXPIR\	EXPIRY DATE		CERTIFICATE			EXPIRY DATE		
Marine Navigation Levy				Safety Radio						
rotection of the Sea Levy			Safety Equipment							
P&I Club Certificate of Entry					I.O.P.P.					
Safety Construction					Loadline Certificate					
DECLARATION										
I declare that all the particulars co	ontained in this	report are o				ny knowledge.				
NAME:				COMF	PANY: L					
DATE:	TIME:		*Comple	ted by	Authorised Operat	or /Agent / Mas	ster (*s	trike out whichever	is not applicable)	
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