



## HARBOR SAFETY COMMITTEE APPLICATION FOR APPOINTMENT



APPLICANT'S NAME (Last) *		(First) *		(M.I.)
EMPLOYER / COMPANY / RETIRED				
ADDRESS (Include Suite, Dock, Building Number, Street, etc. as applicable) *			WORK	HOME
(City) *			(State) *	(Zip Code) *
PHONE 1 *		PHONE 2		PHONE 3
E-MAIL 1 *		E-MAIL 2		
HARBOR SAFETY COMMITTEE: *			Date of Application MM/DD/YY *	
Select Membership Category *		If not listed, please enter		
Member or Alternate Member *				

*Navigational expertise is required for appointees for the categories of Tanker Operators, Dry Cargo Vessel Operators, Marine Oil Terminal Operators, Barge Operators, Tug Operators, Pilots, Excursion Boat Operators, and Ferry Boat Operators.*

*An individual is considered to have navigational expertise if the individual meets any of the following conditions:*

**Please mark one or more of the following categories**

<input type="checkbox"/>	Currently hold (or held) a Coast Guard Merchant Marine Deck Officer's license.
<input type="checkbox"/>	Currently hold (or held) a position on a commercial vessel that includes navigational responsibilities.
<input type="checkbox"/>	Currently hold (or held) a shore side position with direct operational control of vessels.
<input type="checkbox"/>	Currently hold (or held) a position responsible for approving the docking of vessels in and around harbor facilities.

\* = Items mark with asterisk are required fields.