


Reference	HM-6	Issued	1/17/2024	Owner	Spain, Cathryn
Version	2	Review Due	1/17/2025	Author	Beacon, Kevin
Type	Form	Classification	EXTERNAL - UNCLASSIFIED		
	PEC Renewal				Page 1 of 3

The criteria for reinstatement of an expired PEC will be as for a new application

It is the responsibility of the PEC Holder to ensure that a fully completed application for renewal is received no later than 2 weeks before the expiry date of the PEC together with a copy of the applicant's CoC and valid Medical Certificate. The applicant must nominate the vessel(s) and berth(s) for which the PEC will be reissued

PEC 'A' Renewal:	ANNUAL <input type="checkbox"/>	or	5 YEARLY <input type="checkbox"/>
Personal Details			
PEC Number:			
Title			
Surname			
Forename + Initials			
Home Address			
Telephone Number			
Email			

Certificates	
*Certificate of Competency No.	
CoC Expiry Date	
Or *Boatmaster Licence No.	
*Medical Certificate Expiry Date	

*Please attach copies

Operator/Agent's Details:	
Company name	
Company Address	
Telephone Number	
Email	

Which PEC Areas are you applying for to revalidate? <i>(Please tick relevant box)</i>						
1	2	3	4	5	Barrier	Tilbury Lock
Minimum requirement to retain Specified Berths – 2 Visits annually						
Specified Berth					Date Visited	

All Areas will be reassessed at the due date of the first PEC Area held – this date will become the due date for all areas.

For Renewal: Minimum of 6 PEC Usages/Trips - Per Area**Area 1**

Date 1	Date 2
Date 3	Date 4
Date 5	Date 6

Area 2

Date 1	Date 2
Date 3	Date 4
Date 5	Date 6

Area 3

Date 1	Date 2
Date 3	Date 4
Date 5	Date 6

Area 4

Date 1	Date 2
Date 3	Date 4
Date 5	Date 6

Area 5

Date 1	Date 2
Date 3	Date 4
Date 5	Date 6

Barrier **Tilbury Lock**

Date 1	Date 2
Date 3	Date 4
Date 5	Date 6

Is a Tug Endorsement held? Yes No

To retain Tug Endorsement: Minimum 2 PEC usages with tugs during 12 months prior (For 5-yearly renewals – Assessment must be undertaken with tug assistance + 1 Day Simulation – booked via the Pilotage Support Officer).

Date 1:	Date 2:
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For 5-Yearly Renewal Only:

Simulator Date:	
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Specified Vessel(s) - Maximum 6

Vessel Name 1:	Vessel Name 2:
Vessel Name 3:	Vessel Name 4:
Vessel Name 5:	Vessel Name 6:

I declare that the above information is correct, and that I understand the terms under which the Pilotage Exemption Certificate will be issued (Pilotage Directions and Regulations as published).

Applicant's Signature:	Date:
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Additional Notes (if relevant)