

Maritime Security Identification Card (MSIC) Application Form

PART A: Applicant Information

EPSL Access Card No. _ _ _ _ _

(Please complete all of Part "A" ONLY)

Application Type: (select one box only and then select duration)

Standard MSIC - I am applying for an MSIC for the first time. **Duration** - 2 Year (\$242) 4 Year (\$385)

Provisional MSIC - I am under 18 years of age. (\$132) Past Provisional MSIC(if applicable) _____ Expiry Date _ / _ / _ _ _ _

Renewal - I am renewing My Standard MSIC. (\$242) or (\$385) (MSIC No.) _____ Expiry Date _ / _ / _ _ _ _

Replacement - I am replacing a Lost/Stolen MSIC. (\$66) (MSIC No.) _____ Expiry Date _ / _ / _ _ _ _

ASIC based - I am the holder of a current ASIC. (\$132) (ASIC No.) _____ Expiry Date _ / _ / _ _ _ _

Note: Payment is required before Application will be processed

NAME(S):

	Sex	Title	Surname	Given Name 1	Given Name 2	Given Name 3
Current	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

If you have had previous names enter the details below. Type of previous Name(s): **B**- Birth Name, **M**- Maiden Name, **A**- Alias, **O**- Other Type*

Previous 1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Previous 2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of Birth	Place of Birth: Country	Place of Birth: City/Town	Place of Birth: State
_ _ / _ _ / _ _ _ _	<input type="text"/>	<input type="text"/>	<input type="text"/>

CITIZENSHIP COUNTRY

Enter your country of citizenship

Complete this section if you are not a citizen of Australia or New Zealand

ARRIVAL DETAILS:

Port Name	<input type="text"/>	Arrival Date	<input style="width: 100%;" type="text"/>
Vessel Name	<input type="text"/>		
or			
Flight Number	<input type="text"/>		

Travel Document ID – Passport number	<input style="width: 90%;" type="text"/>
Visa Status – Visa Grant Number (provided by DIAC)	<input style="width: 80%;" type="text"/>
Expiry Date:	<input style="width: 100%;" type="text"/>
Name Of Parents – If entry to Australia was on parent’s passport	
Parent Surname	<input style="width: 80%;" type="text"/>
Parent Given Names	<input style="width: 80%;" type="text"/>

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CURRENT RESIDENTIAL ADDRESS:

Unit #	Street #	Street Name	Suburb / Town	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		State	Country	Date resided here from
		<input type="text"/>	<input type="text"/>	<input type="text" value="--/--/----"/>

*** If you have lived at this address less than 10 years – provide details of all previous addresses below for up to 10 years in total to date.**

CURRENT POSTAL ADDRESS: As Above -

Unit #	Street #	Street Name	Suburb / Town	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
		State	Country	Postcode
		<input type="text"/>	<input type="text"/>	<input type="text"/>

PREVIOUS RESIDENTIAL ADDRESS (1):

Unit #	Street #	Street Name	Suburb / Town	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		State	Country	Date from Date to
		<input type="text"/>	<input type="text"/>	<input type="text" value="--/--/----"/> <input type="text" value="--/--/----"/>

PREVIOUS RESIDENTIAL ADDRESS (2):

Unit #	Street #	Street Name	Suburb / Town	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		State	Country	Date from Date to
		<input type="text"/>	<input type="text"/>	<input type="text" value="--/--/----"/> <input type="text" value="--/--/----"/>

PREVIOUS RESIDENTIAL ADDRESS (3):

Unit #	Street #	Street Name	Suburb / Town	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		State	Country	Date from Date to
		<input type="text"/>	<input type="text"/>	<input type="text" value="--/--/----"/> <input type="text" value="--/--/----"/>

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YOUR CONTACT DETAILS:

Home Phone: <input type="radio"/>	Work Phone: <input type="radio"/>	Mobile Phone: <input type="radio"/>
()	()	
Email: <input type="text"/>	<input checked="" type="checkbox"/> Tick preferred phone number	

EMPLOYER DETAILS:

Company Name	Employer Contact Person
	<input type="text"/>
Address	Employer Phone
	<input type="text"/>
Email	Employer Fax
	<input type="text"/>

Acknowledgement

I understand that I am applying for a security identification card for the maritime industry. The information that I have provided in this application is correct to the best of my knowledge.

I understand that my personal information will be used by AusCheck to co-ordinate a background check through the Australian Security Intelligence Organisation (ASIO), CrimTrac and the Department of Immigration and Citizenship (DIAC), where necessary.

I have been given a copy of the AusCheck Privacy Notice, which explains how AusCheck will use my personal information.

I declare that I have completed all the assessment requirements of the EPSL online MSIC Induction and understand my responsibilities as the holder of a MSIC.

Signature

Date

All records held by EPSL under the MSIC Plan shall be secured in accordance with the Commonwealth Privacy Act 1988 and other relevant Commonwealth law. Access will not be granted for other than MSIC relevant purposes.

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PART B: Documents (*Issuing Body Use Only*)

Evidence of “Operational Need” for an MSIC

- 1. Satisfactory evidence provided
- 2. Where applicable copies of original documentation retained

Documents showing Identity

- 1. One original primary identification document sighted.
- 2. One original secondary identification document or two tertiary documents sighted
- 3. Photocopy of documents received and date stamped

Primary Documentation:

Type of Document:		
Document number:		
Person to whom it relates:	Surname:	Given Names:
DOB:		
Date of Issue:		
Expiry Date:		
Place of Issue:		

Secondary Documentation:

Type of Document:		
Document number:		
Person to whom it relates:	Surname:	Given Names:
Place of Residence: (if shown)		
DOB:		
Date of Issue:		
Expiry Date:		
Place of Issue:		

Tertiary Documentation:

Type of Document:		
Person to whom it relates:	Surname:	Given Names:
Place of residence:(if shown)		
Date of issue:		
Place of issue:		
Person giving information:		Title, rank or designation:
Name and address of organisation:		
Information given: (attach a separate sheet if required)		

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Type of Document:		
Person to whom it relates:	Surname:	Given Names:
Place of residence:(if shown)		
Date of issue:		
Place of issue:		
Person giving information:		Title, rank or designation:
Name and address of organisation:		
Information given: (attach a separate sheet if required)		

Documents showing Authority to Work in Australia:

- 1. Original documents sighted/satisfactory evidence provided.
- 2. Photocopy of all relevant documents received and date stamped.

Evidence of Aviation Security Identification Card (ASIC), if applicable.

- 1. Original ASIC sighted.
- 2. Photocopy of ASIC received and date stamped.

Document details entered into data base by: **MSIC Service Centre staff member** - _____

MSIC Expiry Date Check
 Applicant is under 18, and/or applicant has a temporary work visa, and/or applicant is applying for an MSIC based on their ASIC.

Calculated MSIC expiry date the earliest date of the **a)** applicant's 18th birth date plus 6 months, **b)** expiry date of the work visa, **c)** ASIC expiry date. **Date:** __/__/____.

OR – Applicant is none of the above.

MSIC expiry date must be 2 or 4 years from the date when background checks by AusCheck are completed. **Date:** __/__/____.

PART C: MSIC Awareness Induction *(Issuing Body Use Only)*
 Induction Officer: _____ Date of Induction: __/__/____
 Officer's Signature: _____

PART D: Payment Options \$ 242 \$385 \$132 \$66 Other \$.....

Cash Cheque/Money Order Electronic Transfer Individual - Company / Group

Cheques/money orders to be payable to Esperance Ports Sea and Land Inv No _____ Receipt No s _____

<p>PART E: Card Issue</p> <p>Authorisation to Issue Signed: _____ <small>(Issuing Body)</small></p> <p>Collected by Applicant Signed: _____ <small>(Applicant)</small></p> <p>Type of Photographic Identification produced by applicant on collection of MSIC: _____</p>	<p>Application Identification Number ESP/000_____ <small>(Issuing Body Use Only)</small></p> <p>Date: __/__/____</p> <p>Date: __/__/____</p>
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