



Application for Licensure

Name _____
Last First MI

Address _____

City _____ State _____ ZIP _____

Home Phone # (____) / ____ / ____ Work Phone # (____) / ____ / ____

Date of Birth ____ / ____ / ____ Sex: Male Female

Social Security Number ____ - ____ - ____

The following statement is made pursuant to the Privacy Act of 1974, Section 7(B). Disclosure of your social security number is mandatory. Solicitation of your social security number is solely for tax administration purposes pursuant to 36 M.R.S.A. Section 175 as authorized by the tax reform act of 1976 (42 U.S.C. Section 405(C)(2)(C)(I)). Your social security number will be disclosed to the State Tax Assessor or an authorized agent for use in determining filing obligations and tax liability pursuant to Title 36 of the Maine Revised Statutes. No further use will be made of your social security number and it shall be treated as confidential tax information pursuant to 36 M.R.S.A. Section 191.

Area(s) for which Application is being made.

Please check appropriate

<input type="checkbox"/> A - Kennebec River	<input type="checkbox"/> E - Frenchman Bay
<input type="checkbox"/> B - Penobscot Bay	<input type="checkbox"/> F - Quoddy-Eastport Area
<input type="checkbox"/> C - Penobscot River Ft. Point to Bucksport	<input type="checkbox"/> G - Sheepscot River
<input type="checkbox"/> D - Penobscot River Bucksport to Bangor	<input type="checkbox"/> H - Blue Hill Bay
	<input type="checkbox"/> I - Eastern Way/Somes Sound
	<input type="checkbox"/> J - Boothbay Harbor

Have you ever been convicted of a crime other than a minor traffic violation?

Yes No

If yes, please list date(s), crime(s) and submit a copy of the court judgment(s).

LICENSING REQUIREMENTS are a part of the Commission Rules PART A Sections 1-3. An applicant should review and be familiar with the requirements as listed in these Rules prior to commencing the application procedure. This application is in three parts as listed below. The applicant should follow the guidelines outlined

Section 1. Initial Appearance before the Commission.

(The Applicant must complete items a-d, with attachments as necessary, and forward to the Administrator, so as to be received at least 30 days prior to the scheduled appearance before the Commission. Normally, this will take place during a regular meeting of the commission. It is the Applicant's responsibility to contact the Administrator and arrange for inclusion on the agenda for a meeting. The Applicant must also sign and date the application form.)

a. Date of Initial Appearance before the Commission _____

b. Sponsoring Pilot or Organization _____

c. Request for consideration of training trips already made. Yes No

d. Copy of records of Previously made Trips attached. Yes No

(The following section will be completed by the Administrator following the appearance before the Commission and the application will then be returned to the Applicant)

Request for Previously Made Trips reviewed by Commission on _____

Decision of Commission on Training Trips Accept Reject

Comments of Commission:

I hereby certify, swear, and/or affirm that this application contains no willful misrepresentation or falsification and that the information provided by me, and which may be provided by me during the application process, is true and complete to the best of my knowledge and belief. I understand that the information provided might be verified and that I may be declared ineligible for a license certificate if the information contained herein, and provided by me, upon investigation, is found to be misrepresented or falsified.

Applicant's Signature: _____

Date: _____

Section 2. Training and Background Documentation.

(The Applicant must complete this section and provide all attachments as necessary, and forward to the Administrator, so as to be received at least 30 days prior to the scheduled appearance before the Commission. The Applicant must also sign and date the application form.)

- Copy of Federal License of at least a Master of 1600 Gross Tons with a first class pilot endorsement for the region for which application is being made.
- Copy of proof of training trips complying with Section 2 of the Rules of the Maine Pilotage Commission.
- Proof of physical examination.
- Proof of eye examination.
- Proof of US Citizenship and State of Maine residency.
- Two (2) letters of recommendation/character reference from individuals familiar with the applicant but not employed by the sponsoring pilot group.
- Results of pre-application drug test.
- Proof of enrollment in a federally approved drug testing program.
- Proof of current radar observer certification.
- Proof of ARPA (Automatic Radar Plotting Aids) certification.
- Required Application Fees in accordance with MRSA 38 § 93 *et seq*, enclosed.
- Background investigation by the Maine State Police. (This will be initiated by the Administrator following the Applicant's initial appearance before the Commission.)

Scheduled date of appearance before the Commission. _____

(Normally, this will take place during a regular meeting of the Commission. It is the Applicant's responsibility to contact the Administrator and arrange for inclusion on the agenda for a meeting. Following the appearance before the Commission, the Administrator will complete the following and either return the application or establish a schedule for the written examination.)

Decision of Commission: Accept for Testing Request further information

Comments of Commission:

Section 3. Examination.

Date Taken _____

Administered By _____

Score _____

Signature of Applicant _____

Signature of Examinations Officer _____

Effective Date of License _____

Annual Updates of Progress (as needed).

The Commission requires the sponsor to provide an update on each applicant at least annually, with reports due to the Commission by January 15th for the preceding calendar year. The Commission may revoke an application if progress is not apparent, or justification for continuing the application is not provided by the sponsor. Any action by the Commission will be sent to the Applicant and the Sponsor.