

## U.S. Coast Guard National Maritime Center

### Merchant Mariner Credential Application Acceptance Checklist

Below is a list of items that constitute an application for a U. S. Coast Guard Merchant Mariner Credential (MMC). The MMC application package **must** be submitted to your local Regional Examination Center (REC) and may be delivered via mail. In person visits are no longer required. Do not submit your MMC application package directly to the National Maritime Center (NMC) as this will result in significant delays.

#### CRITICAL ITEMS FOR EVALUATION

- Transportation Workers Identification Card (TWIC):** (For all transactions) - Provide evidence that you either hold or have held a valid TWIC (photocopy of TWIC) or have applied for a TWIC (TWIC Application Receipt). If you are not required to hold a TWIC according to CG-543 Policy Letter 11-15, then please include a statement that you do not require a TWIC. **IMPORTANT:** Failure to provide the above will result in your MMC application being returned to you.
  
- Evaluation User Fee:** Pay via credit card or bank account using <https://www.pay.gov>. **IMPORTANT:** Print and include your payment receipt as proof of payment.
  
- CG Form 719B Application:** Be sure to read and accurately complete this entire form. Double check your mailing address and contact information. **IMPORTANT:** Every person who receives an original credential must first take an oath. The oath may be administered by a designated Coast Guard individual or any person legally permitted to administer oaths in the jurisdiction where the person taking the oath resides (e.g. notary).
  
- Form I-551 Alien Registration Card:** A front and back photocopy of your form I-551 Alien Registration Card. **IMPORTANT:** This applies to foreign nationals applying for rating endorsements. You must show lawful admittance to the United States for permanent residence (Form I-551).
  
- Signed Conviction Statement:** At the time of application, each applicant must provide written disclosure of all convictions not previously disclosed to the Coast Guard on an application.
  
- CG Form 719K Physical Examination Report:** To be used for all original, renewal, and raise of grade officer, and qualified rating endorsement applications. Applications for entry-level (ordinary seamen, wiper, stewards department, food handler); endorsements should use the CG Form 719K/E Entry Level Physical Examination Report. The CG Form 719K is not required if you already have a valid

Medical Certificate. **IMPORTANT:** Food Handler endorsement with a 719K/E requires statement from physician attesting "free of communicable diseases". Be sure that your medical practitioner completes **all parts** of the form, including signature, and that it is dated within 12 months of your application.

- CG Form 719P Chemical Testing Report:** This applies to all original, renewal, and the following raise of grade transactions (any officer endorsement or first qualified rating endorsement). The chemical test report must be dated within six (6) months of your application. A letter from your mariner employer or chemical testing consortium group on company letterhead may be used in lieu of this form.
- Front and back photocopy of license, merchant mariner's document, and STCW endorsement (if applicable).
- Authorization: 3rd party info release or different correspondence/credential mailing address (if applicable).
- Evidence of appropriate sea service (if applicable).
- Photocopies of all applicable Training Course Certificate(s)(if applicable).

**\*\* IMPORTANT \*\***

All documents provided are subject to verification with the issuing authority. If any of the items displayed in the above box are missing at the time of application, you will be provided a "Notification of Incomplete Application" letter. From the date of this letter you will have 60-days to provide the missing information to the Regional Examination Center. If the missing information is not provided within the 60-day period, your application will be returned to you in the mail.

## U.S. Coast Guard Regional Exam Centers

- Once you have completed your application packet you can either mail, e-mail, fax, or turn it in by appointment to one of our Regional Exam Centers (REC) .
- A list of available RECs can be found at [www.uscg.mil/nmc](http://www.uscg.mil/nmc). Once here select “RECs.”
- If you plan on going to the REC to turn it in, please visit the NMC website at [www.uscg.mil/nmc](http://www.uscg.mil/nmc) to schedule an appointment. Once there, click “REC Information” and then choose the REC you will be visiting. Click “Appointments” and follow the directions.
- If e-mailing it, please use one of the e-mail addresses listed below. It is best to e-mail it to your nearest REC.
- If you have questions, please call us at 1-888-427-5662 or send e-mail to [IASKNMC@uscg.mil](mailto:IASKNMC@uscg.mil).

**NOTE! Do not mail applications to the National Maritime Center in Martinsburg, WV.**

<b>USCG- REC Anchorage</b> E-mail: REC-ANC- AppSubmission@uscg.mil	<b>USCG-REC Juneau</b> E-mail: REC-JUN- AppSubmission@uscg.mil	<b>USCG-REC Portland</b> E-mail: REC-POR- AppSubmission@uscg.mil
<b>USCG-REC Baltimore</b> E-mail: REC-BAL- AppSubmission@uscg.mil	<b>USCG-REC Long Beach</b> E-mail: REC-LOS- AppSubmission@uscg.mil	<b>USCG-REC Seattle</b> E-mail: REC-SEA- AppSubmission@uscg.mil
<b>USCG-REC Boston</b> E-mail: REC-BOS- AppSubmission@uscg.mil	<b>USCG-REC Memphis</b> E-mail: REC-MEM- AppSubmission@uscg.mil	<b>USCG-REC Oakland</b> E-mail: REC-OAK- AppSubmission@uscg.mil
<b>USCG-REC Charleston</b> E-mail: REC-CHA- AppSubmission@uscg.mil	<b>USCG-REC Miami</b> E-mail: mailto:REC-MIA- AppSubmission@uscg.mil	<b>USCG-REC St. Louis</b> E-mail: REC-SLM- AppSubmission@uscg.mil
<b>USCG-REC Honolulu</b> E-mail: REC-HON- AppSubmission@uscg.mil	<b>USCG-REC New Orleans</b> E-mail: REC-NEW- AppSubmission@uscg.mil	<b>USCG-REC Toledo</b> E-mail: mailto:REC-TOL- AppSubmission@uscg.mil
<b>USCG-REC Houston</b> E-mail: REC-HOU- AppSubmission@uscg.mil	<b>USCG-REC New York</b> E-mail: REC-NYC- AppSubmission@uscg.mil	

## Mariner Fees

Below is a list of fees for the various Mariner credentials issued by the United States Coast Guard. Each submitted application is subject to an evaluation, examination, and issuance fee. All fees required may be paid at the time the application is submitted or at the following times:

- Evaluation fee when the application is submitted
- Examination fee before the first examination section is taken
- Issuance fee before receipt of the MMC.

Fee payment(s) must be made in the exact amount and may be paid by check or credit card. Checks should be written out to the U. S. Coast Guard. The preferred method for submitting payment is by visiting [Pay.Gov](http://Pay.Gov). Once on [Pay.Gov](http://Pay.Gov), select **Agency List**, click **U**, select **United States Coast Guard**, select **USCG Merchant Mariner User Fee Payment**, and follow the directions. If [Pay.Gov](http://Pay.Gov) is used, please ensure that you include a copy of your receipt in your application packet.

If you apply for	And you need . . .		
	Evaluation then the fee is . . .	Examination then the fee is . . .	Issuance then the fee is . . .
MMC with officer endorsement:			
Original:			
Upper level	\$100	\$110	\$45
Lower level	100	95	45
Renewal	50	45	45
Raise of grade	100	45	45
Modification or removal of limitation or scope	50	45	45
Radio officer endorsement:			
Original	50	45	45
Renewal	50	n/a	45
Staff officer endorsements:			
Original	90	n/a	45
Renewal	50	n/a	45
MMC with rating endorsement:			
Original endorsement for ratings other than qualified ratings	95	n/a	45
Original endorsement for qualified rating	95	140	45
Upgrade or Raise of Grade	95	140	45
Renewal endorsement for ratings other than qualified ratings	50	n/a	45
Renewal endorsement for qualified rating	50	45	45
Modification or removal of limitation or scope	50	45	45
STCW certification:			
Original	No fee	No fee	No fee
Renewal	No fee	No fee	No fee
Reissue, replacement, and duplicate	n/a	n/a	<sup>1</sup> \$45

1 – Duplicate for MMC lost as a result of marine casualty: No fee

## PAY.GOV INSTRUCTIONS

**Please use the following instructions to submit payment for your credential via Pay.Gov. When submitting your application, please ensure that you include a copy of your receipt.**

- Go to [www.pay.gov](http://www.pay.gov).
- Click **Make a Payment**, which is located under the section labeled “Welcome to Pay.gov.”
- Under “Find a Form” select **USCG Merchant Mariner User Fee Payment**. Select **Continue to Form**. This will bring you to a list of definitions that can be reviewed (if needed). Click **Continue**.
- Enter all required information, and select what evaluation fee you will be paying. Please see “Mariner Fees”, enclosed within this packet, for guidance on which fee to select. Please note: The evaluation fee must be paid prior to submitting an application.
- Click **Continue** and choose the examination fee that is applicable. Please note: Not all applications require an examination fee. If a fee is applicable, it can be paid at the same time as your evaluation fee, or you can choose to pay it prior to going to the Regional Exam Center to test.
- Place a checkmark beside the \$45 Issuance Fee. Please note: The issuance fee can be paid at the same time as your evaluation fee, or you can choose to pay it at a later date. Your completed credential cannot be mailed until this fee is paid.
- Select **Continue**. This will take you to the summary page. Click **Continue** to proceed to the user-fee payment form. You can use your credit card or bank account in order to submit payment. Choose your method of payment and select **Continue**. Fill in required account information and select **Continue**.
- Once you click **Continue** you will be provided with a payment receipt. Print a copy for your records and print another one for your application packet.

## ONLINE APPLICATION STATUS INSTRUCTIONS

Once submitted and accepted at the Regional Exam Center, you can check the status of your application online.

Use the following instructions to check your application status.

- Go to [www.uscg.mil/nmc](http://www.uscg.mil/nmc).
- Select **Application Status**, located on the left side of the page.
- You can search using your Mariner Number and Application ID **OR** your last name, last 4 digits of your Social Security Number, and Date of Birth.
- Enter the requested information and select **Go**.
- The current status of your application will appear.

To view the current application processing time, visit [www.uscg.mil/nmc](http://www.uscg.mil/nmc). Once here select “Performance and Analysis” and go to the “Performance Report” tab. Please note this is the typical processing time for those applications that have no issues and are not delayed by an extensive security or medical review. If a more extensive review is needed or information is missing, the processing time will be longer.

# Application for License as an Officer, Staff Officer, or Operator and for Merchant Mariner's Document

<b>Section I - Personal Data</b>	(For CG Use Only) Date Application Received
----------------------------------	---

Name (Last, First, Middle) (Maiden Name if applicable)		Social Security Number
Date of Birth (Month, Day, Year) ____ / ____ / ____	Place of Birth (City, State, Country)	Country of Citizenship
Color of Eyes	Color of Hair	Height _____ ft _____ in      Weight _____ lbs
Mailing Address, City, State, Zip Code (PO Boxes are acceptable)	Phone Number (    )                      -	
	FAX Number (    )                      -	
	E-mail Address	
Next of Kin's Name and Mailing Address, City, State, Zip Code	Relationship	
	Next of Kin's Phone Number (    )                      -	
	Next of Kin's E-mail Address	

**Parental or Guardian's Consent**

I am under 18 years old and a notarized statement of parental/guardian consent is attached.

**Section II - Type of Transaction**

Transaction	Original	Renewal	Raise in Grade	Endorsement	Duplicate*
<input type="checkbox"/> License	<input type="checkbox"/>				
<input type="checkbox"/> Merchant Mariner's Document (MMD)	<input type="checkbox"/>				
<input type="checkbox"/> STCW Certificate	<input type="checkbox"/>				
<input type="checkbox"/> Certificates of Registry	<input type="checkbox"/>				
<input type="checkbox"/> Certificate of Discharge Sea Service					

**\*If requesting a duplicate for a lost or stolen License/MMD attach a signed statement explaining how, when and where your credentials were lost or stolen and your efforts to recover them.**

**Applying for:**

Grade of License (include tonnage, waters, propulsion mode, horsepower, etc.); or MMD rating (Able Seaman, QMED-Oiler, etc.)

**State Current or Previous License/Merchant Mariner's Document**

Description of License/Merchant Mariner's Document	Place of Issue	Date of Issue

## Application for License as an Officer, Staff Officer, or Operator and for Merchant Mariner's Document

**Section III - Narcotics, DWI/DUI, and Conviction Record** Conviction means found guilty by judgment or by plea and includes cases of deferred adjudication (no contest, adjudication withheld, etc.) or where the court required you to attend classes, make contribution of time or money, receive treatment, submit to any manner of probation or supervision, or forgo appeal of a trial court finding. Expunged convictions must be reported unless the expungement was based upon a showing that the court's earlier conviction was in error.

Yes (X)	No (X)	<b>Indicate your answers to the following questions; sign and date at the bottom of this section.</b>
		Have you ever been convicted of violating a dangerous drug law of the United States, District of Columbia, or any state, or territory of the United States? (This includes marijuana.) <b>(If yes, attach statement)</b>
		Have you ever been a user of/or addicted to a dangerous drug, including marijuana? <b>(If yes, attach statement)</b>
		Have you ever been convicted by any court – including military court – for an offense other than a minor traffic violation? <b>(If yes, attach statement)</b>
		Have you ever been convicted of a traffic violation arising in connection with a fatal traffic accident, reckless driving or racing on the highway or operating a motor vehicle while under the influence of, or impaired by, alcohol or a controlled substance? <b>(If yes, attach statement)</b>
		Have you ever had your driver's license revoked or suspended for refusing to submit to an alcohol or drug test? <b>(If yes, attach statement)</b>
		Have you ever been given a Coast Guard Letter of Warning or been assessed a civil penalty for violation of maritime or environmental regulations? <b>(If yes, attach statement)</b>
		Have you ever had any Coast Guard license or document held by you revoked, suspended or voluntarily surrendered? <b>(If yes, attach statement)</b>

**I have attached a statement of explanation for all areas marked "yes" above. I signed this section with full understanding that a false statement is grounds for denial of the application as well as criminal prosecution and financial penalty. I understand that failure to answer every question will delay my application.**

<b>X</b> Signature of Applicant agreeing to the above statement	Date
---	------

### Section IV – Character References (For Original License Applicants Only)

I am an Original License Applicant and have attached three letters of written recommendation.

### Section V - Mariner's Consent

**National Driver Registry (NDR) (Mandatory):** I authorize the National Driver Registry to furnish the U.S. Coast Guard (USCG) information pertaining to my driving record. This consent constitutes authorization for a single access to the information contained in the NDR to verify information provided in this application. I understand the USCG will make the information received from the NDR available to me for review and written comment prior to taking any action against my License or Merchant Mariner's Document. Authority: 46 U. S. C. 7101(g) and 46 U. S. C. 7302(c).

**X** Signature of Applicant

Date

**Mariner's Tracking System (Optional):** I consent to voluntary participation in the Mariner's Tracking System to be used by the Maritime Administration (MARAD) in the event of a national emergency or sealift crisis. In such an emergency, MARAD would disseminate my contact information to an appropriate maritime employment office to determine my availability for possible employment on a sealift vessel. Once consent is given, it remains effective until revoked in writing. Send signed notice of revocation to the USCG National Maritime Center (NMC -4A), 4200 Wilson Blvd., Suite 630, Arlington, VA 22203 - 1804

**X** Signature of Applicant

Date

**Application for License as an Officer, Staff Officer, or  
Operator and for Merchant Mariner's Document**

**Section VI - Certification and Oath**

**Certification (Mandatory)**

Whoever, in any manner within the jurisdiction of any department or agency of the United States, knowingly and willfully falsifies, conceals or covers up by any trick, scheme, or device a material fact, or makes any false, fictitious or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, violates the U. S. Criminal Code at Title 18 U. S. C. 1001 which subjects the violator to Federal prosecution and possible incarceration, fine or both.

I certify that the information on this application is true and correct and that I have not submitted any application of any type to the Officer-in-Charge, Marine Inspection in any port and been rejected or denied within 12 months of this application.

**X** Signature of Applicant agreeing to the above statement

Date

**Oath (For originals only. Coast Guard official must witness applicant signature.)**

I do solemnly swear or affirm that I will faithfully and honestly, according to my best skill and judgment, and without concealment and reservation, perform all the duties required of me by the laws of the United States. I will faithfully and honestly carry out the lawful orders of my superior officers aboard a vessel.

**X** Signature of Applicant

Date

Signature of Coast Guard Official

Date

**U.S. Coast Guard Use Only**

**Section VII - REC Application Approval**

Signature of Approving Official

REC

(Application has been approved on this date)

Date

**Section VIII - REC Citizenship Verification & Credential Issuance**

Indicate Proof of Citizenship below (For non U.S. also include I.N.S. Alien Registration #)

License Endorsement(s) Issued

Document Rating(s) Issued

Issue Number

License Serial Number

MMD Serial Number

Expiration Date

Expiration Date

Check box if corresponding STCW certificate was issued.

Signature of Issuing Official

REC

Date

**Section IX - NMC Verification of Duplicate Transactions**

Ratings/Endorsements Authorized

Signature of Approving NMC Official: \_\_\_\_\_ Date: \_\_\_\_\_

## Application for License as an Officer, Staff Officer, or Operator and for Merchant Mariner's Document

### PRIVACY ACT STATEMENT

In accordance with 5 U. S. C. 552a(e)(3), THE FOLLOWING INFORMATION IS PROVIDED TO YOU WHEN SUPPLYING PERSONAL INFORMATION TO THE U.S. COAST GUARD.

1. AUTHORITY WHICH AUTHORIZED THE SOLICITATION OF INFORMATION
  - A. 46 U. S. C. 7302, 7305, 7314, 7316, 7319, AND 7502
  - B. SEE 46 CFR PARTS 10 AND 12.
2. PRINCIPLE PURPOSES FOR WHICH INFORMATION IS INTENDED TO BE USED.
  - A. TO ESTABLISH ELIGIBILITY FOR A MERCHANT MARINER'S DOCUMENT, DUPLICATE DOCUMENTS, OR ADDITIONAL ENDORSEMENTS ISSUED BY THE COAST GUARD.
  - B. TO ESTABLISH AND MAINTAIN A CONTINUOUS RECORD OF THE PERSONS DOCUMENTATION TRANSACTIONS.
  - C. PART OF THE INFORMATION IS TRANSFERRED TO A FILE MANAGEMENT COMPUTER SYSTEM FOR A PERMANENT RECORD.
3. THE ROUTINE USES WHICH MAY BE MADE OF THE INFORMATION:
  - A. TO MAINTAIN RECORDS REQUIRED BY 46 U. S. C. 7319 AND 7502.
  - B. TO ENABLE ELIGIBLE PARTIES (*i.e. the mariner's heirs or properly designated representative*) TO OBTAIN INFORMATION.
  - C. TO PROVIDE INFORMATION TO THE U.S. MARITIME ADMINISTRATION FOR USE IN DEVELOPING MANPOWER STUDIES AND TRAINING BUDGET NEEDS.
  - D. TO DEVELOP INFORMATION AT THE REQUEST OF COMMITTEES OF CONGRESS.
  - E. TO PROJECT BILLET ASSIGNMENTS AT COAST GUARD MARINE INSPECTION/SAFETY OFFICES.
  - F. TO PROVIDE INFORMATION TO LAW ENFORCEMENT AGENCIES FOR CRIMINAL OR CIVIL LAW ENFORCEMENT PURPOSES.
  - G. TO ASSIST U.S. COAST GUARD INVESTIGATING OFFICERS AND ADMINISTRATIVE LAW JUDGES IN DETERMINING MISCONDUCT, CAUSES OF CASUALTIES, AND APPROPRIATE SUSPENSION AND REVOCATION ACTIONS.
4. WHETHER OR NOT DISCLOSURE OF SUCH INFORMATION IS MANDATORY OR VOLUNTARY (Required by law or optional) AND THE EFFECTS ON THE INDIVIDUAL, IF ANY, OF NOT PROVIDING ALL OR PART OF THE REQUESTED INFORMATION IS VOLUNTARY, DISCLOSURE OF THIS INFORMATION IS VOLUNTARY, BUT FAILURE TO PROVIDE MAY RESULT IN NON-ISSUANCE OF THE REQUESTED DOCUMENT(S).

"An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number."

"The Coast Guard estimates that the average burden for this report is 10 minutes. You may submit any comments concerning the accuracy of this burden estimate or any suggestions for reducing the burden to: Commanding Officer, U. S. Coast Guard National Maritime Center, 4200 Wilson Blvd, Suite 630, Arlington, VA 22203-1804 or Office of Management and Budget, Paperwork Reduction Project (1625-0040), Washington, DC 20503."

## Small Vessel Sea Service Form

### Section I – Applicant Information (Note: Complete One Form per Vessel)

Name (Last, First, Middle)		Social Security Number	
Vessel Name		Official Number or State Registration Number	
Vessel Gross Tons	Length	Width (if known)	Depth (if known)
Propulsion (Motor/Steam/Gas Turbine/Sail/Aux Sail)		Served As: (Master/Mate/Operator/Deckhand/etc.)	
Name of body or bodies of water upon which vessel was underway (Geographic Locations)			

### Section II – Record of Underway Service

In the block under the appropriate month, write in the number of days you served for that year (you can show more than one year)

January (year / days)	February (year / days)	March (year / days)	April (year / days)	May (year / days)	June (year / days)
____/____	____/____	____/____	____/____	____/____	____/____
____/____	____/____	____/____	____/____	____/____	____/____
____/____	____/____	____/____	____/____	____/____	____/____
____/____	____/____	____/____	____/____	____/____	____/____
____/____	____/____	____/____	____/____	____/____	____/____
July (year / days)	August (year / days)	September (year / days)	October (year / days)	November (year / days)	December (year / days)
____/____	____/____	____/____	____/____	____/____	____/____
____/____	____/____	____/____	____/____	____/____	____/____
____/____	____/____	____/____	____/____	____/____	____/____
____/____	____/____	____/____	____/____	____/____	____/____
____/____	____/____	____/____	____/____	____/____	____/____

Total number of days served on this vessel:	<input style="width: 90%;" type="text"/>	Number of days served on Great Lakes:	<input style="width: 90%;" type="text"/>
Average hours underway (per day)?	<input style="width: 90%;" type="text"/>	Number of days served on waters shoreward of the boundary line as defined in 46 CFR Part 7:	<input style="width: 90%;" type="text"/>
Average distance offshore:	<input style="width: 90%;" type="text"/>	Number of days served on waters seaward of the boundary line as defined in 46 CFR Part 7:	<input style="width: 90%;" type="text"/>

### Section III – Signature and Verification **Applicant Read Before Signing!**

I certify that I have served on the above vessel as stated. I am making this statement in order that I, the applicant, may obtain a license/document to operate a vessel under the provisions of Title 46 CFR, as applicable. I understand that if I make any false or fraudulent statement in this certification of service, I may be subject to a fine or imprisonment of up to five (5) years or both (18 U. S. C. 1001).

<b>X</b> Signature of Applicant	Date
---------------------------------	------

**NOTE:**

- If you were not the owner, the Owner, Operator, or Master must complete the remainder of this form.
- If you were of the above vessel, proof of ownership must be provided with this form.

**Owner, Operator or Master Read Before Signing!** I certify that the above individual has served on the above vessel as stated. I am making this statement in order that the applicant may obtain a license to operate a vessel under the provisions of Title 46 CFR, as applicable. I understand that if I make any false or fraudulent statement in this certification of service, I may be subject to a fine or imprisonment of up to five (5) years or both (18 U. S. C. 1001).

<b>X</b> Signature and title of person attesting to experience	Date
--	------

Owner's, Operator's, or Master's Name (Last, First Middle):	Owner's, Operator's, or Master's address and phone number:
---	--

PRIVACY ACT STATEMENT

In accordance with 5 U. S. C. 552a(e)(3), THE FOLLOWING INFORMATION IS PROVIDED TO YOU WHEN SUPPLYING PERSONAL INFORMATION TO THE U.S. COAST GUARD.

1. AUTHORITY WHICH AUTHORIZED THE SOLICITATION OF INFORMATION:
  - A. 46 U. S. C. 7302, 7305, 7314, 7316, 7319, AND 7502.
  - B. SEE 46 CFR PARTS 10 AND 12.
  
2. PRINCIPLE PURPOSES FOR WHICH INFORMATION IS INTENDED TO BE USED:
  - A. TO ESTABLISH ELIGIBILITY FOR A MERCHANT MARINER'S LICENSE OR DOCUMENT ISSUED BY THE COAST GUARD.
  - B. TO ESTABLISH AND MAINTAIN A CONTINUOUS RECORD OF THE PERSON'S DOCUMENTATION TRANSACTIONS.
  - C. PART OF THE INFORMATION IS TRANSFERRED TO A FILE MANAGEMENT COMPUTER SYSTEM FOR A PERMANENT RECORD.
  
3. THE ROUTINE USES WHICH MAY BE MADE OF THE INFORMATION:
  - A. TO MAINTAIN RECORDS REQUIRED BY 46 U. S. C. 7319 AND 7502.
  - B. TO ENABLE ELIGIBLE PARTIES (*i.e. the mariner's heirs or properly designated representative*) TO OBTAIN INFORMATION.
  - C. TO PROVIDE INFORMATION TO THE U.S. MARITIME ADMINISTRATION FOR USE IN DEVELOPING MANPOWER STUDIES AND TRAINING BUDGET NEEDS.
  - D. TO DEVELOP INFORMATION AT THE REQUEST OF COMMITTEES OF CONGRESS.
  - E. TO PROJECT BILLET ASSIGNMENTS AT COAST GUARD MARINE INSPECTION/SAFETY OFFICES.
  - F. TO PROVIDE INFORMATION TO LAW ENFORCEMENT AGENCIES FOR CRIMINAL OR CIVIL LAW ENFORCEMENT PURPOSES.
  - G. TO ASSIST U.S. COAST GUARD INVESTIGATING OFFICERS AND ADMINISTRATIVE LAW JUDGES IN DETERMINING MISCONDUCT, CAUSES OF CASUALTIES, AND APPROPRIATE SUSPENSION AND REVOCATION ACTIONS.
  
4. WHETHER OR NOT DISCLOSURE OF SUCH INFORMATION IS MANDATORY OR VOLUNTARY (*Required by law or optional*) AND THE EFFECTS ON THE INDIVIDUAL, IF ANY, OF NOT PROVIDING ALL OR PART OF THE REQUESTED INFORMATION IS VOLUNTARY, DISCLOSURE OF THIS INFORMATION IS VOLUNTARY, BUT FAILURE TO PROVIDE MAY RESULT IN NON-ISSUANCE OF THE REQUESTED DOCUMENTS.

“An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number.” The Coast Guard estimates that the average burden for this report is 15 minutes. You may submit any comments concerning the accuracy of this burden estimate or any suggestions for reducing the burden to: Commanding Officer, U. S. Coast Guard National Maritime Center, 100 Forbes Drive, Martinsburg, WV 25404 or Office of Management and Budget, Paperwork Reduction Project (1625-0040), Washington, DC 20503.

# MERCHANT MARINER CREDENTIAL APPLICATION THIRD PARTY AUTHORIZATION

I \_\_\_\_\_ (print full name), authorize the U.S. Coast Guard National Maritime Center (NMC) to disclose information and/or records regarding my **current credential application** to/with the Third Party authorized, to include only those boxes checked below.

Taking this action is entirely voluntary; you are under no obligation to consent to the release of your information to any third party.

Act on my behalf in **ALL MATTERS** pertaining to the processing of my current U.S. Coast Guard credential application to include mailing credential to third party address.

### Or, Matters Specifically Pertaining to

Professional qualifications, certification records, sea service time, or examinations.

Any medical information related to the processing of my current application for a Merchant Mariner Credential.

Safety and Suitability.

Official correspondence and/or previous Merchant Mariner Credentials.

Mail my credential to the third party listed below.

### Third Party Information (\* - Required. This information will be used to verify third party identification.)

<b>* Authorized Person's Name (Last, First MI):</b>	<b>Organization (if applicable):</b>
<b>* Authorized Person's Mailing Address:</b>	<b>* Authorized Person's Phone Number:</b>
	<b>Authorized Person's Email Address (optional):</b>

This authorization expires either upon my written revocation of this authorization submitted via fax, e-mail or regular mail, or final agency action regarding my current application for a Merchant Mariner Credential.

Mariner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(MM/DD/YYYY)

Mariner's Reference Number or Last 4 of Social Security Number:

### You may send the release to the NMC by the four methods listed below:

- Include it with your credential application packet
- Scan the signed release and email it to [IASKNMC@uscg.mil](mailto:IASKNMC@uscg.mil)
- Fax the signed release to (304) 433-3416
- Mail the signed release to the NMC at 100 Forbes Drive, Martinsburg, WV 25404