



Australian Government

Australian Maritime Safety Authority

EYESIGHT TEST CERTIFICATE

Marine Safety (Domestic Commercial Vessel) National Law Act 2012

Marine Order 505 (Certificate of competency – national law) 2013

This form is to be completed by a qualified Medical Practitioner/Optomestrist, who should read the notes on page two prior to commencing any testing.

A. Applicant details

Title (Mr, Mrs, Ms, etc.)	Surname	Given name		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Street name and number		Town / suburb	State	Postcode
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>
Postal Address				
<input type="checkbox"/> Same as street address				
<input type="text"/>		Town / suburb	State	Postcode
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>
Phone	Mobile	Email		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Date of birth	Identified by (Driver's Licence, etc)	Level of certificate of competency applied for		
<input type="text"/>	<input type="text"/>	<input type="text"/>		

B. Results of examination

1 Letter Test (Snellen Principle)

With or without aids to vision

6/6 Better eye	6/9 Other eye
<input type="text"/>	<input type="text"/>

- 1a** Has the deck certificate requirement been met? Yes No
- 1b** Has the engineering certificate requirement been met? Yes No
- Minimum acceptable is 6/12 in both eyes with or without aids to vision.
- 2** Has the near vision requirement been met? Yes No
- Read N8 chart at 300mm – 500mm with or without aids to vision.
- 3** Were aids to vision used to achieve minimum and near vision requirements? Yes No
- 4** Has the colour vision requirement been met? Yes No
- The ISHIIHARA Test with or without aids to vision; or
- The Holmes-Wright Lantern Test Type B with or without aids to vision; or
- A colour-matching test in accordance with *Marine Order 9 (Health – medical fitness) 2010*.

C. Medical Practitioner/Optomestrist's declaration

I declare that:

- The candidate has/has not met the eyesight requirements listed above.
- to the best of my knowledge the information provided by me in this application (and any attachments I have included with this application) is true and correct.

Medical Practitioner signature	Medical Practitioner name	Date of examination
<input type="text"/>	<input type="text"/>	<input type="text"/>
		(valid for 2 years)

Medical Practitioner address

Where to lodge: Roads and Maritime Services NSW • Maritime Safety QLD • Transport Safety VIC • Marine and Safety TAS • Department of Planning, Transport and Infrastructure SA • Department of Transport WA • Marine Safety NT.

Privacy Statement

The collection of information requested in this form is required or authorised by *Schedule 1* of the *Marine Safety (Domestic Commercial Vessel) National Law Act 2012* (the Act). It will be used for purposes related to the Act and may be provided to Commonwealth or State / Territory government agencies for the purposes of marine safety. Failure to provide the information may result in the transaction not being processed. To contact us, or for more information on how to access or correct your personal information, how to make a privacy complaint, or how your information may be used or disclosed for purposes beyond those described in this statement, visit www.amsa.gov.au/privacy/

Notes

General

- The term “aids to vision” means glasses or contact lenses which have been prescribed by a qualified optometrist or eye specialist to correct a person’s eyesight.
- Monocular Vision (Deck and Engine crew) - for an applicant who has vision in only 1 eye, the applicant does not have to meet the standard that applies to the other eye; and the certificate must include a statement that the applicant meets the standard with monocular vision only.
- Coxswain certificates of competency should be considered as a deck certificate for the purpose of this standard.
- Eyesight and colour vision testing is not required for renewal of a certificate for the following candidates, unless any changes to vision affecting ability to perform duties are noted on the Declaration of Medical Fitness:
 - General Purpose Hand NC;
 - Coxswain Grade 2 NC;
 - Coxswain Grade 1 NC;
 - Master <24m NC;
 - Marine Engine Driver Grade 3 NC; or
 - Marine Engine Driver Grade 2 NC.

Colour Vision

- A colour-corrective lens cannot be used in a colour-vision test.
- The Ishihara test shall be conducted using all 24 plates. In order to pass, a candidate must correctly identify at least 13 of the first 15 plates in the 24-plate version. The only optical aids permitted to be used for colour vision testing are prescribed lenses worn by an applicant for the acuity test. An applicant may not use tinted glasses or tinted contact lenses.
- Where an applicant fails the Ishihara colour vision test, he/she may be re-examined with the Holmes-Wright lantern test type “B” or the Marine Orders colour matching test for Marine Engine Driver Grade 1NC and Engineer 3 NC candidates.
- In the case of applicants Master <24m NC, Master (Inland Waters), Coxswain Grade 1 NC, Coxswain Grade 2 NC the National Regulator or the delegate of the National Regulator may, in lieu of the above requirements, accept a statement from a suitably qualified optometrist, eye specialist or medical practitioner, that after having examined the applicant, the applicant suffers no greater abnormality in colour-vision than could be tested by the Ishihara Test.
- Colour vision testing is not required for:
 - General Purpose Hand NC;
 - Marine Engine Driver Grade 3 NC; or
 - Marine Engine Driver Grade 2 NC.