



Australian BORDER FORCE

Smallcraft Arrival Report

Please open this form using Adobe Acrobat Reader. Either type in the fields provided or print this form and complete it using a pen and BLOCK LETTERS.
Tick where applicable ☒

Vessel Details

Name of Vessel		Call Sign	
E-mail Address	Mobile Number	Official Number	
Sail Number	Port and Country Registered		

Arrival Details

Port of Arrival		Last six ports before Australia		Dates of Departure	
		1.		1. / /	
Date of Arrival / /		2.		2. / /	
Time of Arrival		3.		3. / /	
Intended length of stay in Australia		4.		4. / /	
		5.		5. / /	
Intended Last port in Australia		6.		6. / /	

Vessel Type and Size

Vessel Type (tick appropriate vessel)		Sailing Yacht <input type="checkbox"/>	Motor Launch <input type="checkbox"/>	Motor Sailer <input type="checkbox"/>	Other (specify) <input type="text"/>		
Rig Type (tick appropriate rig)		Cutter <input type="checkbox"/>	Yawl <input type="checkbox"/>	Schooner <input type="checkbox"/>	Sloop <input type="checkbox"/>	Ketch <input type="checkbox"/>	Other (specify) <input type="text"/>
Length – Overall (metres)	Waterline (m)	Beam (m)	Draught (m)	Number of Masts	Number of Hulls		
Hull Material		Nett/Registered Tonnage		Gross Tonnage			

Construction Details (if known)

Builder/Designer/Designer Name	Year Built
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Colours

Masts	Sail Covers	Hull (above w/line)	Deckhouse
Superstructure	Sails	Hull (below w/line)	Deck

Other Identifying Features

Include Hull Stripes, logos, Radar Dome location, Windvanes, Dinghy colour and locations

Details of Owner

Owner		
Phone Number	Mobile Number	Satphone Number
Address		

Details of Persons on board *(Please list Master first)*

Ref	Family Name	Given Names	Sex M/F	Date of Birth	Country of Birth	Passport Number	Nationality	OFFICIAL USE ONLY
1	MASTER			/ /				
2				/ /				
3				/ /				
4				/ /				
5				/ /				
6				/ /				
7				/ /				
8				/ /				
9				/ /				
10				/ /				
11				/ /				
12				/ /				
13				/ /				
14				/ /				
15				/ /				
16				/ /				

Electronic Equipment *(For example – Radio, Radar, EPIRB, Computer, TV, Stereo, etc.)*

Ref	Item (eg. Radio)	Make/Model (eg. Motorola M102 UHF/VHF transceiver)	Serial Number (eg. 123456)	Ref	Item (eg. Radio)	Make/Model (eg. Motorola M102 UHF/VHF transceiver)	Serial Number (eg. 123456)
1				12			
2				13			
3				14			
4				15			
5				16			
6				17			
7				18			
8				19			
9				20			
10				21			
11				22			

If insufficient space, please attach sheet with additional details

Cargo Intended for Discharge in AustraliaYes ☐ No ☐**Firearms on Board** (please specify)

Description including Make/Model	Quantity	Value A\$	Serial Number	OFFICIAL USE ONLY

Narcotic and Restricted Drugs on Board (please specify)

Description of Drug	Quantity	Where Stored	OFFICIAL USE ONLY

Alcohol and Tobacco related Ship's Stores (please specify)

Description	Quantity	OFFICIAL USE ONLY		
		Released	Duty Paid	Remarks
Beer/Stout				
Brandy				
Other Spirits				
Wine				
Other (specify)				
Cigarettes				
Cigars/Tobacco				

Note: Goods on board may only be removed with prior permission from the Australian Border Force (ABF).**Animals on Board**

Description	Number
OFFICIAL USE ONLY	

Returning Australian Vessels Only

Port Departed from in Australia

Details of any structural alterations or equipment upgrades made since departure from Australia

Declaration (* Master only if Owner not on board at time of declaration – please ✓ applicable)**WARNING:** A false or misleading statement to an officer of customs is an offence.

I,

* Master ☐ / Owner ☐ of the declare that all particulars stated on this report are true and correct.

Signature	Date / /
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OFFICIAL USE ONLY – Safety, Capability and Intentions

Engines

Type	Number	Make/Model	Fuel	Horsepower	Speed under power km knots	Range under power km nm	Fuel Tank Capacity litres gallons
Main					<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
Auxiliary					<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>

Safety Equipment

Life Raft Make	Life Raft Length	metres <input type="text"/> feet <input type="text"/>	EPIRB Make/Model	Outboard Motor HP	Flares (Quantity)
Dinghy Make	Dinghy Length	metres <input type="text"/> feet <input type="text"/>	Water Tank Capacity	litres <input type="text"/> gallons <input type="text"/>	Life Jackets (Quantity)
					Life Buoys (Quantity)

Alterations/work intended to be done on vessel in Australia

Note: If the cost of work/parts exceeds A\$2000 some export documentation is required.

Name and Addresses of Contacts or Family in Australia

Arrival Details

Boarding Details: Place		Officers		Date / /	Time am pm <input type="text"/> <input type="text"/>
Input Details: Place		Craft ID C	Movement ID I	Date Input / /	Time Input am pm <input type="text"/> <input type="text"/>
Programmed moves of vessel and intentions of Master in Australia					
Cruising Permit Yes <input type="checkbox"/> No <input type="checkbox"/>	Issued at		Security Type	Date Issued / /	Date of Expiry / /
	Conditions				Photograph Yes <input type="checkbox"/> No <input type="checkbox"/>
Imported Permanent <input type="checkbox"/> Temporary <input type="checkbox"/>	Issuing Port		Destination Port		Date of Issue / /
	Port of Importation			Date deemed Imported / /	Date Entry Lodged / /
	Security Type	Expiry Date of Temporary Import / /		Conditions	

SMALLCRAFT DEPARTURE REPORT

Departure Details

Boarding Details: Place		Officers		Date / /	Time am pm <input type="text"/> <input type="text"/>
Input Details: Place		Craft ID C	Movement ID I	Date Input / /	Time Input am pm <input type="text"/> <input type="text"/>
Clearance Granted	In Office <input type="checkbox"/>	On Board <input type="checkbox"/>	Other (specify) <input type="text"/>	Number of People on Board	Photograph Yes <input type="checkbox"/> No <input type="checkbox"/>
Details of persons on board for departure (only give changes to list on page 2)					
Changes to vessel or work done since arrival					
Remarks					
Signature of ABF Officer					Date / /