



# APPLICATION FOR MANUFACTURERS' IDENTIFICATION CODE (MIC) HULL IDENTIFICATION CODING SYSTEM

## SECTION 1: - BUSINESS DETAILS (Please print) **(ALL DETAILS MUST BE PROVIDED)**

Company Name: \_\_\_\_\_

Trading Name: \_\_\_\_\_

Full Contact Name: \_\_\_\_\_ Mobile No: \_\_\_\_\_

Business Address: \_\_\_\_\_

COPY OF **CERTIFICATE OF BUSINESS REGISTRATION** ATTACHED? YES = PROCEED / **NO = STOP – ATTACH COPY TO PROCEED**

Postal Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Facsimile: \_\_\_\_\_

Email Address: \_\_\_\_\_ ABN: \_\_\_\_\_

Date Incorporated: \_\_\_\_\_ Date Registered: \_\_\_\_\_ Date Comm. Trading: \_\_\_\_\_

Name of Manufacture? \_\_\_\_\_ Are you a BIA Member? Yes  No

## SECTION 2: - MIC

I / We request that you issued an MIC code from the selection below:

Country Code .....**AU**.....

First Choice: ...../...../.....  
(List three letters)

Second Choice: ...../...../.....  
(List three letters)

**IF YOUR CHOICE IS NOT AVAILABLE WE WILL CONTACT YOU FOR AN ALTERNATIVE CHOICE.**

### OFFICE USE ONLY

Approved MIC: \_\_\_\_\_

Approved by: \_\_\_\_\_

Date Payment received: \_\_\_\_\_

Signed : \_\_\_\_\_

Applicant Advised: \_\_\_\_\_

## SECTION 3: - DECLARATION

I / We hereby agree and acknowledge that we are bound to apply the International Standard ISO 10087 (Small Craft – Hull Identification – Coding System), and by any amendments made thereto.

I / We will undertake to ensure the Hull Identification Number affixed to our products will be unique and no duplication will occur. Records of HIN and destination of product will be retained and available to authorised authorities.

I / We undertake to advise BIA immediately of any change of business details or cessation of business.

I / We enclose payment of \$335 to secure the unique MIC

I / We have attached Certificate of Registration of Business

**I / We agree to pay an annual fee of \$175 to maintain the unique MIC**

Dated this \_\_\_\_\_ Day of \_\_\_\_\_ 20 \_\_\_\_\_

Signature \_\_\_\_\_

**Please return completed form with \$335 payment Credit Card Facility Available to**

**Boating Industry Association of WA**

PO BOX 850 Inglewood WA 6932

Tel (08) 9227 7899 Email: [admin@biawa.asn.au](mailto:admin@biawa.asn.au)



Bank Transfer CBA BSB 066 118 Account 1034 0026