







CICS029v5220913CS

# ADVANCE NOTIFICATION/INWARD REPORT FOR YACHTS/SMALL CRAFT

1. REGISTRATION DETAILS						
Craft name:			Master Email:			
				1		
Country of re	gistration:	Port of registr	ation:		Registration	number:
Call sign:	AIS Number:	Name of perso	n in c	hargo	Total numb	er of persons on board:
Call Sign.	Als Number.	Name of perso	)	naige.	Total Hullion	er or persons on board.
Date of regist	Date of registration: Sail nun		Sail number:		Home Port:	
_						
2. AD\	ANCE INFORMAT	ION OF ARRIVA	<b>L</b> (Per	son in cha	ge of the vess	sel to complete)
Estimated da	te of arrival:		Estir	nated time	of arrival:	
Dant of audica	1	1			D	l-t
Port of arriva		Last port of de	partui	re:	Departure date:	
3 ARF	RIVAL DETAILS (This	nortion is to he co	mnlet	ed hy the (	ustoms Office	r)
Port of arriva		Date of arrival	-			-
Port arrived f	rom:		Estir	nated peri	od of stay in t	he Cook Islands:
	OF PREVIOUS PO		ID DA	ATE OF D	EPATURE	
1.	ise list in sequence, lat	test ports Jirst)	6.			
2.			7.			
3.			8.			
4.			9.			
5.	5.		10.			
5. FIREARMS (Specify makes, models & serial numbers)						
		Make:		Model:		Serial number:
Yes	□ No					

6. CONTROLLED DRUGS/MEDICINES ON BOARD ( Name and Quantity)			
☐ Yes ☐ No			
7. CURRENCY REPORT			
Amount	Currency		Others
O CTOREC ON ROARD			
8. STORES ON BOARD Beer		Quantity (Litres)	
beei		Qualitity (Littles)	
Wine		Quantity (Litres)	
Spirits		Quantity (Litres)	
Cigarettes/Tobacco		Quantity	
9. NEXT OVERSEAS POR	TS		
Next overseas Por		Ехрес	ted date of departure
1.			
2.			
3.			
10. CRAFT STATUS (Put a c	ross "X" in the appr	opriate box)	
Visiting Overseas Craft		Island registered aft	Permanently importing craft to the Cook Islands:
Please attach photo of Ya			Passport Bio Data page of Master
Notes: It is mandatory to upload image ple	ase click box below	Notes: It is mandator	y to upload image please click box below

11. CRAFT DETAILS	(Put a cross	"X" in the approp	riate b	ox)		
Craft Type:	Design:		,	Hull Design:		
☐ Yacht ☐ Motor Launch ☐ Other (Specify below)					☐ Catamaran ☐ Trimaran pecify below)	
Yacht Rig:			Ma	st Constructio	n·	
☐ Cutter ☐ Sloop ☐ Ketch ☐ Other (Specify below)	□ Yawl □	Schooner	□A	Mast Construction:  ☐ Alloy ☐ Timber ☐ Composite ☐ Other (Specify below)		
	•••••					
Hull Construction  ☐ Steel ☐ Alloy ☐ Ferro ☐ 0	Cement $\square$	Fiberglass 🗆 Co	ompos	ite □Other (Sp	ecify	
Length:	Beam:			Draught:		Gross Tonnage:
	☐ Metre	s 🗆 Feet		☐ Metres ☐	☐ Feet	
Value of Yacht: In NZD\$						
\$						
12. COLOURS						
Mast:				Deckhouse/Sup	erstructure (1	Fops):
Hull (Above waterline):				Deckhouse/Superstructure (Side):		
Hull (Below waterline):				Decks:		
Dodgers/Sail covers:				Sails:		
13. ENGINE						
Make				Model		
Power (HP/Kw):				Passage speed under motor:		
14. ELECTRONICS						
SSB Radio	Make:			Model:		Call sign:
VHF Radio	Make:			Model:		Call sign:
HAM Radio	Make:			Model:		Call sign:
Cell Phone	Make: N		Model: Call s		Call sign:	
15. RADIO SCHEDU	LES MA	INTAINED				
Frequencies:		Times:			Shore sta	tion:

# 

17. CREW DETAILS (Person in charge first)						
A total of crew and Passengers are traveling on this yacht.						
Record all information in BLOCK LETTERS eg. Surname: BLACK  Crew 1 ( MASTER) Crew 2						
Surname:	First / Given name (s):	Surname:	First / Given name (s):			
Surfame.	Thist, diventiante (s).	Surfame.	That, ever mane (s).			
Date of birth:	Occupation:	Date of birth:	Occupation:			
Passport Number:	Nationality:	Passport Number:	Nationality:			
Passport Expiry date:	Gender:	Passport Expiry date:	Gender:			
	☐ Male ☐ Female		☐ Male ☐ Female			
Covid-19 Vaccination Status:	If vaccinated please specify	Covid-19 Vaccination Status:	If vaccinated please state			
☐Vaccinated ☐ Unvaccinated	vaccination type:	☐ Vaccinated ☐ Unvaccinated	vaccination type:			
Primary overseas details	Emergency Contact	Primary overseas address	Emergency Contact			
Street address and City:	Full Name:	Street address and City:	Full Name:			
Country:	Contact Number:	Country:	Contact Number:			
Contact Number:	Relationship:	Contact Number:	Relationship:			
Email:	Email:	Email:	Email:			
Crew 3		Crew 4				
Surname:	First / Given name (s):	Surname:	First / Given name (s):			
Date of birth:	Occupation:	Date of birth:	Occupation:			
Passport Number:	Nationality:	Passport Number:	Nationality:			
Passport Expiry date:	Gender:  Male Female		Gender:  Male Female			
Covid-19 Vaccination Status:	If vaccinated please specify	Covid-19 Vaccination Status:	If vaccinated please state			
☐ Vaccinated ☐ Unvaccinated	vaccination type:	☐Vaccinated ☐Unvaccinated	vaccination type:			
Primary overseas details	Emergency Contact	Primary overseas details	Emergency Contact			
Street address and City:	Full Name:	Street address and City:	Full Name:			
Country:	Contact Number:	Country:	Contact Number:			
Contact Number:	Relationship:	Contact Number:	Relationship:			
Email:	Email:	Email:	Email:			

Please ensure you complete all fields correctly

continue crew list					
Record all information in BLOCK LETTERS					
Crew 5		Crew 6			
Surname:	First / Given name (s):	Surname:	First / Given name (s):		
Date of birth:	Occupation	Date of birth:	Occupation		
Passport Number:	Nationality:	Passport Number:	Nationality:		
Passport Expiry date:	Gender:  ☐ Male ☐ Female	Passport Expiry date:	Gender:  ☐ Male ☐ Female		
Covid-19 Vaccination Status:  Unvaccinated Unvaccinated	If vaccinated please specify vaccination type:	Covid-19 Vaccination Status:  Unvaccinated Unvaccinated	If vaccinated please state vaccination type:		
Primary overseas details	Emergency Contact	Primary overseas address	Emergency Contact		
Street address and City:	Full Name:	Street address and City:	Full Name:		
Country:	Contact Number:	Country:	Contact Number:		
Contact Number:	Relationship:	Contact Number:	Relationship:		
Email:	Email:	Email:	Email:		
Crew 7		Crew 8 – Refer to page 14 fo	or additional crew.		
Surname:	First / Given name (s):	Surname:	First / Given name (s):		
Date of birth:	Occupation	Date of birth:	Occupation		
Passport Number:	Nationality:	Passport Number:	Nationality:		
Passport Expiry date:	Gender: ☐ Male ☐ Female	Passport Expiry date:	Gender:  Male Female		
Covid-19 Vaccination Status:	If vaccinated please specify vaccination type:	Covid-19 Vaccination Status:	If vaccinated please state vaccination type:		
☐ Vaccinated ☐ Unvaccinated		☐ Vaccinated ☐ Unvaccinated			
Primary overseas details	Emergency Contact	Primary overseas details	Emergency Contact		
Street address and City:	Full Name:	Street address and City:	Full Name:		
Country:	Contact Number:	Country:	Contact Number:		
Contact Number:	Relationship:	Contact Number:	Relationship:		
Email:	Email:	Email:	Email:		

Please ensure you complete all fields correctly

	18. QUARANTINE PRE ARRIVAL ADVICE		
	HEALTH QUESTIONS	YES	NO
1	Is there on board or has there been during the voyage any case of illness or shown symptoms of illness which you suspect to be an infectious nature? If Yes, please provide details below;		
2	Has there been on board during the voyage any case of fever, coughing, severe vomiting, rash, profuse diarrhea, plague, cholera, yellow fever, small pox? If Yes please provide particulars in the space provided below;		
3	Has any person died on board during the voyage because of an accident? If Yes, List particulars below;		
4	Has plague occurred or been suspected among the rats or mice during the voyage or has there been an unusual rate of mortality among them?		
5	Is there any sick person on board now? If Yes, Give particulars below;		
6	During the last 50 days of your voyage did your vessel visit or call in to Vanuatu, the Solomon Islands, Papua New Guinea or any port or place in Australia north of latitude of Brisbane, or the Panama Canal, the East Indies, Asia or any port or place in which malaria carrying mosquitoes are present? If Yes, please provide name of the port and the date visited below;		

# Note:

- If more than 4 weeks have elapsed since the voyage began, it will suffice to give particulars for the latest 4 weeks.
- Sanitation Certificates or exemptions to be produced on demand.

19. BIOSECURITY DECLARATION: PROHIBITED & RESTRICTED BIOSECUIRTY MATERIALS					
COMMODITY*	LOCATION ON CRAFT	ORIGIN OF GOODS	SAFEGUARD		
COMMODITY*	LOCATION ON CRAFT	ORIGIN OF GOODS	Strictly for Vessel Use Only.  No crew is allowed to take ashore any food unless approval is given by Biosecurity officer*		

## NOTE

All ships garbage must be kept in covered; leak proof containers inside ships railings.

20. BIOSECURITY QUESTIONAIRE	YES	
Are there any animals (including birds and fish, etc.) on board?  If YES give a description of the animal/s:		
Have you carried livestock or grain in the last three months?	]	
If YES, describe below the type of cargos, the loading port/s and discharge port/s, and cleaning performed since the livestock or grain was discharged.	Ш	
Livestock/Grain:		
Cleaning performed:		
Have any stowaway animals, migratory birds, insects, or nests been found on board since your last port of call? If YES give a description of the animal/s:		
Have you, any dunnage (wood used in packaging/bracing of cargo, etc.) on board?		
If YES, do you have treatment certificate?		
No. 10 to 10		
No vessels can discharge Ballast Water in the Cook Islands without written permission from the Director of Biosecurity		
Do you intend to discharge ballast water in Cook Islands territorial waters?		

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#### 21. CONDITIONS OF TEMPORARY ENTRY INTO THE COOK ISLANDS

#### **Cook Islands Customs entry requirements**

Conditions of temporary entry of the craft under section 34 Customs Revenue Border Regulations

Visiting yachts enter and remain temporarily in Cook Islands without payment of Customs charges provided:

- a. The yacht is not registered in the Cook Islands
- b. The yacht is solely for personal use of the owner or the master
- c. The yacht shall remain in the Cook Islands for a period not exceeding 6 months from its arrival.
- d. The owner shall retain his/her immigration status as a bona fide tourist whilst in the Cook Islands; and
- e. The owner is permitted to travel in and out of the Cook Islands to attend to essential services such as buying spares for the yacht, family commitments etc. whilst the yacht remains in the Cook Islands for a maximum period not exceeding 6 months.

#### a) Designated Ports

You must report your yacht inwards to Avatiu Port (Rarotonga) or Arutanga Port (Aitutaki) upon arrival in Cook Islands and must clear outwards at a Customs Port before leaving Cook Islands.

#### b) Liability to duty and/or forfeiture

Your yacht may be liable to duty or taxes at full Tariff Rate and/or forfeiture if:

- a. It is in any way disposed of in the Cook Islands (i.e. sold, abandoned or given as gift);
- b. It is put to commercial use or for other consideration whilst in Cook Islands waters (i.e. taken for commercial charters, hired or leased cruises);
- c. You/The Owner enter(s) and reside(s) in the Cook Islands either upon arrival or subsequently;
- d. The yacht is not exported permanently within 6 months of the date of the yachts arrival into the Cook Islands.
- e. Special approval will be given to owners who need medical attention or who need to purchase spare parts personally from overseas. For these reasons, yacht owners will need to make a request in writing to Customs.
- f. The owner of the yacht becomes holder of a Cook Islands Immigration permit to enter and reside in the Cook Islands either before arrival or subsequently.

#### c) Arms and ammunition to be surrendered:

On arrival, all arms and ammunition must be declared and surrendered to a Customs officer for safekeeping in the Cook Islands. Arrangements to uplift any such arms or ammunition for departure may be arranged directly with a Customs officer and collected before leaving. Please allow sufficient time for this process.

### d) Live animals, reptiles and birds, fresh meat , fruits and vegetables:

- a. No live animals, reptiles or birds of any kind; or
- b. Fresh meat, fruits and vegetables on board the yacht may be landed or taken ashore.
- c. Some restrictions on whether such goods will be permitted to remain on board at a Customs Port may be enforced by Biosecurity Officers.

#### e) Currency:

The owner/master shall declare upon arrival any currency or negotiable bearer instruments with a combined value of NZD \$10,000 or more or its equivalent in foreign currency, in his or her possession or carried on board the yacht.

#### f) Duty Free stores for yachts:

- a. Dutiable goods such as liquor, beer, tobacco and cigarettes or any other bonded or drawback goods maybe shipped duty free as stores for yachts. These have to be appropriate to pending voyage and crew numbers. Permission must be obtained from Customs to purchase duty free stores these must be loaded less than 12 hours before departure.
- b. All adult crew members and adult passengers will be allowed the normal duty free passenger landing allowances upon arrival but any excess stores shall be subject to normal import duty or detention by Customs.
- g) All crew members and passengers require entry permits from an Immigration officer before they disembark into the Cook Islands.
- **h)** A Customs Officer will need to see every person on board, sight their passports and correctly completed passenger arrival cards.
- i) In addition, the Customs Officer may require the production of onward tickets or security bonds from any person aboard.
- j) No less than 48 hours prior to this vessel departing from an authorized point in the Cook Islands, advice of this fact via email must be made to <a href="mailto:Customs.Craft@cookislands.gov.ck">Customs.Craft@cookislands.gov.ck</a> outlining planned departure point and requesting Customs departure clearance.

**Note** that prior to clearance being given, checks will be made with other Border Agencies to confirm departure clearance can be given. If the 48 hours' notice is not met, or if outstanding charges or fees are owing, this may affect the ability to give clearance at the requested time.

k) Please ask the attending Customs Officer(s) if you do not understand the ANA, as failure to comply with any of the conditions may render you liable to penalties under the respective government laws.

This advance notice of arrival report <u>MUST BE COMPLETED</u> in its entirely no less than 48 hours prior to ETA into the Cook Islands. Non- Compliance with this may see clearances delayed, withheld or refused.

# 21) THIS SECTION IS TO BE COMPLETED AND WITNESSED BY COOK ISLANDS CUSTOMS OFFICER AT TIME OF BOARDING

This advance notice of arrival contains information that is legislatively required by the Border Agencies of the Cook Islands.

The Master of the vessel that this document relates to is responsible for ensuring all required information supplied is true and correct.

Insufficient or inaccurate information being provided by the Master may result in this vessel, crew and/or passengers not being cleared for entry in the Cook Islands.

The requirement to complete this document correctly is legislated for under the following enactments, many of which contain instant fines or penalty provisions for non-compliance;

- Customs Revenue and Border Protection Act 2012
- Immigration Act 2021
- Biosecurity Act 2008

- Public Health Act 2004
- Ports Act 1994-95

If circumstances and/or the content of this document have changed between submitting this document and your actual arrival, you must inform the boarding agencies immediately.

L	Master/Owne
	·
of the craft	being the person in
charge declare that:	

- 1) All particulars stated in this Advance Notification/Inward Report are true and correct.
- 2) This yacht will not be hired or otherwise reimbursed for carrying goods or passengers while in the Cook Islands waters without express permission of the Cook Islands Government.
- 3) I have in my possession funds totaling Cook Islands \$ .................................. (Notes: Item#7 of Page 2 Border Currency Report).
- 4) I am financially liable for all crew members who arrived in the Cook Islands on this vessel until they depart from Cook Islands by whatever means. Furthermore, I will notify Cook Islands Immigration of any crew member changes prior to the departure of this vessel.
- 5) While in Cook Islands territorial waters I will ensure that all persons on this craft will comply with all provisions of the above listed Acts and Regulations.
- 6) I acknowledge that normal Customs operating hours are Mon-Fri 0800-1600 hrs and there will be attendance charges for clearance of vessels if they fall outside the normal operating hours.

Signature:	Date:
Declared before: (Officers name)	Date:
Signature:	

continue crew list						
Recor	Record all information in BLOCK LETTERS eg. Surname : BLACK					
Crew 9		Crew 10				
Surname:	First / Given name (s):	Surname:	First / Given name (s):			
Date of birth:	Occupation:	Date of birth:	Occupation:			
Passport Number:	Nationality:	Passport Number:	Nationality:			
Passport Expiry date:	Gender:	Passport Expiry date:	Gender:			
	☐ Male ☐ Female		☐ Male ☐ Female			
Covid-19 Vaccination Status:	If vaccinated please specify	Covid-19 Vaccination Status:	If vaccinated please state			
☐Vaccinated ☐ Unvaccinated	vaccination type:	☐ Vaccinated ☐ Unvaccinated	vaccination type:			
Primary overseas details	Emergency Contact	Primary overseas address	Emergency Contact			
Street address and City:	Full Name:	Street address and City:	Full Name:			
Country:	Contact Number:	Country:	Contact Number:			
Contact Number:	Relationship:	Contact Number:	Relationship:			
Email:	Email:	Email:	Email:			
Crew 11		Crew 12				
Surname:	First / Given name (s):	Surname:	First / Given name (s):			
Date of birth:	Occupation:	Date of birth:	Occupation:			
Passport Number:	Nationality:	Passport Number:	Nationality:			
Passport Expiry date:	Gender:	Passport Expiry date:	Gender:  Male Female			
Covid-19 Vaccination Status:	If vaccinated please specify vaccination type:	Covid-19 Vaccination Status:	If vaccinated please state vaccination type:			
☐ Vaccinated ☐ Unvaccinated	vaccination type.	☐Vaccinated ☐Unvaccinated	vaccination type.			
Primary overseas details	Emergency Contact	Primary overseas details	Emergency Contact			
Street address and City:	Full Name:	Street address and City:	Full Name:			
Country:	Contact Number:	Country:	Contact Number:			
Contact Number:	Relationship:	Contact Number:	Relationship:			
Email:	Email:	Email:	Email:			