**Marine Licence**

**Discharge of Condition Application Form**

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| **Marine Licence Number** |  |
| **Name and address of applicant** |  |
| **What is the licence condition number(s) of the condition(s) you are seeking to discharge** |  |
| **Description of terms of condition(s) you are seeking to discharge** |  |
| **What evidence is provided to discharge this condition** |  |
| **Are there any mitigating factors for not providing supplementary evidence to discharge a condition?** |  |
| **Signature Applicant:****Date:** |  |
| **For Office Use Only** |
| **Date Received** |  |
| **Compliance URN** |  |
| **CM Container Reference** |  |
| **Discharge Fee / Payment** | *Not currently applicable* |
| **Compliance Case Officer** |  |
| **Date Discharged** |  |