



February 23, 2022

FRENCH POLYNESIAN AUTHORITY FOR MARITIME AFFAIRS

DEPARTMENT FOR MARITIME AFFAIRS OF FRENCH POLYNESIA

CONTACT E-MAILS

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DECLARATION OF ENTRY OR EXIT – PLEASURE BOAT

Order n° 525 CM of 13 May 2020 as amended & Order n° HC 7934 CAB of 15 November 2021 as amended

SHIP'S NAME			
FLAG		NUMBER OF PEOPLE ON BOARD	
LENGTH (m)		WIDTH (m)	
PLACE / PORT OF DEPARTURE ¹		DEPARTURE DATE	
ISLAND OF ARRIVAL ²		DATE AND TIME OF ARRIVAL	
MOORING PLACE		EXPECTED DATE OF DEPARTURE	
	E-MAIL	Telephone(s) (French Polynesia)	Telephone(s) (Outside French Polynesia)
CONTACTS			
OTHER REMARKS Specify any			
additional information			

PEOPLE ON BOARD ³					
SURNAME	SURNAME Given Name(s)		Nationality		

¹ Provide clearance

² Papeete, Nuku Hiva or Rikitea

³ Provide a complete crew list if more than 7 people are on board





I, the undersigned, _____, request permission to stop over in French Polynesia. This request is motivated by: a compelling personal or family reason, an emergency health reason or a professional reason that cannot be postponed (provide supportive documents ⁴). \square a situation of necessity, an obligation to repair, supply or refuel the vessel. □ the stopover or stay is not motivated by a compelling reason or a situation of necessity, but the adults on board can prove they are fully vaccinated. ☐ I certify that all persons over 6 years of age on board will undergo a minimum 14-day quarantine ⁵ counted from the 1st day of mooring or anchoring in French Polynesia. ☐ I have submitted a quarantine exemption application and supporting documents on the website https://www.mes-demarches.gov.pf/commencer/arass-venir-en-polynesie-par-voie-maritime. undertake to carry out, at my own expense, any tests or formalities requested by the French Polynesian health authorities. or ☐ The number of persons on board is less than 5 and the adults on board have been fully vaccinated. Proof of vaccination status is attached to this application. ☐ The number of persons on board is less than 5 and the entry or stopover is justified by a compelling reason or a situation of necessity. ☐ I undertake to submit a Medical Health Declaration (MHD) to the Health Watch Office (medecins.bvs@sante.gov.pf) 48 hours before the arrival of the vessel. Done in ______, on ___ Signature ☐ Denied **Authorization:** ☐ Granted

Edouard WEBER,

Head of the Department for Maritime Affairs

For border formalities for entry and exit of pleasure boats, please contact the border police: Tel 40 800 617 / 40 800 605 / 40 800 615

E-mails: dtpn987-stpaf-poste@interieur.gouv.fr // dtpn987-stpaf-usg@interieur.gouv.fr

⁴ See article 23-3 of the Decree n° 2021-699.

⁵ This period may be extended on medical advice.