

PNG HARBOURS MANAGEMENT SERVICES

APPLICATION FOR PERMIT TO CONVEY AND UNLOAD DANGEROUS CARGOES Vessel Owner/Agent	Innlication Foo. K200 00	
Phone:	APPLICATION FOR PERMIT TO CONVEY AND UNLOAD DANGEROUS CARGOES Application Fee: K200.00	
Vessel:Voyage:		
Port: Berth /Anchorage location: Date:		
-		
Description of Dangerous Goods:		
Application Condition		
In dealing with the dangerous goods, the applicant acknowledges and:		
 Agrees to comply with the requirements of the Harbours Act (Chapter 240) 2002 Agrees to comply with the requirements of the Port (Management & Safety) Reg Agrees to comply with the requirements of the IMDG Code, SOLAS 74, MARPOL 7 Agrees to comply with the requirements of any other local and international ap codes, conventions, standards and practices, Agrees to Indemnify the Port Manager against any incident that may result in the person, or damage to the property or the environment that may arise as a result of Agree to any applicable penalties for non-compliance to the terms and conditions of Agrees that the information provided in this document is true and correct 	gulation 2010, (3/78, plicable legislations, injury or death of a using this permit,	
Additionally, the applicant certifies that:		
 a) There are no damage or deteriorated containers or packages containing dangerous dangerous goods described in the attached list, b) The following are applicable particulars relating to damaged or deteriorated concontaining dangerous goods:- (list attached), c) The gas receptacles/portable tanks identified as have been applicated and the conveyance of the dangerous goods carries in them. 	oroved bye of Approval date for	
d) The fixed tank identified as(name or p approved by PNG Ports Corporation Limited (name of competent authority) in a certificate of approval date for the conveyance of the dangerous goods carried in it	osition) has been accordance with the	
Applicant Details:		
I(Owner/Master or Agent) will a specified in this form and other measures set out in the Dangerous Goods Policy:	accept all conditions	
Signature:		
Date:		

Contact Number:____