

**Panama City Port Authority
Berth Application**

The vessel agent for any vessel loading or unloading cargo at the Panama City Port Authority shall file a Berth Application Request Form with Port Dock Operations at least forty-eight (48) hours prior to the arrival of the vessel. The terminal management, prior to arrival of the vessel will supply designation of Berth.

In requesting application for berth the vessel agent or barge owner assumes responsibility for all charges assessable against the vessel or barge and any additional charges resulting from services from the terminals where the vessel or barge is either working or at lay berth.

In making application for berth the vessel agent indicates a desire to use port facilities under the jurisdiction of the Panama City Port Authority and Berth Application Request shall constitute a consent to all the terms and conditions of any and all applicable tariffs of the Panama City Port Authority and evidences and agreement on the part of the vessel agent or barge owner to pay all charges assessable to the vessel.

Hazardous materials accepted only with prior port management approval, and only if in compliance with applicable governmental regulations.

All provisions of PCPA Tariff No. 3 are applicable. (See item 115, page 16 - Application for Berth).

VESSEL: _____ S/S LINE: _____

CALL LETTERS: _____ FLAG: _____

IMO NUMBER: _____ ISPS CERTIFICATE NUMBER: _____

LENGTH: _____ BEAM: _____

LLOYD'S REGISTER TONNAGE: N/T: _____ G/T: _____ (USE HIGHEST IF DUAL)

ETA: _____ ESTIMATED DRAFT: _____ ARRIVAL/ DEPARTURE: _____

VESSEL WILL LOAD/DISCHARGE: COMMODITY: _____ TONS: _____

VESSEL WILL LOAD/DISCHARGE: LOADED: _____ EMPTY: _____ CONTAINERS

STEVEDORE: _____

REMARKS: _____

LAST PORT: _____ NEXT PORT: _____

In accordance with USCG 33 CFR 105.270 (b) (2), advance notification of vessel stores or bunkers delivery is required:

Initial if vessel will receive: Stores _____ Bunkers _____

Initial if vessel will change crew: Yes _____ No _____

I hereby request berthing for the above listed vessel and have provided the required information herein. I further agree, as the agent or authorized representative for the agent requesting berth, to accept responsibility for all charges assessed against the vessel and any additional charges resulting from requests for service from the terminal or terminals at which the vessel is either working or at lay berth.

VESSEL AGENT: _____ BERTH DESIRED: _____ DATE: _____

BERTH GRANTED: _____ DATE: _____

BY: _____ REASSIGNED BERTH: _____ DATE: _____

MARSEC LEVEL AT TIME OF FILING: _____

Return email address: operations@portpanamacityusa.com Return FAX numbers: (850) 767-3460 AND (850) 767-3235

BERTH REQUEST/REASSIGNMENT APPROVAL GRANTED BY: _____

Revised: May 20, 2008