

Berth Request / Reassignment Approval Granted By:

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 - Application for Berth).	
Vessel:	S/S Line:
Call Letters:	Flag:
IMO Number: ISPS Certificate I	Number:
Vessel P&I Club: Contact Information:	
Length: Beam:	
Lloyd's Register Tonnage: N/T:G/T:	_ Use Highest If Dual)
ETA: Arrival Draft:	
ETD: Departure Draft:	
Vessel Will Load / Discharge: Commodity:To	ns:
Vessel will Load / Discharge: Loaded: Empty: Containers	
Stevedore:	
Last Port: Next Port:	
Remarks:	
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 of	crew: Yes No
Fresh Water Hookup: Yes No Hot Work Request: 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.	
Berth Desired:	Date:
Berth Granted:	Date:
Vessel Agent:	Vessel Agent Contact Number:
Reassigned Berth:	Date:
MARSEC Level at Time of Filing:	
Return email address: receptionist@portpanamacityusa.com Return FAX number: (850) 767-3235.	