

**VESSEL BERTHING REQUEST FORM**

ATAKAŞ LİMAN İŞLETMECİLİĞİ VE TİC. A. Ş.

VESSEL DETAILS									
VESSEL NAME	:		JOURNEY NO		VESSEL TYPE		GROSS TONS		
INVOICED PARTY:					IMO NUMBER		NET TONS		
WASTE / WATER SUPPLY SERVICES	:				CALL SIGN		DEADWEIGHT		
DISCHARGE / LOADING SERVICES	:				FLAG		LENGTH	WIDTH	LOAD
VESSEL AGENCY	:				ARRIVAL PORT		ARRIVAL DRAFT		
DELIVERY TYPE	:				DEPARTURE PORT		DEPT. DRAFT		

REQUEST DATE
PROFORMA NO
ETA

LOAD TYPE	DISCHARGE / LOADING	LOAD TYPE	QTY	WEIGHT	PACKING TYPE	LOAD OWNER	EXPLANATION

1- I hereby accept and undertake to adjust the preparations and precautions regarding my request in accordance with the daily capacity of the port,  
2- And to comply with working hours determined by the Administration, and to ensure all job requests are completed in the required order.

OF THE REQUESTING AUTHORITY	
NAME AND SURNAME	:
COMPANY TITLE	:
SEAL	:
SIGNATURE	:

DOCUMENT APPROVAL

This Job Request Form can be updated anytime pursuant to the operational requirements of ATAKAŞ LİMAN Administration.

DOC. NO:

DATE OF ISSUE: 01.01.2018

REV. NO: 00/00