



1. Company Name		2. Name of Representative	
3. Address		4. Telephone Nos.	5. Fax No.
6. SEC/BDT Registration Number (please attach copy of registration)			

7. Officers of the Company/Board of Directors

Name	Address
a.	
b.	
c.	
d.	
e.	

8. Nature of Port Use

a. Shipment of Cargoes Cargo _____

Importation _____

Exportation _____

Transshipment _____

Inbound (domestic) _____

Outbound (domestic) _____

b. Storage Cargo _____

c. Stockpiling Cargo _____

9. Frequency of Shipment _____ Number of shipment in a month _____ Number of shipment in a year

10. Products/Cargoes (please attach certification/permit from relevant agency for product shipment)

a. Item	b. Detailed Description	c. Projected Volume

11. Type of Cargo Packaging

<input type="checkbox"/> bag	<input type="checkbox"/> can	<input type="checkbox"/> barrel	<input type="checkbox"/> demijohn	<input type="checkbox"/> pieces
<input type="checkbox"/> bulk	<input type="checkbox"/> case	<input type="checkbox"/> keg	<input type="checkbox"/> palletized	<input type="checkbox"/> sack
<input type="checkbox"/> basket	<input type="checkbox"/> container	<input type="checkbox"/> carton	<input type="checkbox"/> jumbo bag	<input type="checkbox"/> runk
<input type="checkbox"/> bundle	<input type="checkbox"/> cask	<input type="checkbox"/> coil	<input type="checkbox"/> roll	<input type="checkbox"/> unitized
<input type="checkbox"/> crate	<input type="checkbox"/> van pack	others, please specify _____		

12. If nature of use is shipment of cargoes, please provide details of the vessels to be used:

a. Vessels	b. Registry of Vessel	c. DWT	d. GRT	e. LOA	f. Draft	g. Type <input type="checkbox"/> Sustaining <input type="checkbox"/> Containerized <input type="checkbox"/> Non-sustaining <input type="checkbox"/> Non-Containerized

This is to certify that the above information presented are true.

Name and Signature of Authorized Representative

Date



STATEMENT OF CONFIRMATION OF INTENT

This is to certify that_____

- (1) have not been charged of any criminal activity;
- (2) will abide by all laws and regulations applicable to port users within the Cagayan Freeport; and
- (3) will operate in compliance with the rules and regulations issued by the Cagayan Economic Zone Authority (CEZA) governing the activities of port users within the Cagayan Special Economic Zone and Freeport.

By: _____

Name and Signature of Authorized Representative

Position

Date

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20__ at _____, Philippines.

NOTARY PUBLIC

Doc. No. _____
Page No. _____
Book No. _____
Series of _____