



APPLICATION FORM FOR BUNKERING
(for the purposes of Section 105A of the Customs Act)

Part 1: Particulars of Applicant/Vessel Cargo Loading

Applicant:		Name of Vessel:	
BRN:		IMO Number:	
Name of Agent:		Report No & Date:	
		Place of Berth:	
		Next Port of Call	
		Bunker Tank capacity:	Metric Tonnes: Litres at 20°C

Part 2: Particulars of Cargo Loading

Type of Bunker Fuel	Remaining volume at time of boarding		Requested Volume	
	Metric Tonnes	Litres at 20°C	Metric Tonnes	Litres at 20°C
Name of Supplier:		Expected Date & Time of Delivery:		

Part 3: Declaration by master or agent of bunker receiving vessel

1. Pursuant to Section 105A of the Customs Act, I the undersigned undertake not to unload any such bunker fuel in the Mauritius waters or in any manner without the prior written authorization of the Director-General.
2. I, the undersigned undertake to submit a scanned copy of the hereunder mentioned duly filled original documents immediately upon receipt of the bunker fuel made by the present request:
 - i. Acknowledgement receipt of the bunker loading onboard the requesting vessel; and
 - ii. Departure clearance certificate of the outgoing vessel obtained from the Director of Shipping or the Ministry of Fisheries as applicable.
3. I, hereby declare that the particulars given in this application are true and correct.

Name of the Master or Agent:-	Date
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Part 4: Official Use

Eligibility of Vessel: YES NO

Application Approved: YES NO

Remarks:

Application processed By:

Name of Officer:..... Grade:.....

Signature: Employee No:

Date:...../...../20.....

CARGO LOADING AS PER BUNKERING REQUESTS

ON BEHALF OF THE MASTER, WE HEREBY REQUEST PERMISSION TO CARRY OUT A BUNKERING OPERATION IN THE PORT^(a) ON BOARD THE FOLLOWING VESSEL

1. Name of Ship:	2. Type of Ship/Flag:	3. IMO No./O.N:
4. Position at Anchor/Berth No:	5. Delivering Company:	6. Mauritius Revenue Authority
	Trade Licence Expiry Date:	Authorised person:
	Authorised person:	
	Date/Time:	ID No:
7. Delivery by:	8. AGENT Date & Time of Operation:	9. SUPPLIER Date & Time of Operation:

10. Type and quantity of bunkers:

Bunker Type	Qty Tonnes	Qty Litres at 20°C

11. Police^(b) has been notified
12. No other ship will lie between the receiving ship and the delivering barge, bowser or pipeline without permission from the Port master
13. A bunkering safety checklist will be signed by the receiving ship and the supplier before bunkering commences.
14. No dangerous cargo handling, hot work, gas freeing or tank cleaning operations will be carried out simultaneously without notifying the berth operator and a special permission obtained from Port master.
15. From the sunrise to sunset code flag "B" will be exhibited by the receiving ship where it can be best seen.
16. From the sunset to sunrise an all-round fixed red light will be exhibited by the receiving ship where it can be best seen.

17. Company making request	Tel No:	Person making request:
Date/Time:	Fax No:	Personal Contact no:

MAURITIUS PORTS AUTHORITY PERMISSION

18. MARINE DEPARTMENT Date/Time: Ref No: PM:	19. PORT OPERATIONS DEPARTMENT Date/Time: Ref No: DPO:	20. PORT EMERGENCY SERVICES Date/Time: Ref No: MPES: Fire Coverage:
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Notes: (a) If Bunkering takes place outside port limits, approval of NCG should be obtained.
(b) For motor gasoline transfer only, approval of police should be obtained and presence requested.



APPLICATION FORM FOR BUNKERING

PART 1: TO BE COMPLETED BY OIL COMPANY UPON DELIVERY OF BUNKER

PRODUCT	LITRES AT *AMB	TEMPERATURE	DENSITY AT 20°C	**VCF	LITRES AT 20°C	METRIC TON	METER BEFORE	METER AFTER

NAME OF OIL COMPANY'S REPRESENTATIVE: _____

SIGNATURE: _____ SEAL: _____ DATE: _____

PART 2: TO BE COMPLETED BY VESSEL'S MASTER/AGENT

Received above quantity in good order and condition.

I undertake that such bunker delivered on my vessel shall not be unloaded without the prior authorization of the Director-General.

NAME OF MASTER/AGENT OF VESSEL: _____

SIGNATURE: _____ SEAL: _____ DATE: _____

*AMB = Ambient Temperature
**VCF = Volume Correction Factor