

Client Name: _____

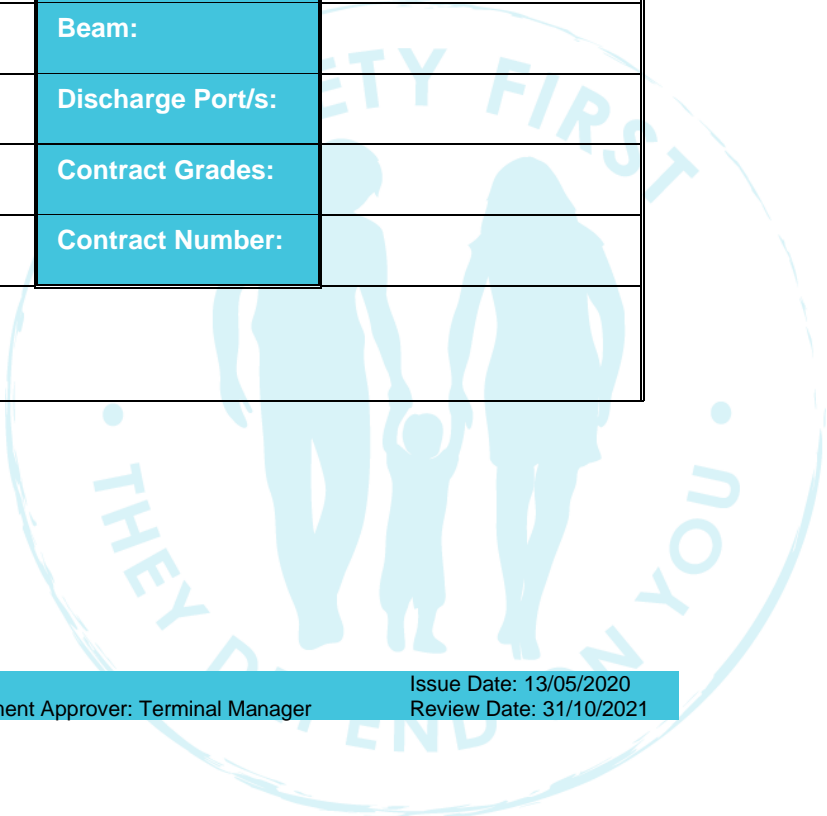
Client Reference/Code: _____

Shipping Month: _____

Confirmed Shipping Window: _____ to _____

Vessel Details:

Vessel Name:			
Owner:		Hatch Dimensions:	
ETA:			
Gross Tonnage:		Year Built:	
Net Tonnage:		Hold Dimensions:	
Vessel Type:			
Flag:		Laycan:	
Draft:		DWT:	
Load Port/s:		LOA:	
Total Tonnage:		Beam:	
Tolerance:		Discharge Port/s:	
Stowage Factor:		Contract Grades:	
DoA Requirements:		Contract Number:	
Vessel cranes are certified and fit for use			



All Crane identification marks on blocks, hooks and shackles are visible and correspond to the ships gear register	
Vessel has grabs which are certified and available for trimming	
Vessel has been advised that it may be required to move along the mooring lines	

Authorised Client Representative: _____

Signature: _____

Date: _____

Quattro Ports PKGT Acceptance: Accepted Declined

Confirmed Shipping Window: _____ to _____

Authorised Quattro Ports PKGT Representative: _____

Signature: _____

Date: _____

