



## BERTH APPLICATION

**PORT FREEPORT FACILITIES**  
**575 PETE SCHAFF BLVD / P.O. BOX 615**  
**FREEPORT, TEXAS 77541**

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|  |     |    |        |   |                 |
|--|-----|----|--------|---|-----------------|
| AGENT: NAME, ADDRESS   |     |    |        | <b>NOTE: THIS APPLICATION MUST BE SUBMITTED TO THE PORT'S DIRECTOR OF OPERATIONS AT LEAST 72 HOURS PRIOR TO VESSEL ARRIVAL.</b> |                 |
| VESSEL   |     |    |        | ETA   | ETD             |
| TYPE OF CARGO – LOAD   |     |    |        | REGISTRY  | GROSS TONNAGE   |
| TYPE OF CARGO - DISCHARGE  |     |    |        | SHIPS NUMBER IN LLOYD'S REGISTER  |                 |
| HAZARDOUS CARGO ABOARD VESSEL  |     |    |        | LENGTH OVERALL  | BEAM (FEET)     |
| STEVEDORE CO.: NAME, ADDRESS   |     |    |        | DRAFT-IN  | DRAFT-OUT       |
|  |     |    |        | AIR DRAFT – IN  | AIR DRAFT - OUT |
| SERVICE REQUIRED FOR VESSEL  | YES | NO | AMOUNT | <b>NOTE: NO WELDING IS PERMITTED WITHOUT PRIOR APPROVAL FROM THE PORT'S DIRECTOR OF OPERATIONS.</b>                             |                 |
| WATER  |     |    |        |   |                 |
| BUNKERS  |     |    |        |   |                 |
| INSPECTION   |     |    |        |   |                 |
| HOT WORK PERMIT  |     |    |        |   |                 |
| DISCHARGE OF WASTE OR OILY RESIDUE   |     |    |        |   |                 |
| 1. PROTECTION AND INDEMNITY ASSOCIATION (P & I CLUB) WHICH AFFORDS THE VESSEL INDEMNITY COVERAGE:  |     |    |        |   |                 |
| 2. NAME, ADDRESS, AND TELEPHONE NUMBER OF LOCAL LEGAL REPRESENTATIVE THEREOF KNOWLEDGEABLE OF SUCH COVERAGE:   |     |    |        |   |                 |
| 3. <b>THE AGENT REQUESTING THE BERTH AND SERVICE WILL BE RESPONSIBLE FOR ALL SHIP AND CARGO CHARGES. ANY CHANGE MUST BE NOTED HERE WITH COMPANY NAME AND ADDRESS.</b>  |     |    |        |   |                 |
| 4. <b>ACCEPTANCE</b> - THIS IS TO CERTIFY THAT THE APPLICANT ACCEPTS AND WILL COMPLY WITH ANY AND ALL PROVISIONS OF THE PORT TARIFF 005 OF PORT FREEPORT, AS PROMULGATED AS OF THE DATE OF EXECUTION OF THIS AGREEMENT OR AS MAY BE AMENDED FROM TIME TO TIME. PORT TARIFF 005 IS MADE AVAILABLE TO THE PUBLIC AND IS ACCESSIBLE ON PORT FREEPORT HOMEPAGE, AT <a href="http://WWW.PORTFREEPORT.COM">WWW.PORTFREEPORT.COM</a> , PURSUANT TO THE SHIPPING ACT OF 1984, AS AMENDED, AND 46 C.F.R. SECTION 525.2, AND BY HARD COPY UPON REQUEST TO THE PORT FREEPORT. PORT TARIFF 005 IS INCORPORATED HEREIN BY REFERENCE AS SET FORTH IN ITS ENTIRETY. THE APPLICANT ACKNOWLEDGES BY SIGNING BELOW THAT IT WILL BE CONTRACTUALLY BOUND TO ALL PROVISIONS OF PORT TARIFF 005, AND <b>WAIVES ANY CONFLICTING LAWS TO THIS EFFECT</b> . THE APPLICANT ALSO AGREES WHILE WITHIN THE PORT AREA TO REMAIN IN COMPLIANCE WITH ALL APPLICABLE FEDERAL, STATE AND LOCAL LAWS AND REGULATIONS AND INTERNATIONAL TREATIES AND CONVENTIONS RELATED TO, WITHOUT LIMITATION, SAFETY, SECURITY AND ENVIRONMENTAL PROTECTION OF NAVIGABLE WATERS.    |     |    |        |   |                 |
| 5. <b>SECURITY MEASURES</b> - PORT FREEPORT (THE "PORT") MAY, FROM TIME TO TIME, IMPLEMENT AND ENFORCE SUCH SECURITY MEASURES, POLICIES AND REGULATIONS, AND FURNISH AND MAINTAIN SUCH SERVICES AND DEVICES, FOR THE PROTECTION OF PERSONS AND PROPERTY ON ABOUT THE CHANNELS, WATERWAYS, DOCKS, SLIPS AND OTHER FACILITIES AND IMPROVEMENTS OWNED, OPERATED OR CONTROLLED BY LANDLORD AS LANDLORD DEEMS REASONABLY NECESSARY, INCLUDING SPECIFICALLY, AND WITHOUT LIMITATION, THOSE REQUIRED BY 33 C.F.R. SECTION 105, AS AMENDED, AND OTHER APPLICABLE FEDERAL, STATE AND LOCAL LAWS AND REGULATIONS REGARDING MARITIME SECURITY. THE PORT MAY INSTITUTE TARIFFS TO COVER THE COST OF SUCH SECURITY SERVICES AND DEVICES, WHICH WOULD BE PAID BY THE APPLICANT, WHO ACKNOWLEDGES THAT THE APPLICANT, BY SIGNING BELOW MAY BE LIABLE FOR SUCH CHARGES, AND AGREES TO PAY SUCH CHARGES. APPLICANT FURTHER AGREES THAT IT WILL CAUSE AS AGENTS, EMPLOYEES, CONTRACTORS, AND INVITEES TO COMPLY WITH ANY AND ALL SECURITY MEASURES, POLICIES, PROCEDURES, AND REGULATIONS IN EFFECT OR AS LEVIED FROM TIME TO TIME BY PORT FREEPORT. |     |    |        |   |                 |

|                   |               |                          |  |
|-------------------|---------------|--------------------------|--|
| DATE              |               | REQUESTED BY (FIRM NAME) |  |
| SIGNATURE         |               | AGENT'S NAME             |  |
| Business Phone #: | Cell Phone #: | Email Address:           |  |