

VESSEL ARRIVAL INFORMATION FORM

ARRIVAL NOTICE

Vessel Details

Vessel Name*	<input type="text"/>	Call Sign*	<input type="text"/>	IMO No.*	<input type="text"/>
Registration No.*	<input type="text"/>	Port of Registry*	<input type="text"/>	Keel Laid (build year)*	<input type="text"/>
Name of the Master	<input type="text"/>	Vessel Flag*	<input type="text"/>	Max. Draft (Meters)	<input type="text"/>
GT*	<input type="text"/>	NT*	<input type="text"/>	LOA (Meters)*	<input type="text"/>
Agent Name*	<input type="text"/>	Owner of the Vessel*	<input type="text"/>	Arrival Draft (Meters)	<input type="text"/>
Purpose of Visit*	<input type="text"/>	Preferred Berth	<input type="text"/>	Total Passengers	<input type="text"/>
Voyage No.*	<input type="text"/>	Total Crew	<input type="text"/>	Bow Thruster	<input type="text"/>
Vessel Type*	<input type="text"/>	Agent Contact No. Mobile*	<input type="text"/>	Agent Contact No. Tele/Fax*	<input type="text"/>

Date / Time

Expected Arrival Date*	<input type="text"/>	Time*	<input type="text"/>	Last Port	<input type="text"/>	Next Port	<input type="text"/>
Expected Departure Date	<input type="text"/>	Time	<input type="text"/>	Port of Arrival	<input type="text"/>	Port of Departure	<input type="text"/>

Port Details

Cargo Details

Total Cargo Tonnage	<input type="text"/>	<i>Dangerous Cargo</i>	Description	<input type="text"/>	<i>Dangerous Cargo</i>	Tonnage	<input type="text"/>
---------------------	----------------------	------------------------	-------------	----------------------	------------------------	---------	----------------------

Discharge Details

Port of Discharge	<input type="text"/>
No. of Containers	<input type="text"/>

Loading Details

Cargo Weight Ton	<input type="text"/>	Cargo to be loaded	<input type="text"/>	Cargo Weight Tonnage	<input type="text"/>
TEU	<input type="text"/>	No. of Containers	<input type="text"/>	TEU	<input type="text"/>