



FIJI PORTS CORPORATION LIMITED

APPLICATION FOR PORT USER LICENSE FORM

NATURE OF THIS APPLICATION *(Please tick appropriate options)*

 New PUL

 Renewal of PUL

GENERAL INFORMATION

Company Name

Registered Office Address

Postal Address (If different)

Name of Applicant

Applicants Designation

CONTACT DETAILS

Phone Number: Mobile: Fax:

Email Address:

FOR NEW PORT USER LICENSE

Company Registration Number

Company TIN

FOR RENEWAL OF PORT USER LICENSE

Current PUL Number

OTHER INFORMATION

Business License Number

Suva

Lautoka

Levuka

Company's Nature of Business

Company Insurance Cover
(Public Liability Insurance Cover)

PORT ACCESS

Port(s) to operate within **(Please tick appropriate options)**

 Suva

 Lautoka

 Levuka

 Malau

 Muaiwalu 1

 Muaiwalu 2

Signature:

Date:

Company Stamp/Seal

FOR OFFICIAL USE ONLY

****Fee Paid** Yes No

Date Received:

Vetted By:

Date:

 APPROVED

 NOT APPROVED

Comments:

Signature:

Date:

License Number:

• Attached certified copies of certificates/letter

**** Application fees of \$100.00**