

Application No. *Office use only*

01. Company Name and Address

02. Contact Details

03. Reason to Enter the Port *(Justify the purpose of entry; insufficient details may result in the rejection of application)*

04. Category (tick (✓) applicable category)

| | | | |
|------------------------------|--------------------------|--|--------------------------|
| Wharf Clerk & Clearing Agent | <input type="checkbox"/> | Tenant at HMC | <input type="checkbox"/> |
| Shipping Agent | <input type="checkbox"/> | Supply Distribution to Port facilities | <input type="checkbox"/> |
| Ship Chandler | <input type="checkbox"/> | Business Entities within the Port | <input type="checkbox"/> |
| Ship Repair Company | <input type="checkbox"/> | Government Officers | <input type="checkbox"/> |
| Marine Surveyor | <input type="checkbox"/> | Outsourced Company Staff | <input type="checkbox"/> |
| Visitor | <input type="checkbox"/> | Media Personnel | <input type="checkbox"/> |
| Contractor/Labourer | <input type="checkbox"/> | Other | <input type="checkbox"/> |
| Divers | <input type="checkbox"/> | | <input type="checkbox"/> |

05. Type of Pass (tick (✓) please)

| | | | |
|-----------------------------------|--------------------------|---------|--------------------------|
| Daily/Weekly | <input type="checkbox"/> | New | <input type="checkbox"/> |
| Monthly | <input type="checkbox"/> | Renewal | <input type="checkbox"/> |
| Annual (to be applied separately) | <input type="checkbox"/> | | <input type="checkbox"/> |

06. Nature of Pass (tick (✓) please)

Onboard Afloat Ashore

07. Current Year HIP License's Field and Number
(As Applicable)

08. Please Submit Personnel and Vehicle Details as per the Attached Format.

10. Applicant's Signature & Rubber Stamp

10. Date

Note: Applicant or Declarant do hereby abide to indemnify Hambantota International Port (HIP) for any consequences, losses, or damages arising out of producing false information and/or forge evidence herein.

Instructions for Applicant's

- Application form should be filled in English block letters.
- Purpose of using the port entry to be clearly indicated
- NIC/PP number should be clearly indicated.
- Pass required period should be clearly indicated
- Separate applications should be forwarded for a varying reasons.
- Company address; should be the registered address.

- All particulars of the application form should be filled without leaving blanks, if not applicable such fields should be filled as 'N/A'.
- Annual passes are to be applied separately.
- When applying for port entry pass renewal, the previous pass issue date needs to be indicated correctly, otherwise, the application may be rejected.
- The applicant's signature and rubber stamp are mandatory in the application (recommend scanning and submitting the duly filled application).
- The pass officer will not be responsible for any wrong information furnished by the applicant.
- For any clarification/inquiry, the pass office can be contacted **(0472277792, 0764078093)**.
- The application shall accompany a 'pass request letter' and 'compulsory documents'.
- 'Pass request letter format' and 'list of compulsory documents' and other necessities defined as per the category of port user are available at <http://www.hipp.lk/our-services/security>.
- Any loss of port entry pass should be immediately notified to HIPS
- Pass request applications and other documents should be submitted to the pass office well in advance (minimum of two days prior).
- Online payments shall be made to following Bank account:
 - Name of account holder: Hambantota International Port Services Company (Pvt) Ltd
 - People's bank account no: 007-2-001-5-0022452
 - Branch: Hambantota
 - Bank code: 7135

For Office Use Only

| Zones | Gates | Onboard | Afloat | Ashore | On Payment | Free Pass |
|--|--|--|---|---|---|---|
| <input style="width: 100px; height: 20px;" type="text"/> | <input style="width: 100px; height: 20px;" type="text"/> | <input style="width: 50px; height: 20px;" type="text"/> | <input style="width: 50px; height: 20px;" type="text"/> | <input style="width: 50px; height: 20px;" type="text"/> | <input style="width: 50px; height: 20px;" type="text"/> | <input style="width: 50px; height: 20px;" type="text"/> |
| All Required Documents Attached | | <input style="width: 50px; height: 20px;" type="text"/> | | | | |
| Application Checked/Recommended by | | <input style="width: 500px; height: 20px;" type="text"/> | | | | |

Approved/Not Approved

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Head of Security

Personal Details Format

| Name with Initials | NIC or PP No. | Designation | Police Report Date or Visa Exp. Date (As Applicable) | GS Report & Safety Induction Yes/No (As Applicable) | Previous Permit Issue Date (Compulsory for renewal) | Permission required for (Gate/Zones) & permit required period (2 nd Line) | |
|--------------------|---------------|-------------|--|---|---|--|--------------|
| 01 | | | | | | | |
| 02 | | | | | | | From: To: |
| 03 | | | | | | | From: To: |
| 04 | | | | | | | From: To: |
| 05 | | | | | | | From: To: |
| 06 | | | | | | | From: To: |
| 07 | | | | | | | From: To: |
| 08 | | | | | | | From: To: |
| 09 | | | | | | | From: To: |
| 10 | | | | | | | From: To: |

Vehicle Details Format

| Vehicle No. | | Vehicle Owner (as Per the Rev. License) | Revenue License Number & Expiry Date | Insurance Number & Expiry Date | Driver Details Name & NIC | Previous Permit Issue Date (Compulsory for Renewal) | Permission required for (Gates/Zones) & permit required period (2 nd Line) |
|-------------|--------|--|---|-----------------------------------|------------------------------|--|---|
| 01 | | | | | | | |
| | Type - | | | | | | |
| 02 | | | | | | | |
| | Type - | | | | | | |
| 03 | | | | | | | |
| | Type - | | | | | | |
| 04 | | | | | | | |
| | Type - | | | | | | |
| 05 | | | | | | | |
| | Type - | | | | | | |
| 06 | | | | | | | |
| | Type - | | | | | | |
| 07 | | | | | | | |
| | Type - | | | | | | |
| 08 | | | | | | | |
| | Type - | | | | | | |
| 09 | | | | | | | |
| | Type - | | | | | | |
| 10 | | | | | | | |
| | Type - | | | | | | |