

IRP.NO.		
Approved	Yes	No
Signature of the Officer		

Shedule II - Form D (Application for individual Reception Permit)

IRP.NO.	
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To : Chairman, Marine Environment Protection Authority

From:
(Name and Address of service provider)

Application for Removal of Ship generated waste

1. Name of Registered Service Provider:

1. Ship Particulars

1. Name of the vessel: :
2. Type of vessel:.....
3. Flag:.....
4. IMO No:.....
5. Gross Tonnage:.....
6. Owner Operator:.....
7. Distinctive number of letters:.....
8. Arrival date:..... Departure date:.....
9. Last Port:..... Next Port:.....
10. Local Agent of Vessel:.....

2. Reception facility and Port Particulars

1. Location/Terminal name:.....
2. Reception facility provider:.....

3. Types and Amount of Waste

Oil(Annex 1)	Quantity m ³	Garage(Annex 5)	Quantity m ³
Oily bilge water		Plastic	
Oily residue		Floating dunnage, Linning or Packaging material	
Oily tank washing		Ground paper products, rags, glass	
Dirty ballast water		Metal bottle	
Scale and sludge from tank cleaning		Cargo residue	
Other(specify)		Paper products, rags	
Sewage(Annex 4)	Quantity m ³	Glass, metal, bottles, crockery	
		Food Waste	
		Incinerator Ash	

4. Mode of Removal (Drums/Road Tanker/ Barge/ Other):.....

5. Registration No: (Drums/Road Tanker/ Barge/ Other):.....

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Signature

.....
Date

.....
Operators Stamp