



## SEIXAL BAY NAUTICAL CENTRE PETITION APPLICATION FOR UTILIZATION OF EQUIPMENTS MARITIME TOURIST AGENTS/ANIMATION TOURISM PRIVATE AGENCIES/PRE-ORGANIZED GROUPS

New Authorization <input type="checkbox"/>	Renewal <input type="checkbox"/>	Registration BD n°
SGD registration n° (a)	Date	/ /

### Applicants' Data:

<input type="checkbox"/>	Maritime tourist agents	Name	_____
<input type="checkbox"/>	Animation tourism private agencies	Name	_____
<input type="checkbox"/>	Pre-Organized Groups	Name	_____

### Other Data (b):

Address	_____	
County	_____ Area Code	_____
Country	_____	
Tax Identification Number	_____	
Identity Card or Commercial Registry, in case of the collective persons	_____	
Telephone	_____ Mobile Phone	_____
E-mail	_____	

### Contact Name:

Name	_____
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### Vessels' data Linked to the Applicant:

Name	_____			
Other data (b)	_____			
Registration n°	_____ Validity Survey	_____ / _____ / _____ Insurance Validity	_____ / _____ / _____	
Flag	_____			
Length	_____ Breath	_____ Dept of hold	_____ Draft	_____

### Require

<input type="checkbox"/>	Docking place in the municipal dock/pier, day	_____ / _____ / _____
	From _____h _____m to _____h _____m	
<input type="checkbox"/>	Anchoring place at the municipal anchor, day	_____ / _____ / _____
	From _____h _____m to _____h _____m	

- a) If Renewal, initial registration  
b) If renewal, fill only in case of outdated or missing data

Other Vessels					
Vessels' Name	Registration nº	Length	Flag	Validity Survey	Insurance Validity

Passengers Nationality:	N.º Passengers:	Invoice and Receipt Send By:
Portugal		<input type="checkbox"/> E-mail
Spain		<input type="checkbox"/> Mail to the indicated address
France		<input type="checkbox"/> Get up at sailors support service
Netherlands and Belgium		<input type="checkbox"/> I do not intend receive invoice and receipt
United Kingdom and Ireland		
Germany		
Europe Nordic Countries		
Australia and New Zealand		
Brasil and PALOPS		
Other Countries		

**I Declare**

- The information that I gave are all true;
- I was acquainted of municipal regulation for equipment, infrastructure and services utilization of Seixal Bay Nautical Center, as well as the current prices and Rating, which terms and conditions I accept;
- I have been informed that this petition along with its payment confirmation, are proof of equipment authorization and I will have them with me all the time.

\_\_\_\_\_

(Signature)

Seixal,

Reserved to Seixal Town Hall		
Receipt nº	_____	Data / /
Invoice nº (Tax)	_____	Data / /
Receipt nº (Tax)	_____	Data / /

**Received by:**

Seixal, \_\_\_\_\_

\_\_\_\_\_

(Signature)

Name: