

**Application for Registration as Shipping Agent**

**ADANI PORTS AND SPECIAL ECONOMIC ZONE LIMITED**  
**(APSEZL), MUNDRA**

**To**

**The Chief Executive Officer  
Adani Ports and Special Economic  
Zone Limited (APSEZL),  
Mundra – Kutch - Gujarat (India)**

1. Name of the Applicant (Company/Firm/Individual) : \_\_\_\_\_
2. Address / Registered Office: \_\_\_\_\_
3. Phone / Fax No.: - \_\_\_\_\_
4. E-mail ID: - \_\_\_\_\_
5. Details of Authorized Representative of the Applicant (to sign documents and act on behalf of the Applicant/Shipping Agent):
  - I. Name : \_\_\_\_\_
  - II. Address for communication: \_\_\_\_\_
  - III. Designation : \_\_\_\_\_
  - IV. Direct Telephone No. : \_\_\_\_\_
  - V. Mobile No. : \_\_\_\_\_
  - VI. E-mail Id : \_\_\_\_\_
6. Has the applicant/partners has ever been black listed/de-listed in the past by Mundra or any other Port / Govt. department / Public Sector undertakings? If yes, details thereof: \_\_\_\_\_

## **DECLARATION**

- I. I/We, hereby declare that the all the information furnished above is true to the best of my/our knowledge and belief.
- II. I/We undertake that on being registered as Shipping Agent by APSEZL, I/we shall obtain requisite authorization from vessel owners/operators for acting agent on their behalf.
- III. I/We undertake to furnish a Bank guarantee of Rs. \_\_\_\_\_ on being registered as Shipping Agent by you. I/We further understand that depending on the number of vessels represented by us as Shipping Agent, the amount of Bank Guarantee would be subject to upward revision at the sole discretion of APSEZL and that we would get the bank Guarantee renewed on year to year basis till the validity of registration and provide confirmation to APSEZL at least 21 days in advance before the date of expiry thereof.
- IV. I/We further agree to immediately inform APSEZL of any change in my/our legal status, address, contact nos. and authorized representatives.
- V. I/We understand I/We would be allowed to act as Shipping Agent only during the validity of the Registration certificate granted to us by you
- VI. I/We have attached the following documents:
  - (i) Photocopy of PAN / TAN Card of the applicant:
  - (ii) Certificate of Incorporation/Registration
  - (iii) Memorandum & Articles of Association (in case of a Company) or Partnership Deed (In case of a Partnership Firm)
  - (iv) Power of Attorney authorizing persons to act on our behalf
  - (v) Copies of documents in support of experience as shipping agents
  - (vi) GST Registration Number
- vii) I/ We hereby agree that on being registered as Shipping-Agent by you, We shall be responsible for payment of Port and other dues, payable Ships-owners/operators represented by us, to you."

Place :- \_\_\_\_\_

Date : - \_\_\_\_\_

\_\_\_\_\_  
Sign

(For Office use only)

Recommendations of the Marine Head, APSEZL: -

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(Recommended / Not recommended for registration)

Recommendations / Orders of the C.O.O/ C.E.O., APSEZL: -

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For Administrative Office (Marine Section):

Registration No. : - .....

Date of Registration : - .....

Validity Period : - .....

## **Power of Attorney**

**KNOW ALL MEN BY THESE PRESENTS THAT** We \_\_\_\_\_  
\_\_\_\_\_, a Company incorporated under the Companies Act, 1956  
and having our registered office at \_\_\_\_\_  
(Hereinafter referred to as “the Company”) send greetings.

### **WHEREAS**

- a. We have applied to M/s Adani Ports and Special economic Zone Ltd. (herein after called ‘APSEZL’) for registration as Shipping Agent for purpose of acting on behalf of ships entering Mundra Port ;
- b. It is deemed expedient to authorize some persons to sign documents/ undertake obligations on our behalf in connection with the said registration and our role as Shipping Agent thereafter

NOW THEREFORE KNOW ALL MEN that the Company do hereby nominate, constitute , empower and appoint Mr. \_\_\_\_\_, son of Mr. \_\_\_\_\_, aged around \_\_\_\_ years and presently residing at \_\_\_\_\_ and, Mr \_\_\_\_\_, son of Mr. \_\_\_\_\_, aged around \_\_\_\_ years and presently residing at \_\_\_\_\_, to be our true and lawful attorney, to do the following acts jointly or severally , in our name and on our behalf :

1. To sign / submit applications /documents necessary for the purpose of registration;
  2. On being registered by APSEZL as a Shipping Agent, to sign contracts/documents undertake necessary obligations so as to discharge our responsibility as a Shipping Agent in Mundra Port;
1. To provide any information or clarification sought from the Company;
  2. To incur liabilities and receive instructions for and on behalf of Company and to do all dealings including in the matter of payment of dues to APSEZL.

And we the above named Company do hereby agree to ratify all such acts, deeds and things to be done by the said Attorneys as if the same were done by the Company.

IN WITNESS WHEREFOF we have signed this Power of Attorney this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

For the Co. \_\_\_\_\_  
Authorized representative  
\_\_\_\_\_  
(Designation)

I /We Accept

Mr. \_\_\_\_\_

Mr. \_\_\_\_\_

Constituted Attorney

Signature of Attorneys attested.  
Mr. \_\_\_\_\_

(Authorized signatory)

CUSTOMER MASTER		
USER	Customer Name *	
	Customer Type *	
	Contact Person *	
	Address 1 *	
	Address 2	
	City *	
	State *	
	Distance KM. (If Factory)	
	Country *	
	Pin Code *	
	Phone *	
	Fax	
	Mobile *	
	Email-1 *	-
	Email-2	-
	PAN No.*	
	GST No.*	
TAN No.*		
OFFICE USE	Recon. account	11211200
	Customer User	MARINE
	Customer Group	IPMS
	Sort key	
	Cash mgmnt group	
	Payt Terms	
	Tolerance group	

**Note :Cell Marked with \* are to be filled compulsorily**