Car	lication or rier Reg	istering			of Operation of Liner Se				evice
Compa Name	nny					Permit No.			
Address						Tel			
Route Starting Point	g End	ute ling oint	Docking Passenger/ Ports along the Route Passenger/ Service		Service Name of Schedule/ Service Period Vessel		Service	Status of Vessel Self-owned/ Leased/ Chartered	Remarks
Required Documents	Business Operation Service Schedule Sample(s) of bill Plans Freight Rate List lading (B/L) or Document in proof of Passenger Ticket vessel's nationality In case of a change in liner service operations, please attach the reference list of changes to the route (see Attachment 11) Plan to safeguard personal information files Other Please briefly state the reason of termination:								or cket
	Other								
Notes to Applicant		 I. Self-owned vessel refers to a vessel registered under the name of the owner. II. Application and the attachments annexed thereto, one set each. III. Please affix both company and legal representative's seals at the blank space. IV. Please accompany the application with the supporting documents announced by the Shipping Administration. 							
Applican									

Maritime and Port Bureau Ministry of Transportation and Communications