

SECTION D : CAR ENTRY PERMIT (for approved applicants only)

Type

Persons/Entities eligible for car entry

- PMA CEP (Type A)
- PMA CEP (Type B)
- PMA CEP (Type C)
- PMA CEP (Type D)
- PMA CEP (Type E)

- a) Shipchandling, Shipping & Clearing Agency
- b) Contractor/Supplier
- c) Tenants
- d) Government Ministries/Agencies
- e) Navy & Coast Guard

1. Vehicle Registration No.

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2. Vehicle Type

Private	<input type="checkbox"/>	Public	<input type="checkbox"/>	Motorcycle	<input type="checkbox"/>	Others	<input type="checkbox"/>
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1a. Vehicle Registration No.

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2a. Vehicle Type

Private	<input type="checkbox"/>	Public	<input type="checkbox"/>	Motorcycle	<input type="checkbox"/>	Others	<input type="checkbox"/>
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1b. Vehicle Registration No.

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2b. Vehicle Type

Private	<input type="checkbox"/>	Public	<input type="checkbox"/>	Motorcycle	<input type="checkbox"/>	Others	<input type="checkbox"/>
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1c. Vehicle Registration No.

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2c. Vehicle Type

Private	<input type="checkbox"/>	Public	<input type="checkbox"/>	Motorcycle	<input type="checkbox"/>	Others	<input type="checkbox"/>
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1d. Vehicle Registration No.

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2d. Vehicle Type

Private	<input type="checkbox"/>	Public	<input type="checkbox"/>	Motorcycle	<input type="checkbox"/>	Others	<input type="checkbox"/>
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1e. Vehicle Registration No.

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2e. Vehicle Type

Private	<input type="checkbox"/>	Public	<input type="checkbox"/>	Motorcycle	<input type="checkbox"/>	Others	<input type="checkbox"/>
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1f. Vehicle Registration No.

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2f. Vehicle Type

Private	<input type="checkbox"/>	Public	<input type="checkbox"/>	Motorcycle	<input type="checkbox"/>	Others	<input type="checkbox"/>
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1g. Vehicle Registration No.

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2g. Vehicle Type

Private	<input type="checkbox"/>	Public	<input type="checkbox"/>	Motorcycle	<input type="checkbox"/>	Others	<input type="checkbox"/>
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SECTION E : DECLARATION

DECLARATION

- (a) We hereby sponsor the Applicant's application for the PMA Pass and affirm that;
 - (i) The Applicant's is our employee and his / her duties require him / her to enter PMA's Facilities.
 - (ii) The information provided in this section B is true in all respects.

- (b) We hereby also agree and undertake;
 - (i) To notify PMA immediately of any inaccuracy or change of the information provided in section A.
 - (ii) To notify PMA as soon as the Applicant is no longer employed by us.
 - (iii) To abide by and also ensure that the Applicant abides by the PMA Pass Condition, the PMA Security, Safety, Health and Environmental Rules and any other terms and conditions as may be implemented by PMA from time to time.
 - (iv) To be jointly and severally responsible for all acts, obligations and liabilities whatsoever of the Applicant arising from or in relation to the Applicant's use of PMA Pass.

(For Contractors Only) Name of Site Super Visor _____

Contact No. _____

Signature of Company's / Business Representative _____

Name of Company's / Business Representative _____

SMART / Passport No. _____

Date _____

Please affix Company's Business stamp

SECTION F : FOR PMA USE ONLY

PMA Pass No.	
Vehicle	Yes / No

Checked and Processed by : _____
Signature / Date / Location

SECTION G: ACKNOWLEDGEMENT OF RECEIPT OF PMA PASS

I hereby acknowledge receipt of my PMA Pass issued to me upon the terms and conditions as set in the PMA Pass Condition, the PMA Security, Safety, Health and Environmental Rules and any other terms and conditions as may be implemented by PMA from time to time.

Pass Issued By: _____
Signature / Date /

* In line with PMA Access Code Section 7 sub section (4) with regard to PMA Pass for Facilities Contractors / Tenants Basis.