

**APPLICATION TO REQUEST AUTHORISATION FOR TEMPORARY ACCESS TO
THE PORT OF VALENCIA'S FACILITIES**

CONTROL NO.

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1) APPLICANT DETAILS:

Name ⁽¹⁾:

Tax number/Id. No./Passport No. ⁽²⁾:

2) CONTACT DETAILS (FOR NOTIFICATION PURPOSES)

e-mail: Mobile No.:

3) ACCESS REQUEST DETAILS:

Date ⁽³⁾: Time ⁽⁴⁾:

Purpose ⁽⁵⁾:

Area of the Port Facility ⁽⁶⁾:

Person collecting
authorisation ⁽⁷⁾:

Surname	Name	Tax No./Id.No. /Passport No.	Contact Tel. No.

OTHER PEOPLE IN THE PARTY ⁽⁸⁾:

	Surname	Name	Tax No./Id. No. /Passport No.		Surname	Name	Tax No./Id. No. /Passport No.
1				4			
2				5			
3				6			

(To add more people to the list, please attach a separate sheet to this application).

(Each person must sign a separate Data Protection Law sheet). ⁽⁹⁾

VEHICLES USED TO ACCESS THE FACILITY ⁽¹⁰⁾:

	Vehicle number plate	Manufacturer	Model
1			
2			

(To add more vehicles to the list, please attach a separate sheet to this application).

PAV EMPLOYEE RELATED TO THE APPLICANT'S REQUEST FOR ACCESS WHO ENDORSES THE APPLICATION ⁽¹¹⁾:

PAV DEPARTMENT OR AREA:

PERSON FROM THE CONCESSION/AUTHORISATION HOLDER OR BODY RELATED TO THE APPLICANT'S REQUEST FOR ACCESS WHO ENDORSES THE APPLICATION ⁽¹²⁾:

Surname:	Name	Tax No./Id.No. /Passport No.	Contact Tel. No.	e-mail:

CONCESSION/AUTHORISATION/BODY NAME:

I have read and accept the PAV's Occupational Health and Safety Regulations.

I have read and accept the General Terms and Conditions for temporary access to the PAV's facilities

I have read and accept the information provided on port security.

INSTRUCTIONS TO FILL IN THE APPLICATION FORM

PLEASE WRITE IN BLACK PEN AND USE CAPITAL LETTERS

THIS ORIGINAL FORM SHOULD BE PRESENTED OR SHOULD BE SENT BY E-MAIL

- (1).- Indicate company name if the application is for a company, or name and surname if you are self-employed or it is a private visit.
- (2).- Indicate your company or individual tax number, Id. No. or passport number, as appropriate.
- (3).- Use two digits for the day, two digits for the month and four digits for the year, in this order (dd/mm/yyyy). Should the request be for a period of time, indicate the start of the period, separated by a hyphen, followed by the end of the period, in this order (dd/mm/yyyy)-(dd/mm/yyyy).
- (4).- Use two digits for the hour and two digits for the minutes, in this order (hh:mm)-(hh:mm), for the start and end times, respectively.
- (5).- Indicate the purpose of the access request.
- (6).- Indicate the area, quay, concession, etc. you wish to visit... (see attached map).
- (7).- Indicate name, surname, tax number, Id. No. or passport number, and contact telephone number.
- (8).- Indicate the names, surnames and tax numbers, Id. Nos. or passport numbers of the other people in the party. To add more people to the list, please attach a separate sheet to this application.
- (9).- All the visitors must each sign a General Information Form (see file attached).
- (10).- Indicate vehicle number plate, manufacturer and model. To add more vehicles to the list, please attach a separate sheet to this application.
- (11).- Indicate name and surname.
- (12).- Indicate name, surname, tax number, Id. No. or passport number, contact telephone number and e-mail.

Please send your completed application to request authorisation for temporary access to the Port of Valencia's facilities to the following e-mail address: acreditaciones@valenciaport.com.

FREE APPLICATION FORM, SALE OF THIS DOCUMENT IS STRICTLY PROHIBITED