

FOREIGN PORT INVOICE

Port Clearance & Agency Services

Invoice No: _____

Date: _____

PRINCIPAL / SHIP OWNER:

VESSEL DETAILS:

Vessel Name: _____
IMO Number: _____
Call Sign: _____
GRT/NRT: _____

PORT OF CALL: _____
ARRIVAL DATE: _____

VOYAGE NO: _____
DEPARTURE DATE: _____

DESCRIPTION OF SERVICES / DUES	CURRENCY	QUANTITY	UNIT PRICE	TOTAL AMOUNT
Port Dues & Tonnage Dues				
Pilotage & Towage Services				
Berthing / Unberthing Charges				
Light Dues				
Customs Clearance Fees				

DESCRIPTION OF SERVICES / DUES	CURRENCY	QUANTITY	UNIT PRICE	TOTAL AMOUNT
Agency Attendance Fee				
Waste Disposal / Environmental Fee				
Communication & Sundries				
Other: _____				

SUBTOTAL: _____

TAX/VAT (%): _____

GRAND TOTAL: _____

BANKING PARTICULARS (SWIFT/IBAN):

Bank Name: _____
Account Name: _____
IBAN: _____
SWIFT/BIC: _____

OFFICIAL STAMP

Note: All disbursements are subject to the standard terms and conditions of the Port Authority and Local Maritime Agency regulations.

Authorized Signature: _____