

Application:

FORM-MP/WRS/01

**SHIPBOARD WASTE RECEPTION SERVICE OF THE MEPA**  
**APPLICATION TO REGISTER AS A SERVICE PROVIDER FOR THE YEAR 2010**

|                                                                                                  |          |                  |                |
|--------------------------------------------------------------------------------------------------|----------|------------------|----------------|
| 01. Registered Business Name :                                                                   |          |                  |                |
| 02. Registration No. :                                                                           |          |                  |                |
| 03. Authorized Personnel for transactions with MPPA                                              |          | 1.<br>2.<br>3.   |                |
| 04. Address                                                                                      |          |                  |                |
| 05. Telephone.                                                                                   | 06. Fax. | 07. Mobile:      | 08. Email      |
| 09. Types of waste that will be received from Ships (pls. tick relevant cage)                    |          | <u>Waste Oil</u> | <u>Garbage</u> |
| 10. Address of the waste disposal site ( <i>indicate separately if separate sites are used</i> ) |          |                  |                |
| 10.1 <u>For Oil waste</u>                                                                        |          |                  |                |
| 10.2 <u>For Garbage</u>                                                                          |          |                  |                |

11. Details of oil removal equipments own by applicants

| Type | Specifications |
|------|----------------|
|      |                |

12. Details of Safety equipments own by applicants (Please attach bills)

| Name | Specifications |
|------|----------------|
|      |                |

Please attach the specifications given by manufacturer.

13. Details of personnel to be deployed for oil removal operation

| Name | Qualification (If any)* | Experience (If any)* |
|------|-------------------------|----------------------|
|      |                         |                      |
|      |                         |                      |
|      |                         |                      |
|      |                         |                      |
|      |                         |                      |
|      |                         |                      |
|      |                         |                      |

\* To be supported with documentary evidence

14. Copies of the certificates to be submitted with the application. (Tick the cage in front)

|                                                                                                                |  |
|----------------------------------------------------------------------------------------------------------------|--|
| a. Certificate of the Registrar of Companies.                                                                  |  |
| b. SLPA License [for the appropriate category] for operating within a Port.                                    |  |
| c. Environment Protection License (EPL) of Central Environment Authority (CEA) for disposal / storage of waste |  |
| d. Permission from the respective Local Government Authority (LGA) for waste disposal.                         |  |

Please register (*Company Name*).....as a Service Provider of MEPA for the year 2009 I have carefully studied the content of the regulations for reception of shipboard waste stated in the MP/WRS/4 and I certify that I agree to abide by the requirements stated therein under the Waste Reception Service of Marine Environment Protection Authority.

.....

Name

.....

Signature

.....

Official Stamp

Date:.....