



भारतीय अन्तर्देशीय जलमार्ग प्राधिकरण
INLAND WATERWAYS AUTHORITY OF INDIA
CENTRAL INFORMATION HUB-NW-1, NAVIGATION LOCK, FARAKKA

1. Name and Address of the logistic operator _____
2. Route: Indicate origin and destination _____
3. Type of the Cargo _____ Weight _____
4. Cargo supplier details _____ Cargo supplied to _____
5. **Details of the vessel: -**
 - i. Type of vessel (Self-propelled/dumb barge etc.) _____
 - ii. Registration No. _____ Port of registry _____
 - iii. DWT of vessel _____
 - iv. Carrying capacity of vessel _____
 - v. Empty Draft of vessel _____ Loaded Draft of vessel _____
 - vi. Length (in m) _____ Beam (in m) _____ Moulded depth (in m) _____ Air draft (in m) _____
 - vii. Survey Certificate No. _____ Validity _____
 - viii. Insurance policy No. _____ Validity _____
 - ix. Master License No. _____ Driver License No. _____

6. **Details of voyage: -**

(Details to be given for each day of voyage)

Date	Time of start of voyage	Starting Place	Tentative time of arrival	Arrival Place	Total hours of operation	Remarks

7. **Availability of safe navigation aids in the vessel (Fill Yes/No in the box): -**

- i. AIS ii. DGPS iii. VHF iv. ENC Display v. ENCs

8. **Lock crossing charges: -**

GRT of the vessel	Applicable charges (@20 * GRT) or 1000.00 whichever is higher plus 18% GST (in .)	Amount deposited (in .)	Details of DD/RTGS and Date of submission	Deposited at (IWAI Office details)

9. **Undertaking: -**

- i. I declare that I have gone through all the rules/ regulations/latest amendments of Inland Vessels Act, 1917, IWAI Act 1985 and other acts/rules governing navigation of Inland vessels on inland waterways notified by central/state governments/this authority and shall abide by the same during my complete voyage.
- ii. I declare that I have gone through latest river notices and sailing caution issued by IWAI.
- iii. I declare that all the information provided is completely true of my knowledge.
- iv. I declare that our vessels crew has been briefed about the safety of navigation lock and will cross the navigation lock safely and responsibly. The authority may also recover cost of any damages caused by the vessel during crossing through the Navigation Lock.

Sign and seal of logistic operator/vessel owner

Place:

Date:

Note: Please enclose copy of Registration Certificate, Survey Certificate & Insurance of the vessel and Competency Certificate of Master & Driver with this application.

(For office use only)

Crossing details of Navigation lock: -

Crossing From: _____ to _____

Date of Crossing: - ____/____/____ Operation Start: - ____/____ Operation completed on: - ____/____