

## Application for a slipping pass

Name and surname: .....

Telephone: .....

Vehicle registration number: .....

space for the company stamp

Type of pass: slipping

I declare that I have read the Terms and Conditions for the use of port infrastructure.

I declare that I will not make the barrier activation card available to third parties on the premises of the workshop. If an outsider is allowed to enter and slip, the cardholder will be charged an additional fee resulting from the price list for slipping and parking.

.....  
date and legible signature of the applicant

Register number:.....

.....  
(issued by)