



# PANAMA MARITIME AUTHORITY

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## APPLICATION FOR EXEMPTION CERTIFICATE Under regulation 4.1.3 of Annex II Marpol 73/78 (amended) (\*\*\*Incomplete applications will be declined\*\*\*)

<b>Vessel Name:</b>	_____	<b>Type of Vessel:</b>	_____
Call Letters:	_____	Deadweight:	_____
IMO No:	_____	Delivery date:	_____
Cargo Properties: (If applicable)	_____		

Name/Address/Tel & Fax of Operator  
(to be included at all times)

Name of Company responsible for receiving  
original documents and paying for invoices  
(if different from operators):

_____	_____
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1. Reasons for the exemption request: \_\_\_\_\_
2. Regulation that confers authority for the exemption: \_\_\_\_\_
3. Validity of COF full term statutory certificate (copy must be Attached): \_\_\_\_\_
4. Special conditions (if any): \_\_\_\_\_