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|  | | | | | | **Port Entry Notification**  **Notificación de Entrada a Puerto**  Buques de Pesca y Apoyo a la Pesca / Fishing and Support Vessels | | | | | | | | | | | | | Fecha / Date (dd-mmm-yyyy) | | | |
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| **A. VESSEL DETAILS / PARTICULARIDADES DE LA NAVE** | | | | | | | | | | | | | | | | | | | | | | |
| 1. Vessel Name/Nombre de la Nave | | | | | | | | | 2. IMO Number/Número OMI | | | | | | 3. Radio Call Sign/Distintivo de llamada | | | | | | | |
|  | | | | | | | | |  | | | | | |  | | | | | | | |
| 4. Type of Vessel/Tipo de Buque | | | | | | | | | 5. Flag State/Estado del Pabellón | | | | | | 6. Cargo Capacity/Capacidad de carga | | | | | | | |
|  | | | | | | | | |  | | | | | |  | | | | | | | |
| 7. External ID/Identificador Externo | | | | | | | | | 8. RFMO ID/Identificador OROP | | | | | | 11. Approved Fishing Gear/Arte de pesca autorizado | | | | | | | |
|  | | | | | | | | |  | | | | | |  | | | | | | | |
| 8. Length/Eslora (m) | | | 9. Beam/Manga (m) | | | 10. Depth/Puntal (m) | | | 12. Master Name/Nombre del Capitán | | | | | | 13. Master Nationality/Nacionalidad del Capitán | | | | | | | |
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| 14. Vessel Monitoring System (VMS)/Sistema de Monitoreo | | | | | | | | | | | | | | | | | | | | | | |
| No  Yes(National)/Si(Nacional)  Yes(RFMO)/Si (OROP)  Type/Tipo | | | | | | | | | | | |  | | | | | | | | | | |
| **B. OWNERS DETAILS / PARTICULARIDADES DE LOS ARMADORES** | | | | | | | | | | | | | | | | | | | | | | |
| 15. Owners Name/Nombre de los Armadores | | | | | | | | 16. Address/Dirección | | | | | | | 17. Email/Correo Electrónico | | | | | | | |
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| **C. ARRIVAL DETAILS / DETALLES DEL ARRIBO** | | | | | | | | | | | | | | | | | | | | | | |
| 18. Intended Port of Call/Puerto de Escala Previsto | | | | | | | | 19. Port State/Estado Rector de Puerto | | | | | | | 20. Estimated Time of Arrival (ETA)/Fecha prevista de llegada (dd-mmm-yyyy) | | | | | | | |
|  | | | | | | | |  | | | | | | |  | | | | | | | |
| 21. Propose of the Arrival (explain) /Finalidad del arribo (explique) | | | | | | | | | | | | | | | 22. Last port of call and date of arrival/Ultimo puerto y fecha de arribo | | | | | | | |
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| **D. FISHING AUTHORIZATIONS (IFL) / AUTORIZACIONES DE PESCA (LICENCIA DE PESCA)**  Only Fishing vessel / solo para buques de captura | | | | | | | | | | | | | | | | | | | | | | |
| 23. Identifier /  Identificador | | 24. Issued by /  Expedida por | | | | 25. Expiration / Caducidad  (dd-mmm-yyyy) | | | | 26. Fishing Area(s) / Zonas de Pesca | | | | | 27. Species / Especies | | | | | 28. Fishing Gear /  Artes de pesca | | |
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| **E. TRANSHIPMENT AUTHORIZATIONS (IFL) / AUTORIZACIONES DE TRASBORDO (LICENCIA DE PESCA)**  Only Support Vessel / solo para buques de actividades relacionada a la pesca | | | | | | | | | | | | | | | | | | | | | | |
| 29. Identifier / Identificador | | | | 30. Issued by / Expedida por | | | | | | | | | | | 31. Expiration / Caducidad (dd-mmm-yyyy) | | | | | | | |
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| **F. TRANSHIPMENT INFORMATION / INFORMACIÓN DE TRASBORDOS** | | | | | | | | | | | | | | | | | | | | | | |
| 32. Fecha / Date (dd-mmm-yyyy) | 33. Location / Lugar | | | | | | 34. Name of Fishing vessel /  Nombre del buque de Captura | | | | 35. Flag State /  Estado del Pabellón | | 36. Species / Especies | | | 37. Product Type / Tipo del Producto | | | 38. Catch Area / Zona de Captura | | 39. Quantity / Cantidad (kg) | |
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| **G. TOTAL CATCH or TRANSSHIPMENT ONBOARD AND TO BE OFFLOADED / TOTAL DE CAPTURAS o TRANBORDO ABORDO Y POR DESEMBARCAR** | | | | | | | | | | | | | | | | | | | | | | |
| 40. Species / Especies | | | | | 41. Product Type /  Tipo de Producto | | | | | | 42. Catch Area /  Zonas de Captura | | | 43. Quantity / Cantidad | | | | 44. Catch to be Offloaded¹ /  Capturas a Desembarcar¹ | | | | |
| (kg) | | | (units) | (kg) | | | | (units) |
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Notice: This form should be duly completed, signed and sent in 24 hours before port arrival, to the following emails: [transshipment@arap.gob.pa](mailto:transshipment@arap.gob.pa).

Nota: Este formulario deberá ser debidamente completado, firmado y enviado en 24 horas antes de su llegada a puerto, a las siguientes cuentas de correo electrónico: [transshipment@arap.gob.pa](mailto:transshipment@arap.gob.pa)

¹ The Section 44 is applicable and should be filled only if the products is offloaded at port. / ¹ La sección 44 is aplicable y debe ser llenado solo si el productos es descargado en Puerto.

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| *Master’s name / Nombre del Capitán* | *Stamp /Sello* | *Master’s signature / Firma del Capitán* |