



**APPLICANT'S
PHOTOGRAPH**

**CHITTAGONG PORT AUTHORITY
SECURITY DEPARTMENT**

**APPLICATION FOR PERMANENT PASS FOR ENTRY INTO
CHITTAGONG PORT PROTECTED & PROHIBITED AREA**

PART-I (TO BE FILLED UP BY THE APPLICANT)

- Serial numbers marked with star (*) must be filled in.
- Enclosures mentioned in serial 16 must be attached with the application form

Type of License/ Pass

1. আবেদনকারীর নাম (বাংলায়) _____
(Name of the Applicant in Bangla)
- 2.* Name of the Applicant (in Capital Letters): _____
- 3.* Gender [Tick (✓) in Appropriate Box]: ☐ Male ☐ Female ☐ Others
- 4.* Date of Birth: _____ Place of Birth: _____
- 5.* Nationality: _____ 6.* Religion: _____
- 7.* National ID Number: _____ Date of Issue : _____

OR

- Birth Registration Number : _____ Issuing Authority : _____
- 8.* Tax Identification Number : _____
- 9.* Passport Number (If Available) : _____ Validity : _____
Issuing Place and Authority : _____
- 10.* Educational Qualification [Tick (✓) the Appropriate Box]: (Mention the highest level only)
- | | | |
|--|--|--|
| <input type="checkbox"/> Below primary | <input type="checkbox"/> Primary Level | <input type="checkbox"/> Below Junior School Level |
| <input type="checkbox"/> Junior School Level | <input type="checkbox"/> Secondary Level | <input type="checkbox"/> Higher Secondary Level |
| <input type="checkbox"/> Graduate | <input type="checkbox"/> Post Graduate | <input type="checkbox"/> Others |
- Name of the Last Institution Studied : _____
- 11.* Parental Information:
- Father's Name : _____ Profession : _____
National ID Number : _____ Telephone/Cell phone : _____
Mother's Name : _____ Profession : _____
National ID Number : _____ Telephone/Cell phone : _____
- 12.* Marital Status [Tick (✓) the Appropriate Box]:
- ☐ Unmarried ☐ Married ☐ Widower/Widow ☐ Divorced
- Spouse Information (If Applicable) :
- Name : _____ Nationality : _____ Profession : _____
Address : _____
National ID Number : _____ Telephone / Cell phone : _____

CONFIDENTIAL

Applicant's Name : _____

Register Serial Number _____

13.* Addresses:

[Village/House, Road /Block/Sector, Police Station, Post Office, District must be mentioned]:

Present Residential Address: _____

_____ Telephone / Mobile Number _____

Permanent Address: _____

_____ Telephone / Mobile Number _____

Business Address: _____

_____ Telephone/Mobile Number _____ E-Mail: _____

14.* Overseas Address [If Applicable]:

Country: _____ Telephone/Fax : _____ E-Mail : _____

15.* Date and Reference of CPA Enlistment : _____

16.* Enclosures Attached with the Application Form :

- | | | |
|---|---|--|
| <input type="checkbox"/> Copy of National ID | <input type="checkbox"/> Copy of TIN Certificate | <input type="checkbox"/> Custom Sircar License |
| <input type="checkbox"/> Copy of Passport | <input type="checkbox"/> CPA Enlistment Certificate | <input type="checkbox"/> VAT Registration Certificate |
| <input type="checkbox"/> Photographs | <input type="checkbox"/> Trade License | <input type="checkbox"/> Copy of Previously Issued License |
| <input type="checkbox"/> Copy of Birth Registration Certificate | <input type="checkbox"/> Custom Agency License | <input type="checkbox"/> Guarantor's National ID |

DECLARATION

17.* I solemnly affirm that all the information mentioned in the form is true and for any wrong information I shall be liable to be punished as per law [আমি শপথ করে বলছি যে, আবেদন পত্রে প্রদত্ত সব তথ্য সত্য এবং মিথ্যা তথ্য দিয়ে থাকলে আমি আইন অনুযায়ী দণ্ডনীয় হব] .

SIGNATURE	RIGHT HAND THUMB

Date: _____

Signature & Thumb Impression
[With Permanent Ink]

PART-II- CERTIFICATION [TO BE FILLED UP BY EMPLOYER / GURANTOR]

18.* As per my knowledge and cognition, particulars mentioned in the form are true. The signature and thumb impression were given the form in my presence [আমার জ্ঞান ও বিশ্বাসমতে ফরমে বর্ণিত তথ্যাবলী সত্য । তিনি আমার সম্মুখে আবেদন পত্রে স্বাক্ষর এবং বৃদ্ধাঙ্গুলীর ছাপ প্রদান করেছেন]

National ID Number : _____

Address: _____

Mobile/Telephone Number: _____

Signature of Employee / Guarantor

Name:

Date :

CONFIDENTIAL

Applicant's Name: _____

Register Serial Number : _____

PART-III [FOR OFFICIAL USE ONLY]

INFORMATION BELOW MUST NOT BE DISCLOSED OR SHOWN TO APPLICANT OR TO ANY UNAUTHORIZED INDIVIDUAL

19. Police Verification Referral :

a. Register Serial Number _____ Date of Endorsement : _____

b. Details of Verification Form sent to the Office of the Superintendent of Police for enquiry from Security Department, CPA :

(1) Police Station : _____ District _____

(2) Reference / Despatch Number : _____ Date _____

Form / Documents Prepared by :

Personal Number :

Rank :

Name :

Date :

SIGNATURE & DATE

20. Police Verification Result and Issue of License / Permanent Pass:

a. Date and Time of Receipt: _____ Reference : _____

b. Comments of the Hometown Police Authority : _____

c. Duty / Fees Payment : _____ d. State of Data Entry : _____

Form / Documents Prepared by :

Personal Number :

Rank :

Name :

Date :

SIGNATURE & DATE

21. Remarks of Deputy Director (Security) :

a. Appropriateness of Associated Documents Verification : Authentic / Unauthentic

b. Preparation & Processing of Documents by the Dealing Staff(s) : Timely Done / Delayed

c. Police Verification Result : Positive / Negative.

d. Comments / Recommendation (To be written by hand with Initial) :
[Recommend / Not Recommended / Re-verification necessary etc]

c. Date of Interview and Physical Presence of the Applicant :

Date : _____

SIGNATURE & OFFICIAL SEAL

22. Remarks of Director (Security):

Approved / Deferred / Re-verification / Not Approved

Chittagong Port

Date : _____

CONFIDENTIAL

Applicant's Name : _____

Register Serial Number : _____

23. Police Re-Verification Referral (If Applicable) :

- a . Register Serial Number _____ Date of Endorsement : _____
- b . Details of Verification Form sent to SP's Office for enquiry from Security Department, CPA:
- (1) Police Station : _____ District _____
- (2) Authority / Despatch Number : _____ Date _____

Form / Documents Prepared by : _____

Personal Number : _____

SIGNATURE & DATE

Rank :

Name :

Date :

24. Details of Issue of License / Permanent Pass:

a. Permanent Pass / Entry Permit (Land & River) Issued (PA-319) :

- (1) Card/Number : _____ Date of Issue : _____
- (2) Type of License : _____
- (3) Validity : From _____ up to _____
- (4) Proprietor / Employer : _____
- (5) Duty / Fee Paid : Amount _____
- (6) Date of Handing Over : _____
- (7) Received by : _____

(Name, Signature and Date)

- (8) Issued By : _____

(Name , Signature and Date)

b. License Issued [PA-138 / CPA]:

- (1) License Number : _____ Dated : _____
- (2) ID Card/Number : _____ Date & Issue : _____
- (3) Customs License Number : _____
- (4) Type of License : _____
- (5) Validity : From _____ up to _____
- (6) Proprietor : _____
- (7) Duty/Fee Paid : Amount _____
- (8) Date of Handing Over : _____
- (9) Received by : _____

(Name & Cell Phone Number)

- (10) Issued By : _____

(Name, Signature and Date)