

APPLICANT'S
PHOTOGRAPHCHITTAGONG PORT AUTHORITY
SECURITY DEPARTMENTAPPLICATION FOR PERMANENT PASS FOR ENTRY INTO
CHITTAGONG PORT PROTECTED & PROHIBITED AREAPART-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]:

<input type="checkbox"/> Unmarried	<input type="checkbox"/> Married	<input type="checkbox"/> Widower/Widow	<input type="checkbox"/> Divorced
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■ 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"/> <i>Copy of National ID</i>	<input type="checkbox"/> <i>Copy of TIN Certificate</i>	<input type="checkbox"/> <i>Custom Sircar License</i>
<input type="checkbox"/> <i>Copy of Passport</i>	<input type="checkbox"/> <i>CPA Enlistment Certificate</i>	<input type="checkbox"/> <i>VAT Registration Certificate</i>
<input type="checkbox"/> <i>Photographs</i>	<input type="checkbox"/> <i>Trade License</i>	<input type="checkbox"/> <i>Copy of Previously Issued License</i>
<input type="checkbox"/> <i>Copy of Birth Registration Certificate</i>	<input type="checkbox"/> <i>Custom Agency License</i>	<input type="checkbox"/> <i>Guarantor's National ID</i>

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 বৃন্দাঙ্গুলীর 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 :

SIGNATURE & DATE

Name :

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 :

SIGNATURE & DATE

Name :

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 : _____

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)