
# **Ships Inward / Outward Manifest**

*Please email to: shipping@portofportland.com.au within 24 hours of the vessel sailing, as practicable and in line with the Ports terms and conditions.*

|  |  |
| --- | --- |
| Vessel  |       |
| Flag |       | Commence Cargo  | Date |       | Time  |       |
| Gross Tonnes  |   | Complete Cargo  | Date |       | Time |       |
| IMO |       | Departure Draft FWD  |       |
| Date of Sailing |       | Departure Draft AFT  |       |

*All cargo to be advised in metric tonnes; In additions, the volume should also be supplied where applicable.*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Cargo Description** | **Qty.** | **Metric Tonnes****(MT)** | **Volume****(CBM/JAS)** | **Shippers / Forwarders****(Name and Address)** | **Consignees****(Name and Address)** | **Port of Loading** | **Port of Discharge** | **Used Port****Weighbridge** |
|       |       |       |       |       |       |       |       | [ ]  Yes [ ]  No |  |
|       |       |       |       |       |       |       |       | [ ]  Yes [ ]  No |
|       |       |       |       |       |       |       |       | [ ]  Yes [ ]  No |
|       |       |       |       |       |       |       |       | [ ]  Yes [ ]  No |
|       |       |       |       |       |       |       |       | [ ]  Yes [ ]  No |
|       |       |       |       |       |       |       |       | [ ]  Yes [ ]  No |

|  |  |  |  |
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| Agent Name |       | Shipping Agency |       |

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| *I declare that the above particulars constitute a true and complete account of the Port call and all goods discharged from or shipped by the vessel.* |
| Signature |       | Date |       |