

POAL Container Terminal – Late Receival Application

Request for Late Receival approval must be submitted before vessel cut off. For vessel cut off information please refer to POAL [website.](https://www.poal.co.nz/operations/schedules/arrivals)

Email this form to:

POAL Customer Service at [CustomerServiceC@poal.co.nz](mailto:CustomerServiceC@poal.co.nz) and copy your transport company on the email.

|  |  |
| --- | --- |
| **Vessel** |  |
| **Voyage** |  |
| **Line Operator** |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Container No.** | **Booking reference** | **OOG (YES/NO)** | **Estimated Date & Time of Arrival** | **Transport Mode** | **Transport Company** |
| **(Rail / Truck)** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

# Please ensure you have the following in place prior to submitting the form:

* Export container is pre-advised
* CEDO is cleared (if going deep-sea).

# Fill out below section if transport mode is “Truck”:

By submitting this form, you confirm that you received approval of Line Operator and that if Late Receival is granted, a fee as set in the Price Schedule, will be applied to your account.

POAL account #:

PO# (if applicable):

Name:

Date:

*Please ensure that this Late Receival form is submitted during Customer Service working hours: between 0700 and 1900 hours on weekdays and between 0700 and 1500 on Saturdays. POAL accepts no responsibility if your container(s) is not loaded due to Line Operator’s decision.*

**Ports of Auckland I** Late Receival Form (FCL)