

(Request letter to CCTL for opening a Pre-Deposit Account (PDA) should be typed on your company letter head)

To:

The Chief Executive Officer,
Chennai Container Terminal Private Limited
Administrative Building, Ground Floor,
No.1 Rajaji Salai,
Chennai- 600001

Dear Sir,

Sub: Request to open Pre-Deposit Account (PDA) at your Terminal

This is to request you to kindly open a Pre-Deposit Account (PDA) as we are holding AEO status and registered with Chennai Customs. We intend to have direct port Delivery/Entry for Import/Export containers by paying the applicable Terminal charges. For meeting these charges, sufficient funds will be maintained in our PDA prior taking Delivery/Entry of our containers.

In this regard we are enclosing Annexure –I & Annexure –II duly filled in with relevant document copies attached.

We also agree/accept the Terms and Condition as available in your website:
<http://www.dpworldchennai.com/>

Thanking You,
Yours Sincerely,

(Name of the Authorised Signatory)
(Designation)
(Company Seal)

ANNEXURE - I

REGISTRATION OF PRE-DEPOSIT ACCOUNT (PDA) WITH CCTL

1. Customer Detail: -

- Entity Name : _____
- Company Reg. Date : _____
- Registered Office Address (**Note 2**) : _____
: _____
: _____
- Phone / Fax No. : _____
- Email ID : _____
- Local Address (**Note 2**) : _____
: _____
: _____
- Phone / Fax No. : _____
- Email ID : _____
- Certificate of Incorporation (**Note 1**) : _____
(In case of Company)
- PAN card No. (**Note 1**) : _____
- AEO Registration No. (**Note 1**) : _____
- GST registration No. (**Note 1**) : _____

| S.No. | GST NO. | BILLING ADDRESS | STATE |
|-------|---------|-----------------|-------|
| 1 | | | |
| 2 | | | |
| 3 | | | |

- IEC Code No (**Note 1**) : _____
- Chennai Customs DPD Code : _____

• Security Deposit : _____

(Note 1): - Copy to be enclosed. (Note 2): - Address Proof to be enclosed.

2. Details of Authorized Representative: -

(A) (a) **Operations**

- Name of Person : _____
- Designation : _____
- Direct Contact No. : _____
- Email Id : _____

(b)

- Name of Person : _____
- Designation : _____
- Direct Contact No. : _____
- Email Id : _____

(B) (a) **Finance**

- Name of Person : _____
- Designation : _____
- Direct Contact No. : _____
- Email Id : _____

(b)

- Name of Person : _____
- Designation : _____
- Direct Contact No. : _____
- Email Id : _____

- Email Id's for sending Invoice }
and Statement of Account: } _____

ANNEXURE - II

◆ **We confirm and accept the below: -**

1. We confirm to abide by all Health Safety & Environment (**HSE**) rules and regulations as stipulated by CCTL and assure that Safety shall be given paramount importance when we engage with the Terminal.
2. We hereby accept to abide by the Standard terms of business as published and publicly available on the website of <http://www.dpworldchennai.com/>
3. We understand and agree that our Pre-deposit account will have sufficient funds for payment of charges payable to CCTL, at the time of seeking Delivery/Entry of our Import/Export boxes. We also understand that the PDA must replenished with sufficient funds, at least one-day prior to container Delivery/Entry in terminal.
4. In case of PDA not having sufficient balance, CCTL will withhold delivery of our Import containers till such time unpaid dues are made good and all charges accruing from such delays (including but not limited to Terminal Ground rent) shall be billed to us by CCTL.
5. Similarly, in case of PDA not having sufficient balance, CCTL will not permit entry of export boxes in the terminal. All dues towards export boxes must be deposited before loading of boxes on the scheduled vessel
6. We agree and understand that the DPD boxes not cleared within stipulated time will be removed to our customs nominated CFS unless specifically requested by us for the same to be retained/stored in the terminal. All charges in this connection will be paid by us.
7. We confirm to have received and understood all required CCTL policies and that we have agreed to abide by unreservedly through this declaration.
8. We confirm that all details tendered herewith in this application are true and factual to the best of our knowledge.
9. We agree and confirm that disputes if any shall be duly addressed through legal remedies available in law under courts having jurisdiction in Chennai.

Authorized Signatory Name & :
Authorized Signatory Designation :
Date of Application :
Place from where application made :
Authorized Signatory Signature :
Company Seal

◆ **APPROVALS: - (For CCTL Use only.):**

➤ **CCTL Account Code: -** : _____

➤ **Account No. Allotted at CCTL** : _____

➤ **Approval by General Manager (Commercial)**

Sign : _____

Date : _____

➤ **Comment** : _____

➤ **Approval by General Manager (Operation)**

Sign : _____

Date : _____

➤ **Comment** : _____

➤ **Approval by General Manager (Finance)**

Sign : _____

Date : _____

➤ **Comment** : _____