



INTER-ISLAND CRUISING-PERMIT (SMALL CRAFT)

FROM: Border Control Officer

TO: Border Control Officer

1.) Name of Yacht _____ Last Port of call _____

Nationality _____ Home Port _____

ID Number _____ Net tonnage _____

Departure Date _____ Time: _____

Name of Skipper/Master: _____ Total No. Crews: _____

Type and Description of vessel of Yacht: _____

2.) Details of Master and Crew

Full Name	Date of Birth	Nationality	Passport Number

The above mention vessel has granted approval for an Inter-Island Voyage between the Port of _____ and _____ via the following islands mentioned below:

a) _____ f) _____

Vanuatu Customs Border Control and Enforcement
 Private Mail Bag 9012, Port Vila
 For all Border enquires please contact:
 Tel:(+678)23593/28757 (Vila Airport),(+678)22082 (Vila Wharf), (+678)25442 (Vila Post Office) or (+678)88058(Lenakel, Tanna)
 Email: CustomsBorder@vanuatu.gov.vu
 Website: <http://customsinlandrevenue.gov.vu>



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b) _____ g) _____

c) _____ h) _____

3.) Details of Controlled goods Carried on board during cruising in VANUATU.

- a) Animals or other livestock
- b) Plants or seeds etc
- c) Drugs (Including Controlled Medicaments)
- d) Firearms and Ammunitions
- e) Surplus Stores under Customs Seals (s)
 - Cigarettes
 - Tobacco Goods
 - Spirits
 - Beer
 - Wine

FOR OFFICERS ONLY

f) Other Information: Location and Number of sealed lockers and Details of pre – departure verification check any:

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Name of Officer: _____ Signature: _____

Date: _____ Time: _____

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Control Information upon Arrival

Date of Arrival: Time:

Expected Date of Departure:

Future Movements:

Details of Control Checks Carried out Action Taken if Any:

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Name of Officer: _____ Signature: _____

Date: _____ Time: _____