

## Request for Contractor to Enter a Maritime Security Zone

Landside Restricted Zones  Please indicate by ✓    Auckland Point Facility   Fisherman's Landing No. 5   NSS Boom Gate   Graincorp Personne	nel Gate		
Waterside Restricted Zones Location/s (Please list)  Forms must be submitted at least 2 business days prior to the date access is required to commence			
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COMPANY NAME OF EMPLOYEE GPC ID CARD MSIC NUMBER MSIC EXPIRY COM	OMMENTS		
Only persons who hold a GPC Staff or Port User identification card have permission to sign off below			
GPC ID Card Number Company			
Signature Date Email			
For Port of Gladstone please return signed form to:  Email: induction@gpcl.com.au OR Fax: 07 4976 1163  For Port of Rockhampton please return signed form to:  Email: PortAlma3@gpcl.com.au OR Fax: 07 4934 6928			
Entered By: Date: Email: PortAlmas@gpci.com.au OR Fax: 07 4976 1163  Email: PortAlmas@gpci.com.au OR Fax: 07 4934 6928  Emailed:			

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