



SAMOA PORTS AUTHORITY

P O Box 2279 • Matautu-tai • Apia • Samoa
Telephone (685) 23552, 25385, 24769 • Fax: (685) 25870

WELCOME TO THE PORT OF APIA

ARRIVAL AND DEPARTURE FORM

Name of Yacht _____ Type of Yacht: _____

Gross Tonnage _____

Name and Address of Owner/Master _____

Name of Crew(s): _____

Port of Registry: Nationality

Date of Arrival: Date of Departure:

Last Port: Next Port ETA.

Final Destination:

Remarks: _____

I certify that the above information is true and complete at _____ this

_____ day of _____