### STEVEDORE LICENSE APPLICATION PORT OF LAKE CHARLES

(ATTACH ADDITIONAL PAGES IF NECESSARY TO ANSWER ALL QUESTIONS)

# NOTICE TO APPLICANT: IF ANY OF THE INFORMATION THAT YOU PROVIDE ON THIS FORM CHANGES DURING THE TERM OF THE LICENSE, YOU MUST PROMPTLY PROVIDE THE PORT WITH THE AMENDED INFORMATION!!

SECTION ONE: IDENTITY OF APPLICANT		
A	OPERATOR NAME(APPLICANT)	
В	TAXPAYER IDENTIFICATION NUMBER (TIN)	
С	PHYSICAL AND MAILING ADDRESS	
D	CORPORATE ADDRESS (IF DIFFERENT)	
E	PHONE NUMBER OFFICE: 24 HOUR:	
F	FAX NUMBER	
G	EMAIL ADDRESS	
Н	TRADE NAME OR DBA	
_	NAME / ADDRESS OF AGENT FOR SERVICE OF PROCESS	
J	NAME OF PERSON MANAGING OPERATIONS AT POLC FACILITIES	

SECTION TWO: OWNERSHIP AND CONTROL			
А	FORM OF BUSINESS (CORPORATION, PARTNERSHIP, ETC)		
В	IF PUBLICLY HELD CORPORATION	STATE OF INCORPORATION	
С		IF SO, NAMES OF OPERATING OFFICERS	
D	IF CLOSELY HELD CORPORATION	NAMES OF PERSONS OR ENTITIES OWNING CONTROLLING INTEREST	
E		NAMES OF OFFICERS OF THE CORPORATION	
F	PARTNERSHIP OR VENTURE	NAMES OF PERSONS OWNING CONTROLLING INTEREST	
G		NAMES OF ALL OFFICERS	
Н	PROPRIETORSHIP	NAME OF PRINCIPAL	
-	IS APPLICANT RELATED TO ANY OTHER PERSON OR ENTITY CARRYING ON A STEVEDORING BUSINESS BY REASON OF OWNERSHIP, EMPLOYMENT, OR COMMON OFFICERS, DIRECTORS, OR SHAREHOLDERS?  IF YES, IDENTIFY THE PERSONS OR ENTITY THAT IS RELATED AND DESCRIBE THE NATURE OF RELATIONSHIP.		YES / NO
			CRIBE THE NATURE OF THE

SECTION THREE: FINANCIAL HISTORY		YES / NO	EXPLAIN OR LIST IF YES
А	WILL APPLICANT CONDUCT BUSINESS UNDER OTHER NAMES?		
В	WILL APPLICANT SHARE OFFICE SPACE WITH ANOTHER ENTITY?		
С	i. HAS APPLICANT EVER BEEN A PARTY IN ANY LAWSUIT/CLAIM BROUGHT BY THE U.S. GOVERNMENT OR ANY OF ITS AGENCIES, ANY STATE OR PUBLIC PORT AUTHORITY OR ANY COMMERICAL ENTITY?		
	ii. HAS APPLICANT EVER BEEN A PARTY IN ANY LAWSUIT/CLAIM BROUGHT BY THE PORT OF LAKE CHARLES? IF SO, NAME THE LITIGATION/CLAIM AND NATURE OF THE LITIGATION/CLAIM.		
	iii. HAS APPLICANT EVER BEEN DEBARRED OR DETERMINED INELIGBLE TO DO BUSINESS WITH THE U.S. GOVERNMENT OR ANY AGENCY THEREOF? IF SO, PLEASE PROVIDE DETAILS?		
D	HAS APPLICANT EVER BEEN CONVICTED OF A CRIMINAL OFFENSE OTHER THAN TRAFFIC VIOLATIONS?		
E	HAS ANY OFFICER, PARTNER, OR PRINCIPAL OF APPLICANT OR PERSON LISTED IN RESPONSE TO QUESTIONS IN SECTION TWO AND SECTION FOUR(E) BEEN CONVICTED OF A CRIMINAL OFFENSE, OTHER THAN TRAFFIC VIOLATIONS?		
F	HAS APPLICANT, OR ANY OFFICER, PARTNER, OR PRINCIPAL OF APPLICANT FILED A BANKRUPTCY PROCEEDING OTHER THAN AS A CREDITOR IN THE LAST TEN YEARS?		
G	DOES APPLICANT HAVE OTHER INFORMATION (SUCH AS INVOLVEMENT IN OTHER LITIGATION) RELEVANT TO A REVIEW OF APPLICANT'S FINANCIAL HISTORY? IF SO, APPLICANT MUST PROVIDE SUCH INFORMATION ON SEPARATE PAGES.		
Н	THE APPLICANT'S MOST RECENT AUDITED FINANCIAL STATEMENTS, BALANCE SHEET, INCOME STATEMENT, NOTE DISCLOSURES, AND OTHER DOCUMENTS WHICH ARE VERIFIABLE AND INDEPENDENTLY DEMONSTRATES ITS CREDITWORTHINESS, FINANCIAL RESPONSIBILITY, AND RESOURCES, INCLUDING CREDIT REFERENCES MUST BE ATTACHED TO THE SUBMITTED APPLICATION. AT THE APPLICANT'S EXPENSE, INDEPENDENT VERIFICATION OF FINANCIAL CONDITIONS MAY BE REQUIRED BY THE PORT.		
I	CURRENT BUSINESS REFERENCES MUST BE ATTACHED TO THE SUBMITTED APPLICATION.		

SECTI	ON FOUR: COMPETENCE
Α	NATURE OF PRESENT BUSINESS AND NEW BUSINESS THE APPLICANT WILL BRING TO THE PORT OF LAKE CHARLES.
В	DESCRIPTION OF EXPERIENCE AND SCOPE OF PRESENT OPERATIONS.
С	ARE LICENSES HELD AT ANY OTHER PORT BY APPLICANT? IF SO, WHERE?
D	HAS APPLICANT EVER BEEN REJECTED OR DENIED AS A LICENSED STEVEDORE BY ANY PUBLIC PORT ENTITY OR HAS ANY PUBLIC PORT ENTITY CANCELLED OR SUSPENDED ANY LICENSE FOR ANY PORT ACTIVITY, INCLUDING BUT NOT LIMITED TO, AGENCY, TERMINAL, OR STEVEDORING ACTIVITY? IF SO, PLEASE PROVIDE A DETAILED EXPLANATION.
E	DESCRIBE ALL CARGO HANDLING EQUIPMENT OWNED OR LEASED BY APPLICANT AND ATTACH OSHA CURRENT CERTIFICATIONS AS PROVIDED FOR BY CURRENT OSHA REGULATIONS. APPLICANT MUST ADHERE TO ALL OSHA REGULATIONS AND REQUIREMENTS IN ADDITION TO ALL GUIDELINES AND REQUIREMENTS CONTAINED IN THE PORT'S TARIFF NO. 013 OR ANY SUBSEQUENT REVISIONS OR TARIFFS.
F	PROVIDE THE NAME, EXPERIENCE, AND EMPLOYMENT HISTORY OF INDIVIDUAL WHO WILL MANAGE OPERATIONS AT POLC FACILITIES?
G	WILL STEVEDORE COMPANY EMPLOY LOCAL LABOR AND SERVICE PROVIDERS?

SECT	ION FIVE:			
	AR OR AFFIRM THAT THE INFORMATION CONTAINED IN APPLICATION IS COMPLETE AND CORRECT	Stevedore License Application is subject to Port of Lake Charles Tariff No. 013 or any subsequent revisions or Tariffs.		
		AUTHORIZED SIGNATURE		
	NOTARY PUBLIC DATE	PRINTED NAME		
		TITLE		
SECT	ION SIX: INSURANCE REQUIREMENTS			
А	EVERY HOLDER OF A STEVEDORE LICENSE SHALL MAIN FORCE AND EFFECT:	TAIN THE FOLLOWING INSURANCE CONTINUOUSLY IN		
	TYPE OF COVERAGE MINI	MUM LIMIT OF LIABILITY PER OCCURRENCE		
	*COMMERCIAL AUTO LIABILITY \$5,000,000  *COMMERCIAL GENERAL LIABILITY \$5,000,000  *STEVEDORE'S LEGAL LIABILITY \$5,000,000  *WAREHOUSEMAN'S LEGAL LIABILITY \$5,000,000  EMPLOYER'S LIABILITY \$5,000,000  *WORKERS COMPENSATION AND USL&H (as required by state law)  *Any other insurance as required by state law			
* THE COVERAGE DESIGNATED BY AN ASTERISK (*) MUST NAME THE PORT OF LAKE CHARLES AS AN ADDITIONAL NAMED INSURED, AND MUST CONTAIN A WAIVER OF SUBROGATION IN FAVOR OF THE PORT OF LAKE CHARLES.				
SECT	ION SEVEN: PAYMENT AND IRREVOCABLE LETTER OF CRE	-DIT		
* ATT * IRRI THE	ACH PAYMENT OF APPLICATION FEE	) MUST BE RECEIVED WITHIN 30 DAYS OF ACCEPTANCE BY		
POL	C USE ONLY BELOW THIS LINE			
INSL	RANCE RECEIVED & APPROVED.	DATE:		
SPE	CIAL PROVISIONS OF THIS LICENSE:			
POR	T OF LAKE CHARLES	DATE		

### STEVEDORE LICENSE APPLICATION PORT OF LAKE CHARLES

### LAKE CHARLES HARBOR AND TERMINAL DISTRICT STEVEDORE LICENSE APPLICATION

ATTACH ADDITIONAL PAGES IF NECESSARY TO ANSWER ALL QUESTIONS COMPLETELY AND HONESTLY. 1. Does Applicant have a substance abuse program in effect? 2. If so, is the substance abuse program monitored and enforced? 3. Provide the name and position of Applicant's employee in charge of the Applicant's substance abuse program. 4. Provide the full name of Applicant's employee who is responsible for applicant's safety compliance program. 5. How long has the employee listed in response to Item 4 above been in this position? 6. Provide the full name of Applicant's employee who is responsible for maintenance of Applicant's

equipment including pallets.

7. How long has the employee listed in response to Item 6 above been in this position?
8. Provide a complete description of Applicant's Safety Compliance Program.
9. Provide a complete description of Applicant's Maintenance Programs.  ———————————————————————————————————
10. Provide the number of Applicant's full time direct employees Applicant will/does employ at the Lake Charles Harbor & Terminal District.
11. Has Applicant timely paid all invoices issued by the Lake Charles Harbor and Terminal District in accordance with the Lake Charles Harbor and Terminal District's Tariff over the last five (5) years?
12. If not, provide an explanation of why any invoice issued by the Lake Charles Harbor and Termina District was not timely paid in accordance with the Lake Charles Harbor and Terminal District's Tariff.
13. Has Applicant ever been cited by OSHA for any violations while operating at the Lake Charles Harbor and Terminal District or any other Port Authority over the last five (5) years?

	e Lake Charles Harbor and Termines in the information supplied in Applic	
waterborne generated cargo ton commitment is fulfilled I Charles Harbor and Termir major factor in the consider the work will be the only	thousand (50,000) short tons consists must be worked by the permit holde by tons moving across public docks an all District. Failure to meet the min ration of any renewal of an application company credited with tonnage as ess involved in a separate commercial	r in the permitted year. The minimum and/or facilities operated by the Lake imum tonnage requirement will be a in. The company actually preforming required for renewal. Tons will be
	npany who receives a permit shall ma staffed on a full time basis. Failure permit.	
	ons of any provisions of this Steved inal District's Tariff will result in to License.	• •
	Applicant's Signature	
	Print Name	
	Company	
	Title	
	Date	