



**INTER-ISLAND CRUISING – PERMIT FOR YACHTS.**

**FROM:** \_\_\_\_\_

**To :** \_\_\_\_\_

1. Name of Yacht \_\_\_\_\_ Nationality(Yacht) \_\_\_\_\_

Last Port of Call abroad: \_\_\_\_\_

Departure Date from Port Vila: \_\_\_\_\_ Time : \_\_\_\_\_

Name of Skipper/Master: \_\_\_\_\_

Type & Description of Vessel/Yacht : \_\_\_\_\_ Reg Number : \_\_\_\_\_  
(Ketch, Sloop, Cutter, Schooner, Yawl, etc)

**2. Details of Master and Crew.**

(A Crew list is necessary if space is limited)

Full Name	Age	Nationality	Passport Number

The above-mentioned vessel has been granted approval for an inter-island Voyage between the Port of **VILA**, and \_\_\_\_\_ via the following islands mentioned below :

- a) .....e).....
- b) .....f).....
- c) .....g).....
- d) .....h).....

3. Details of Controlled goods carried on board, during Cruising the Islands of 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 Seal (s) .....
- 
- Cigarettes (Sticks) .....
  - Tobacco Goods: .....
  - Spirits: ( Litres) .....
  - Beer: (Litres) .....
  - Wine: (Litres) .....

Declaration.

I declare that the above report is true and accurate account of details of the vessel, persons and goods carried on board at the time of arrival in Vanuatu.

Made at: [ Luganville] or [ Port Vila] or [ Lenakel] or [ Sola] Date: .....

Name Skipper/Master[Print].....

Signature:.....

For Official Use Only

**Other information: Location and Number of sealed lockers and details of pre-departure verification checks if any: -**

.....  
.....  
.....

Name of Officer: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

**FOR OFFICIAL USE ONLY(Next Customs Port of entry)**

Date of Arrival: ..... Time: .....

Last port of departure abroad: :.....

Expected date of departure for foreign port: .....

Future movements or anticipated foreign port of entry:.....

**Details of Control checks carried out and action taken if any :**

.....  
.....  
.....

Name of Officer : \_\_\_\_\_ Signature : \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_