*Details of the submitter*

*(name, registration number, legal address, e-mail)*

**VSIA “Latvijas Jūras administrācija”**

Trijādības iela 5, Rīga, LV-1048

lja@lja.lv

*Document date*

Please grant access to the International Freight Logistics and Port Information System

(hereinafter - the system):

1.

|  |  |
| --- | --- |
| 1. Type of authorized user of the system | *Economic operator which provides ship supply services* |
| 2. Natural person linked to the user of the system |  |
| 2.1. given name, surname | *[..]* |
| 2.2. personal identification codeand citizenship | *[..]* |
| 2.3. official duties that require access rights | *[..]* |
| 2.4. business e-mail | *[..]* |
| 2.5. phone number | *[..]* |
| 3. Required extent of access rights | All access rights listed in Sub-paragraph 2.22 of Annex 1 of CabinetRegulation No. 92 (Adopted 11 February 2020) “Regulations Regarding theInternational Freight Logistics and Port Information System”. |
| 4. Data to be exchanged, using web services (data exchange in XML format) | *Yes/No* |
| 5. Data to be exchanged, using online electronic data processing forms | *Yes/No* |
| 6. Required login code card | *Yes/No* |

2.

|  |  |
| --- | --- |
| 1. Type of authorized user of the system | *Economic operator which provides ship supply services* |
| 2. Natural person linked to the user of the system |  |
| 2.1. given name, surname | *[..]* |
| 2.2. personal identification codeand citizenship | *[..]* |
| 2.3. official duties that require access rights | *[..]* |
| 2.4. business e-mail | *[..]* |
| 2.5. phone number | *[..]* |
| 3. Required extent of access rights | All access rights listed in Sub-paragraph 2.22 of Annex 1 of CabinetRegulation No. 92 (Adopted 11 February 2020) “Regulations Regarding theInternational Freight Logistics and Port Information System”. |
| 4. Data to be exchanged, using web services (data exchange in XML format) | *Yes/No* |
| 5. Data to be exchanged, using online electronic data processing forms | *Yes/No* |
| 6. Required login code card | *Yes/No* |

*Position, name, surname and signature of the person entitled to sign*