#### BROWNSVILLE NAVIGATION DISTRICT STEAMSHIP AGENT LICENSE APPLICATION

Pursuant to the provisions of Item 411, Brownsville Navigation District Tariff No. 6, application is hereby made for a license to operate as a Steamship Agent at the Port of Brownsville, Cameron County, Texas.

In support thereof, the following information is submitted:

Company name:
Principal business address:
Telephone:
Fax number:
Web Site Address:
Contact for services provided under this license: (Name, address, phone number, fax number, email address)
(ivame, address, phone number, fax number, eman address)
Address at which books and records are or will be maintained:
Telephone:
Fax number:
Fax number.
Form of business entity: (Proprietorship, partnership, corporation, other – please describe)
Torm of business entity. (Froprictorship, partnership, corporation, other – piease describe)
If a corporation, state of incorporation:
Names and positions of principal officers, and addresses, if different from No. 2.

#### BROWNSVILLE NAVIGATION DISTRICT STEVEDORE AND FREIGHT HANDLER'S LICENSE APPLICATION

Names and addresses of individuals and/or firms owning or having direct or indirect controlling
interest in applicant's business:
Nature of applicant's business:
Does applicant currently hold a valid license to perform the proposed service, or similar service, at
any other Port? (Please specify the service and the Port or Ports.)
Has applicant actually performed the proposed service within the past six months?
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If the answer to the previous question is "Yes", state where and for whom services performed, if the answer is "No", state reason why:

# BROWNSVILLE NAVIGATION DISTRICT STEVEDORE AND FREIGHT HANDLER'S LICENSE APPLICATION

Documents required to be attached in support of this application:

1.	<b>Brownsville Navigation District Credit Application</b>
2.	Financial Information, to include Financial Statements
3.	Listing of the applicant's officers and managers which includes experience of each in the steamship agency business. Applicant must indicate which of these officers and managers will be assigned on a permanent basis to the Port of Brownsville operations.
4.	Certificates of insurance in compliance with the Steamship Agent's Insurance requirement of the Tariff. Certificates of insurance naming the District as an additional insured must be provided before a licensee may begin operations at the Port of Brownsville.

#### APPLICATION FEE \$2,000.00

Please complete the above items, and sign the application where indicated below. Return the completed application along with all appropriate attachments, and the application fee to:

Deborah Lee Duke, Director Finance and Administration 1000 Foust Road Brownsville, TX 78521

Application fee is non-refundable and will not be pro-rated for fractional parts of a year.

#### STEAMSHIP AGENT'S LICENSE

In the event this license application is approved and a license is granted, the applicant agrees to abide by the rules and regulations of the Brownsville Navigation District and the provisions of the Port of Brownsville Tariff No. 6, changes thereto, and reissues thereof. The applicant agrees to maintain compliance with the provisions of Item under which this license is granted.

The person whose signature appears below on behalf of the applicant declares that he/she has read this application, understands its contents to be true and factual, and is authorized to sign on behalf of the applicant.

	Signed on thisday of,
	on behalf of
	(Type or print name of applicant)
	By:
	Typewritten Name:
	Title:
	he Board of Commissioners of the Brownsville Navigation District at a meeting held
tne	day of
	By:
	Typewritten Name:
	Title:

This application will be reviewed by the staff of the Brownsville Navigation District. Applications that are found to comply with the requirements of the Port of Brownsville Tariff No. 6, Item 411, Stevedore and Freight Handler's License, will be presented to the Board of Commissioners during open session of a meeting of the Board for their consideration and action. The applicant and any other persons interested in the application shall have the right to address the Board at the meeting at which this application is considered.

## STEAMSHIP AGENT'S INSURANCE REQUIREMENTS

All Steamship Agent licensees shall provide and maintain minimum insurance coverage as follows:

All policies shall name the District as an additional insured, with the provision that such coverage will not extend to actions resulting from the Port's own sole negligence and all policies shall include a waiver of subrogation in favor of the District on all coverages. The policy or policies shall contain a clause that the insurer will not cancel or change the policy or policies without first giving the District sixty (60) days prior written notice.

Workmen's Compensation	Limits
a. Employer's Liability	\$1,000,000.00
b. Longshoremen and Harborworker's Act	Statutory
c. Jones Act	\$1,000,000.00

Comprehensive General Liability	Limits	
Comprehensive General Liability including Broad Form Liab	bility, Personal Injury Liability, Contractual	
Liability, Products/Completed Operations Liability and including coverage for explosion, collapse and		
underground, and for goods, vessels, and property of whatever description belonging to others while in the		
care, custody and control of the Licensee.		
a. Bodily Injury	\$4,000,000.00 each occurrence	
b. Property Damage	\$4,000,000.00 each aggregate	
c. Combined Single Limit	\$4,000,000.00 comb. single limit	

Comprehensive Automobile Liability	Limits	
a. Bodily Injury	\$1,000,000.00 each person	
	\$1,000,000.00 each occurrence	
b. Property Damage	\$1,000,000.00 each occurrence	
c. Combined Single Limit	\$1,000,000.00 Comb. single limit	
Automobi	ile Coverage to include:	
All owned vehicles		
All 1	non-owned vehicles	
All	hired vehicles	

Coverage on Licensee's Vessels	Limits
Protection and Indemnity – including crew	Value of vessel or \$1,000,000.00 limit
	(whichever is greater)

Pollution Insurance	Limits
Pollution Liability	\$1,000,000.00 each occurrence
	\$1,000,000.00 each aggregate

The above minimum requirements may be covered exclusively by primary insurance or may be covered by a combination of primary and umbrella liability insurance. Each insurance policy shall have a combined deductible and/or self-insurance retention of no more than \$50,000.00.

Certificates of insurance shall be furnished to the District.

# **Brownsville Navigation District Financial Information Required in Support of Application**

(Please attach your responses on a separate sheet.)

#### **CORPORATIONS (ESTABLISHED)**

- 1. Provide the full and official corporate name and the address and phone number of the corporate headquarters.
- 2. State where the corporation is chartered.
- 3. List any related companies and indicate their relationship to this corporation, identify the address of the corporate headquarters, their phone number, state of incorporation and the name and contact information of an officer of the company.
- 4. Provide an interim financial statement for the current year.
- 5. Provide the most recent financial statement (Balance Sheet and Profit and Loss Statements) for the most recent two complete years.
- 6. List the principals of the corporations, their position with the corporation, their address and phone number.
- 7. List bank references, including bank account numbers and the officers who handle the accounts. Provide reference letters from the banks to the District.
- 8. Provide six trade references from whom purchases have been made within the past 60 days.
- 9. Provide the corporation's Federal Identification Number and Dun and Bradstreet number.

#### **CORPORATIONS (NEWLY FORMED)**

- 1. Provide the full and official corporate name and the address and phone number of the corporate headquarters.
- 2. State where the corporation is chartered.
- 3. List any related companies and indicate their relationship to this corporation, identify the address of the corporate headquarters, their phone number, state of incorporation and the name and contact information of an officer of the company.
- 4. Provide an interim financial statement for the current year, if possible. If no financials are available, please provide a copy of the most recent bank statement(s) for the corporation.
- 5. List the principals of the corporations, their position with the corporation, their address and phone number.
- 6. List bank references, including bank account numbers and the officers who handle the accounts. Provide reference letters from the banks to the District.
- 7. Provide the corporation's Federal Identification Number and Dun and Bradstreet number.
- 8. Provide the most recent financial statement (Balance Sheet and Profit and Loss Statements) for the most recent two complete years for the principals of the corporation.
- 9. List bank references for the principals of the corporation, including bank account numbers and the officers who handle the accounts. Provide reference letters from the banks to the District.
- 10. Provide six trade references from whom purchases have been made by the principals within the past 60 days.

## Brownsville Navigation District Financial Information Required in Support of Application

#### INDIVIDUALS AND PARNERSHIPS

- 1. List the full name of the individual, his address and phone number, or list the partners, their position with the corporation, their addresses and phone numbers.
- 2. Provide the full and official business name or d/b/a, and the address and phone number of the billing office. State where the d/b/a papers have been filed.
- 3. List any related companies and indicate their relationship to this individual or partnership, identify the address of the corporate headquarters, their phone number, state of incorporation and the name and contact information of an officer of the company.
- 4. Provide an interim financial statement for the current year, if possible. If no financials are available, please provide a copy of the most recent bank statement(s) for the individual or the partners.
- 5. Provide the most recent financial statement (Balance Sheet and Profit and Loss Statements) for the most recent two complete years for the individual or the partners.
- 6. List bank references for the individual or the partnership, including bank account numbers and the names of the officers who handle the accounts. Provide reference letters from the banks to the District.
- 7. Provide the individual's or the partners' Federal Identification Number(s) and Dun and Bradstreet number(s).
- 8. Provide six trade references from whom business-related purchases have been made by the individual or the partners within the past 60 days.

FINANCIAL STATEMENTS MUST BE SIGNED BY AN AUTHORIZED OFFICIAL

## Brownsville Navigation District 1000 Foust Road

Brownsville, TX 78521 (956) 831-4592 fax (956) 831-5106

### CREDIT APPLICATION

Applicant's Trade Name		Phone (	)
		Fax (	)
Mailing Address		Taxpayer ID Number	
		Company Web Site	
		Otto	
Business Style: Proprietorship Corporation	Partnership	Other	
Owners or Principal Officers			
Name	Title	Home Address	Cell/Home Phone
	-	<del></del>	
Business Established At Present Locatio	n Since	Under Present Ownership Since	
Banking Information			
Bank and Branch		Account Number	
Address			
Bank Officer			
Trade References: Name, Complete Address	and Phone Number		
1.			
2.			
3.			
4.			
5.			

# Brownsville Navigation District C R E D I T A P P L I C A T I O N

Manager's Information				
Name	Title	Home Address	Home Phone	
Billing Information				
Billing Address	Billing Contact	eMail Address	Direct Phone	
Terms and Conditions of this App	lication			
for the purchase of goods and/or s are due and payable within thirty ( ground lease contract which cont	it application for an open account with the services. It is further understood that all in 30) days from the due date of the invoice, ain their own terms. Any and all invoice shall be subject to a finance charge under the	nvoices and purchases under thi with the exception of invoices is sees, or portions thereof, that re	s credit plan sued under a main unpaid	
Applicant's Signature and Authoriz	Applicant's Signature and Authorization for Release of Information			
I have read and understand the above and agree to its terms and conditions. I hereby authorize my bank and my trade references to release to the Brownsville Navigation District that information requested by the District in order to grant credit under this application.			t	
Signature of Owner or Principal Officer	<sup>1</sup> T	iitle		
Authorized Purchasing Agents				
The following persons are authorized to purchase ser	vices and charge said services to this account.			
1.				
2.				
3.				
4.				
5.				

All information must be provided and this form must be signed and returned to the Brownsville Navigation District before credit may be granted.

### **Current Financial Statements must be submitted with this application**

Credit Approved By	Account Number Assigned:
Date:	Credit Limit Assigned: