BROWNSVILLE NAVIGATION DISTRICT HARBOR TUG OPERATOR'S LICENSE APPLICATION

Pursuant to the provisions of Item 401, Brownsville Navigation District Tariff No. 6, application is hereby made for a license to operate as a Harbor Tug Operator 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)
Address at which books and records are or will be maintained:
Telephone:
Fax number:
Form of business entity: (Proprietorship, partnership, corporation, other – please describe)
If a corporation, state of incorporation:
Names and positions of principal officers, and addresses, if different from No. 2.

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Names and addresses of individuals and/or firms owning or having direct or indirect controlling interest in applicant's business:
interest in applicant's business:
Nature of applicant's business:
Describe equipment and facilities available to applicant for a carrying on the proposed licensed
operation:
Are equipment and facilities owned by the applicant? If not, describe arrangements under which they
are available to applicant:
Description of the late of the
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.)
any other rotes (rease speeny the service and the rote of rotes)
Has applicant actually performed the proposed service within the past six months?
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 HARBOR TUG OPERATOR'S LICENSE APPLICATION

Documents required to be attached in support of this application: ____ 1. **Brownsville Navigation District Credit Application** 2. Financial Information, to include Financial Statements 3. Harbor Tug Operator Acknowledgement Form 4. Brownsville Navigation District Lease Application, with a memorandum from the District's Real Estate Department that a suitable lease site to handle the applicant's need for storage and maintenance of their equipment, including docking space for their tugs, has been located. ___ 5. Listing of the applicant's officers and managers which include experience of each in the harbor tug industry. Applicant must indicate which of these officers and managers will be assigned on a permanent basis to the Port of Brownsville operations. Documentation of certification by and good standing with the American Society for __ 6. Ouality Control under the current applicable ISO and/or ANSI/ASO standards promulgated by the International Organization Standardization and/or the American National Standards Institute. Documentation of certification by and good standing with the International Safety 7. Management System (ISM). Documentation of U. S. Coast Guard approval of a plan addressing the provisions of the 8. **Marine Transportation Security Act.** 9. Specifications of the fire fighting capability of no less than one of the tugs to be permanently assigned to the Port of Brownsville. A listing of the tugs to be assigned to the Port of Brownsville, with the technical 10. specifications of each, in particular the type of drive and the power rating. 11. Certificates of insurance in compliance with the Harbor Tug Operator'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. 12. A copy of the Captain's License for each captain that will be operating a tug boat in the Port of Brownsville. Current licenses must be maintained on file with the Port of Brownsville. A preliminary tariff of charges to be implemented for the licensed services in the Port of Brownsville. The licensee's final tariff must be submitted to the Board of Commissioners

APPLICATION FEE \$2,000.00

before a licensee may begin operations at the Port of Brownsville.

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:

Antonio "Tony" Rodriguez
Director of Cargo Services - Overweight Permit/FTZ Administrator
1801 Foust Road
Brownsville, TX 78521

HARBOR TUG OPERATOR'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 this	day of	
	on behalf of	(Type or print name of applicant)	
	By:		
	Printed Name: _	-	
	Title:	-	
		of the Brownsville Navigation District at a meeting held of	n
tile	day of	•	
	Ву:		
	Printed Name: _		
	Title: Chairman o	f the Board of Commissioners	

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 401, Harbor Tug Operator'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 renewal application is considered.

HARBOR TUG OPERATOR INSURANCE REQUIREMENTS

All Harbor Tug Operators 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 Fo	orm Liability, Personal Injury Liability, Contractual
Liability, Products/Completed Operations Liability a	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
Automobile Co	verage to include:
All own	ed vehicles
All 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.

Harbor Tug Operator Acknowledgment Form

I	, on
(Print Name)	(Title)
behalf of(Company)	, hereby acknowledge tha
	will remain in good standing with the
(Company)	
Brownsville Navigation District (D	istrict) by complying with the rules and regulations of the
District and the provisions of the Dis	strict's tariff and any subsequent revisions or reissues thereof
by meeting the appropriate insurance	requirements of the District, by maintaining credit worthiness
with the District, by maintaining ade	equate equipment and by maintaining a lease site adequate for
their needs.	
I understand that failure to maintain the Harbor Tug Operator License iss	compliance with the requirements set out within the license ued to may be suspended and/or (Company)
revoked.	(Company)
201010	
Signature	Date
T:41.	_
Title	

Brownsville Navigation District 1000 Foust Road

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	
Business Style: Proprietorship Corporation	Partnership	Other]
Owners or Principal Officers			
Nam e	Title	Home Address	Cell/Home Phone

		3	
	9	***	
Business Established At Present Location	on Since	Under Present Ownership Since	<u></u>
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 Application			
It is understood that this is a credit applic for the purchase of goods and/or services. are due and payable within thirty (30) days ground lease contract which contain their beyond the due date of the invoice shall Brownsville Tariff.	It is further understood that all if from the due date of the invoice, own terms. Any and all invoice	nvoices and purchases under this with the exception of invoices issues, or portions thereof, that rem	credit plan ned under a nain unpaid
Applicant's Signature and Authorization f	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.			
Signature of Owner or Principal Officer	Т	Title	
Authorized Purchasing Agents			
The following persons are authorized to purchase services and o	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:

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