

AUTORIDAD DEL CANAL DE PANAMÁ
TRANSIT BOOKING AND/OR DAYLIGHT CANCELLATION
 (Complete on typewriter or legibly printed)

SECTION A. (To be completed by Vessel Agent)

1. Vessel Name	2. Vessel Agent	STAMP DATE AND TIME CANCELLATION RECEIVED
3. Booked Date (Check one box and show month, day and year) <input type="checkbox"/> North <input type="checkbox"/> South Date _ _ _ _ _	4. S.I.N.	
5. Cancellation <input type="checkbox"/> Transit Booking <input type="checkbox"/> Daylight Transit		
6. I understand that there is a cancellation charge in accordance with the schedule below. I hereby agree to such charges under the terms and conditions of the Panama Canal Vessel Transit Reservation System, and authorize payment of the same.		

Authorized Vessel Agency Representative's Name

Signature

SECTION B. (To be completed by the Autoridad del Canal de Panamá)

CANCELLATION of Transit Booking or Daylight Transit	Transit Booking Cancellation Fee	Best Offer <input type="checkbox"/>	Daylight Transit Cancellation Fee
Cancellation requested _ _ _ _ _ days prior to required arrival time. _ _ _ _ _ hours	\$ _ _ _ _ _		\$ _ _ _ _ _

Approved by: -----
 (Panama Canal Authority Representative)