

## ICTSI VISITOR'S FORM

### **I. DETAILS *(To be filled out by requesting party)***

1. Name of Requestor:
2. Company Name:
3. Agenda of visit:
4. Date of visit :
5. Time of visit (choose preferred time)
 

☐ 0900H – 1000H  
☐ 1030H – 1130H

### **Details of Visitor/s: Maximum of 15 guests**

Name	Designation	Contact Number/Email Address
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____
11. _____	_____	_____
12. _____	_____	_____
13. _____	_____	_____
14. _____	_____	_____
15. _____	_____	_____

### **Vehicle Details**

Type/Model:

Color:

Plate Number:

### **II. SECURITY/HEALTH, SAFETY & ENVIRONMENT (HSE) REGULATIONS**

1. Security verifications will be conducted at rendezvous points (Administration Building Lobby or Reception Area at the Engineering Gate).
2. Present the ICTSI Visitor's Form to the Security Guard upon entry.
3. Only those listed on the visitor's form will be allowed to join the Port visit/tour unless a new form is filled out and submitted prior to the scheduled tour.
4. ICTSI Security reserves the right to determine the parking area, search the vehicle and adapt all other security responses as deemed necessary.
5. Nobody under the influence of liquor and/or drugs will be permitted to join the Port visit/tour.
6. Visitor's own vehicle escorts are not allowed inside the terminal during Port visit/tour.
7. Firearms and/or other deadly weapons shall be handed over to Security prior to entry of the premises.
8. In case of delays to arrival or any changes on the requested tour, the Tour Coordinator must be officially advised at least an hour before the scheduled tour.
9. Personal Protective Equipment (PPE), i.e. reflective vests & safety helmets, shall be provided by ICTSI for the visitors and must be worn inside the terminal.
10. ICTSI, through the advice of the HSE Department, reserves the right to cancel the Port visit/tour in case of contingencies.

### **III. CERTIFICATION** *(To be signed by the Requesting Party)*

**THIS IS TO CERTIFY THAT THE REQUESTING PARTY IS DULY INFORMED OF THE ABOVE-CITED REGULATIONS AND HAS SIGNIFIED HIS/HER COMMITMENT OF ADHERANCE BY AFFIXING HIS/HER SIGNATURE BELOW.**

\_\_\_\_\_  
**Signature above Printed Name**

### **IV. APPROVAL AND ACKNOWLEDGMENT** *(To be signed by Concerned Departments)*

**1. Approved by:**

**a) CRM Department:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**2. Activity acknowledged by:**

**a) HSE Department:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**b) Security Department:** \_\_\_\_\_ **Date :** \_\_\_\_\_