ACP 4633
Rev. 2-2008

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	
3. Booked Date (Check one box and show month, day and year) ☐ North ☐ South Date	4. S.I.N.	**STAMP DATE AND TIME CANCELLATION RECEIVED**

5. Cancellation

☐ Transit Booking

☐ 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	Daylight Transit Cancellation Fee
Cancellation requested ..... days ..... hours prior to required arrival time.	$	☐	$ .....

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