**SOLICITUD DE PERMISO DE SOBREVUELO Y/O ATERRIZAJE EN TERRITORIO HONDUREÑO**

**FORMA SDN 001**

FECHA DE SOLICITUD: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SOLICITADO POR (PAIS, ORGANISMO

INTERNACIONAL): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FECHA DE SOBREVUELO Y/O ATERRIZAJE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SOBREVUELO SIN ATERRIZAJE: SOBREVUELO CON ATERRIZAJE:

**DESCRIPCION DE LA AERONAVE**

AERONAVE TIPO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MATRICULA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DISTINTIVO DE LLAMADA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MODELO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SERIE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MISION DE SOBREVUELO: \_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**AERONAVE ALTERNA**

AERONAVE TIPO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MATRICULA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DISTINTIVO DE LLAMADA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MODELO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SERIE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MISION DE SOBREVUELO: \_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TRIPULACIÓN**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **No.** | **NOMBRE** | **PASAPORTE No.** | **CARGO** | **PRINCIPAL / ALTERNA** |
| 01. |  |  |  |  |
| 02. |  |  |  |  |
| 03. |  |  |  |  |
| 04. |  |  |  |  |
| 05. |  |  |  |  |
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| 13. |  |  |  |  |
| 14. |  |  |  |  |
| 15. |  |  |  |  |

**REQUERIMIENTOS ESPECIALES PARA AERONAVES MILITARES:**

|  |  |  |  |
| --- | --- | --- | --- |
| **1** | LA AERONAVE VIAJA ARTILLADA:  **SI** **NO** | **6** | LA AERONAVE ES DE GUERRA  **SI** **NO** |
| **2** | TRANSPORTA TROPA  **SI** **NO** | **7** | POSEE EQUIPAMENTO PARA REALIZAR ACCIONES OFENSIVAS O DEFENSIVAS  **SI** **NO** |
| **3** | POSEE ARMAMENTO REACTIVO  **SI** **NO** | **8** | AERONAVE POSEE DISPOSITIVOS ELECTRONICOS QUE PUEDAN INTERFERIR EN SEÑALES DE RADIO  **SI** **NO** |
| **4** | LA AERONAVE POSEE EQUIPO FOTOGRAFICO  **SI** **NO** | **9** | POSEE DISPOSITIVOS ELECTRONICOS QUE PUEDAN INTERFERIR SEÑALES DE RADIO YA SEA QUE ESTAS SE USEN PARA LA COMUNICACIÓN O PARA LA DETECCION (RADAR)  **SI** **NO** |
| **5** | LA AERONAVE LLEVA MERCANCIA PELIGROSA  **SI** **NO** | **10** | LA AERONAVE LLEVA EQUIPAMENTO DE VIGILANCIA  **SI** **NO** |

OTROS (Especifique):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **NOMBRE DEL SOLICITANTE** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **FIRMA, CARGO Y SELLO DEL SOLICITANTE** |

|  |
| --- |
| **Observaciones:**   * En el formulario de solicitud deberá adjuntarse el plan de vuelo asi como copias/imágenes del pasaporte de los miembros de la tripulación. * Este formulario de solicitud es para aeronaves militares, en el caso de aeronaves civiles deberá presentar formulario de solicitud SDN 002 |

**SOLICITUD DE PERMISO DE SOBREVUELO Y/O ATERRIZAJE EN TERRITORIO HONDUREÑO.**

**FORMA SDN 002**

FECHA DE SOLICITUD: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SOLICITADO POR (PAIS, ORGANISMO

INTERNACIONAL): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FECHA DE SOBREVUELO Y/O ATERRIZAJE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SOBREVUELO SIN ATERRIZAJE: SOBREVUELO CON ATERRIZAJE:

NÚMERO DE PASAJEROS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DESCRIPCION DE LA AERONAVE**

AERONAVE TIPO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MATRICULA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DISTINTIVO DE LLAMADA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MODELO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SERIE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MISION DE SOBREVUELO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**AERONAVE ALTERNA**

AERONAVE TIPO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MATRICULA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DISTINTIVO DE LLAMADA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MODELO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SERIE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MISION DE SOBREVUELO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TRIPULACIÓN**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **No.** | **NOMBRE** | **PASAPORTE No.** | **CARGO** | **PRINCIPAL / ALTERNA** |
| 01. |  |  |  |  |
| 02. |  |  |  |  |
| 03. |  |  |  |  |
| 04. |  |  |  |  |
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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **NOMBRE DEL SOLICITANTE** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **FIRMA, CARGO Y SELLO DEL SOLICITANTE** |

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| **Observaciones:**   * En el formulario de solicitud deberá adjuntarse el plan de vuelo asi como copias/imágenes del pasaporte de los miembros de la tripulación. * Este formulario de solicitud es para aeronaves militares, en el caso de aeronaves civiles deberá presentar formulario de solicitud SDN 002 |

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| **FORMATO DE SOLICITUD DE BUQUES MILITARES Y OTROS BUQUES DE ESTADO DESTINADOS A FINES NO COMERCIALES INGRESANDO A AGUAS INTERIORES/PUERTO DE HONDURAS**  **FORMA SDN 003** |

**FECHA DE SOLICITUD:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PAIS SOLICITANTE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ENTIDAD SOLICITANTE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FECHA PREVISTA DE INGRESO**

**A AGUAS INTERIORES/PUERTO DE HONDURAS:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DESCRIPCION DE INGRESO**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Tipo de Buque:** |  | | | | | | |
| **Dimensiones** | Eslora: | Manga: | | | Puntal: | | Calado: |
| **Matricula Oficial:** |  | | | | | | |
| **Indicativo de Llamada:** |  | | | | | | |
| **Tipos de Visita** | Oficial | | No Oficial | | | Operacional | |
| **Descripcion de**  **la Visita:** |  | | | | | | |
| **Tiempo de Estadía:** |  | | | | | | |
| **Puerto de Procedencia/ Puerto de escala anterior:** |  | | | | | | |
| **Puerto de Arribo/Instalación**  **Pública o Terminal Concesionada:** |  | | | | | | |
| **Capitan al Mando:** |  | | | | | | |
| **Número de Tripulantes:** |  | | | **Número de**  **Pasajeros:** | | | |
| **Contacto de Emergencia:** |  | | | | | | |
| **Telefono:** |  | | | | | | |
| **Email:** |  | | | | | | |
| **Agencia Naviera (Si Aplica):** |  | | | | | | |

**SI EL BUQUE INGRESA A PUERTO:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Ejercicios Coincidentes con Autoridades Hondureñas | | **SI** |  | **NO** |  |
| Si la respuesta es **SI**,  especificar Area Geografica: |  | | | | |
| Desembarco de Tripulantes | | **SI** |  | **NO** |  |
| Desembarco de Equipo | | **SI** |  | **NO** |  |
| Buque Artillado | | **SI** |  | **NO** |  |
| Declaracion Sanitaria Adjunta | | **SI** |  | **NO** |  |

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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **NOMBRE DEL SOLICITANTE** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **FIRMA, CARGO Y SELLO DEL SOLICITANTE** |

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| **Observaciones:**   * Mantener el sistema de Identificación Automatica (SIA) encendido mientras el buque se encuentre en aguas hondureñas. * En caso de desembarco de la tripulación deberá cumplir con los requisitos sanitarios, migratorios, aduaneros y otros establecidos en el país. * Contacto con el enlace de la Secretaría de Estado en el Despacho de Relaciones Exteriores y Cooperacion Internacional (Dirección General de Protocolo y Ceremonial Diplomatico de Estado) Email: direcciongeneralprotocolo@sreci.gob.hn; Tel: (+504) 2236-0200, (+504) 2236-0300. * El presente formato no es aplicable a los buques dedicados al Comercio Internacional.   **El proceso de ingreso se realizará en conformidad a las disposiciones del Convenio de las Naciones Unidas Sobre el Derecho del Mar (CONVEMAR 1982) y normativa nacional pertinente** |

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| **REQUEST FORM FOR MILITARY VESSELS ENTERING INLAND WATERS / PORTS OF HONDURAS**  **FORM SDN 003** |

**DATE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**APPLICANT COUNTRY:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**APPLICANT ORGANIZATION:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EXPECTED ENTRY DATE INTO**

**INLAND WATERS/PORT OF HONDURAS:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ENTRY DESCRIPTION**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Vessel type:** |  | | | | | | |
| **Dimensions:** | Lenght: | Breadth: | | | Depth: | | Draught: |
| **Official Registration:** |  | | | | | | |
| **Call Sign:** |  | | | | | | |
| **Mission to be carried out in the country:** | Official | | Unofficial | | | Operational | |
| **Visit description:** |  | | | | | | |
| **Length of Stay:** |  | | | | | | |
| **Port of origin / Previous Port:** |  | | | | | | |
| **Port of Arrival/Public Facility or Concessioned Terminal:** |  | | | | | | |
| **Commanding Captain:** |  | | | | | | |
| **Crew number:** |  | | | **Passanger**  **number:** | | | |
| **Emergency Contact:** |  | | | | | | |
| **Phone number:** |  | | | | | | |
| **Email:** |  | | | | | | |
| **Shipping Agency (if applicable):** |  | | | | | | |

**IF THE VESSEL ENTERS PORT**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Ejercicios Coincidentes con Autoridades Hondureñas | | **YES** |  | **NO** |  |
| If the answer is **YES**,  Specify geografic location: |  | | | | |
| Disembarking of Crew Members: | | **YES** |  | **NO** |  |
| Disembarking of Equipment: | | **YES** |  | **NO** |  |
| Artillery Vessel: | | **YES** |  | **NO** |  |
| Maritime Declaration of Health attached: | | **YES** |  | **NO** |  |

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **REQUESTING PARTY´S NAME** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **SIGNATURE, POSITION AND SEAL OF APPLICANT** |

|  |
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| **Observations:**   * Keep the Automatic Identificacion System (AIS) Turned On while vessel is in Honduran waters. * In case of disembarking, crew must follow the Ministry of Health’s guidelines regarding SARS Covid19 testing. * The Maritime Authority of Honduras 24/7 contact: Maritime Information Center; email: cim@marinamercante.gob.hn; Tel: (+504) 2239-8363, (+504) 8820-8428. * This form is applicable only to military ships. International commercial ships shall adhere to the Convention on Facilitation of International Maritime Traffic, 1965, as amended (FAL65)   **The entry process will be carried out in accordance with the provisions of the United Nations Convention of the Law of the Sea (UNCLOS 1982) and relevant national regulation.** |

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| **FORMATO DE SOLICITUD DE BUQUES MILITARES Y OTROS DESTINADOS A FINES NO COMERCIALES EN PASO POR MAR TERRITORIAL DE HONDURAS**  **FORMA SDN 004** |

**FECHA DE SOLICITUD:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PAIS SOLICITANTE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ENTIDAD SOLICITANTE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FECHA PREVISTA DE PASO:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DESCRIPCION DE INGRESO**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Tipo de Buque:** |  | | | | |
| **Dimensiones** | Eslora: | Manga: | | Puntal: | Calado: |
| **Matricula Oficial:** |  | | | | |
| **Indicativo de Llamada:** |  | | | | |
| **Puerto de Procedencia/ Puerto de escala anterior:** |  | | | | |
| **Puerto de Arribo:** |  | | | | |
| **Capitan al Mando:** |  | | | | |
| **Número de Tripulantes:** |  | | **Número de**  **Pasajeros:** | | |
| **Contacto de Emergencia:** |  | | | | |
| **Telefono:** |  | | | | |
| **Email:** |  | | | | |

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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **NOMBRE DEL SOLICITANTE** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **FIRMA, CARGO Y SELLO DEL SOLICITANTE** |

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| **Observaciones:**   * Mantener el sistema de Identificación Automatica (SIA) encendido mientras el buque se encuentre en aguas hondureñas. * Contacto con el enlace de la Secretaría de Estado en el Despacho de Relaciones Exteriores y Cooperacion Internacional (Dirección General de Protocolo y Ceremonial Diplomatico de Estado) Email: direcciongeneralprotocolo@sreci.gob.hn; Tel: (+504) 2236-0200, (+504) 2236-0300. * El presente formato no es aplicable a los buques dedicados al Comercio Internacional.   **El proceso de ingreso se realizará en conformidad a las disposiciones del Convenio de las Naciones Unidas Sobre el Derecho del Mar (CONVEMAR 1982) y normativa nacional pertinente.** |

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| **REQUEST FORM FOR MILITARY VESSELS OR NON COMMERCIAL VESSELS PASSING THROUGH HONDURAN TERRITORIAL SEA**  **FORM SDN 004** |

**DATE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**APPLICANT COUNTRY:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**APPLICANT ORGANIZATION:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EXPECTED ENTRY DATE INTO**

**INLAND WATERS/PORT OF HONDURAS:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ENTRY DESCRIPTION**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Vessel type:** |  | | | | |
| **Dimensions:** | Lenght: | Breadth: | | Depth: | Draught: |
| **Official Registration:** |  | | | | |
| **Call Sign:** |  | | | | |
| **Port of origin / Previous port:** |  | | | | |
| **Port of Arrival:** |  | | | | |
| **Commanding Captain:** |  | | | | |
| **Crew number:** |  | | **Passanger**  **number:** | | |
| **Emergency Contact:** |  | | | | |
| **Phone number:** |  | | | | |
| **Email:** |  | | | | |

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| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **REQUESTING PARTY´S NAME** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **SIGNATURE, POSITION AND SEAL OF APPLICANT** |

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| --- |
| **Observations:**   * Keep the Automatic Identificacion System (AIS) Turned On while vessel is in Honduran waters. * The Maritime Authority of Honduras 24/7 contact: Maritime Information Center; email: cim@marinamercante.gob.hn; Tel: (+504) 2239-8363, (+504) 8820-8428. * This form is applicable only to military ships. International commercial ships shall adhere to the Convention on Facilitation of International Maritime Traffic, 1965, as amended (FAL65)   **The entry process will be carried out in accordance with the provisions of the United Nations Convention of the Law of the Sea (UNCLOS 1982) and relevant national regulation.** |