Department of Planning & Development
Ports, Customs & Free Zone Corporation
Government of Dubai



PORTACABIN/ CONTAINER INSPECTION REQUEST FORM		
Company Details & Contact Person :		
Tel., mobile & Fax Nos. :		
E-mail : Signature & Stamp/ Seal And Date of Request:		
Location/plot No.		
REQUEST DETAILS (Tick)	: Container Inspection Request	□ Port-Cabin Inspection Request
Dear Sirs, I hereby request inspection of the requested units at my premises as stated above. I have paid the inspection fees (receipt attached) and acknowledge that the safety, integrity and stability of the unit(s) are my sole responsibility,		
Signed & Stamp		
FOR EHS INTERNAL USE ONLY		
EHS Inspection Schedule/D	ate :	
EHS Inspection Comments	:	
PERMIT EXPIRY (EHS Use with stamp):		
2) Any request for extension of Permi Tariff/Terms/Conditions 3) Portacabin / container construction	abin shall be temporarily permitted only for 12 months fro t shall be submitted at least 10 days in advance of Permit n material shall be of minimum 30 minutes fire rating with d drawing and the location should not be changed.	Expiry and shall be as per EHS
Our Contact Nos :	Mr. Nino Valencia, Sr EHS Officer, Tel: 04-8068815; E	Email: Nino.Valencia@Trakhees.ae
	Mr. Ronald Martin, Sr. EHS Officer, Tel: 04-8068816; E	

إدارة البيئة والصحبة والسبلامية

Mr. Anwar Hussain Sait, EHS Officer, Tel: 04-4047481 for DMC Permits