



PANAMA MARITIME AUTHORITY  
DIRECTORATE GENERAL OF PORTS AND MARITIME ANCILLARY INDUSTRIES  
CONCESSIONS DEPARTMENT

F-16  
(DMA)  
V.06



REQUIREMENTS FOR APPLYING FOR AN OPERATION'S LICENCE

**SERVICE: MEDICAL ON BOARD VESSELS**

**CLUSTER: SAFETY AND HYGIENE**

**DESCRIPTION:** Medical care offered to crew members or passengers on vessels in jurisdictional waters.

**PROCEDURE PROCESS:** Notarized Special Power of Attorney, formal application and all other documents as requested, shall be filed with the Directorate General of Ports and Maritime Ancillary Industries, Concessions Department, located at the headquarters of the Panama Maritime Authority, Diablo Heights, Demetrio Porras Street.

**APPLICATION MUST BE FILED WITH THE FOLLOWING DOCUMENTS:**

**Note:** In case of being a natural person, the application may be submitted by the applicant itself, and if it is a legal entity, it will be presented by a suitable attorney.

1. Notarized Special Power of Attorney, which shall include: telephone number, address, and e-mail of holder of the Power of Attorney. Same must be signed by grantor of Power of Attorney and by holder of Power of Attorney, in compliance with requirements set forth under the Judicial Code of the Republic of Panama (Section 627).
2. Memorial addressed to the General Director of Ports and Auxiliary Maritime Industries (Article 9 of the Resolution No. 011-2019 issued by the Board of Directors of the Panama Maritime Authority) requesting the Operation License and containing the following information:
  - General Data:
    - ✓ General Data of authorized representative: full name, I.D. card number, address, telephone numbers, P.O. Box, and e-mail.
    - ✓ General Data of company: Company name, address, telephone numbers, provide the R.U.C. number duly registered at the Directorate General of Internal Revenue, P.O. Box, and e-mail.

Authorization: 

Date: 

CONCESSIONS DEPARTMENT

Balboa, Ancón. Diablo Heights, Bldg. N°3. P.O. Box 0843-00533, Phone 501-5122.

- Purpose of the operation's license.
- Description of all activities to be carried out.
- Detail of all maritime and port areas where the service is to be rendered.
- Value of the investment which interested party is engaging in or intends to engage in.

3. Simple copy of I.D. Card or passport of authorized representative and of holder of Special Power of Attorney.
4. Original and current certificate issued by the Office of the Recorder of Deeds, which shows the following: authorized representative, directors, officers, and corporate authorized capital stock.
5. Copy of commercial license issued by the Ministry of Commerce and Industries (MICI).
6. Certificate issued by the Social Security, certifying that employer is registered in the system.
7. List of medical doctors who shall render the medical service on board.
8. Original and copy of Degree of Medical Doctor of all medical doctors who shall render the medical service on board.
9. Original and copy of Suitability issued by the Ministry of Health of Panama, in order to work as a medical doctor in the Republic of Panama, of all medical doctors who shall render the medical service on board.
10. Name, professional registration number, and specialty, as appropriate, of the medical director and of all medical doctors who shall render the medical service on board.
11. Original and copy of performance of all medical doctors who shall render the medical service on board.
12. Copy of updated ACLS (Basic Vital Support) license of all medical doctors who shall render the medical service on board.
13. Copy of updated ACLS (Advanced Vital Support) license of all medical doctors who shall render the medical service on board.
14. Certificate of good health, issued by the Suitable General Doctor, Office of the Social Security, of all medical doctors who shall render the medical service on board.
15. Certificate of good mental health, issued by the Suitable Medical Psychiatrist, Office of the Social Security, of all medical doctors who shall render the medical service on board.
16. Original and copy of each health registration for each medication, backed by the Ministry of Health.

Authorization: 

Date: 11/6/19

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• **IMPORTANT NOTICE:**

- The Company shall also file a compliance bond and a civil responsibility insurance, in compliance with Resolution No. 011-2019 issued by the Board of Directors of the Panama Maritime Authority.
- The Company shall have a physical location duly marked and identified where its office headquarters are located. (Same may not be a family residence).
- We make it of record to applicant of the operation's license that for this maritime ancillary service the medical doctor must be a Panamanian citizen and comply with all of the above.
- Medical doctor shall wear updated ACLS (Basic Vital Support) license while rendering medical services on board.
- Medical doctor shall wear updated ACLS (Advanced Vital Support) license while rendering medical services on board.
- The Company shall file activity statistics within the first ten (10) days on a monthly basis in accordance with Chapter V, Article 19, paragraph 10 of the Resolution No. 011-2019 issued by the Board of Directors of the Panama Maritime Authority; said statistics shall be sent to the following e-mails: [amp.estadistica@amp.gob.pa](mailto:amp.estadistica@amp.gob.pa) and [concesiones@amp.gob.pa](mailto:concesiones@amp.gob.pa).
- The company must make a single fee inspection payment, as a fee set forth for each type of maritime ancillary service, in compliance with Resolution No. 011-2019 dated March 27th, 2019 issued by the Board of Directors of the Panama Maritime Authority, and published in the Official Gazette No. 28763-A, dated April 29th, 2019.

**RATE:** B/. 1,000.00 annual per authorized company.

**For any additional information or questions, please contact the Concessions Department at the following telephone numbers: 501-5122 / 501-5123.**

Authorization:



Date:



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