



HNHS Survey & Study Request

or / and

**HNHS Geospatial/ Environmental Data
Provision**

**APPLICATION
FORM**

General Notice

This document is an Application Form for submission to the Hellenic Navy Hydrographic Service (HNHS) in order to provide Services and distribute Geospatial Data /Information, related to the Greek Responsibility Sea Area, collected, processed and stored by HNHS for which HNHS holds the copyright.

Progress of Your Application

Once your application is completed and submitted to HNHS, the department responsible will inform you on the progress of your request and the further implementation steps required.

Privacy Statement / Information

Any information pertaining in this Application that concerns personal data will be used only for the purpose for which it was given and in accordance with the applicable legal framework.

HNHS will not use personal data for any other purpose except for advertising/ informing and research, concerning its main work item and products. Also, they will not be made available to third parties, which are not related to HNHS, without the prior notice and acceptance from the applicant, with the only exception the implementation of the relevant legal dictations by the competent authorities.

1. The Applicant

<i>Name of Applicant :</i>	
<i>Company Name :</i> <i>(if applicable)</i>	
<i>Position within Company :</i> <i>(if applicable)</i>	
<i>Address :</i> <i>(of registered head office)</i>	
<i>Telephone Number:</i>	
<i>Fax Number:</i>	
<i>E-mail address:</i>	
<i>Company VAT ID:</i> <i>(EU applicants)</i>	
<i>Company's Scope of Work :</i>	

2. Your Company

Provide as much information as you can about the scope of work and the frame of structure of your company.

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3. Requested Material

Refer what kind of Service or Data you wish to have from HNHS:

- Hydrographic Survey

- Channels/Harbors Light Marking Study

- Hydrographic Fair Sheet Provision (Hydro Survey Sheets)

- Tidal Data Provision

- Other (to be described).....

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4. Area

Refer to geographic area you are interested to be covered or attach relative map or diagram.

(Describe a box or shape by giving lat & long for all corners of the area).

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5. Purpose of the Application

Refer to the purpose of your Application, give a description of it and explain how/why the HNHS material will be used.

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6. Date of implementation

Refer to the specific timing you wish your request to be completed and give reasons of any urgency.

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7. **Declaration**

I confirm that the information that I have supplied is true and accurate to the best of my knowledge.

Signature of Applicant :

Name of Applicant :

On Behalf of:

(Name of Company)

(stamp)

Date :

Please return the completed application:

- **by post**

Hellenic Navy Hydrographic Service
Finance Department
Mesogeion Avenue 229 (Ministry of Defense)
15561, CHOLARGOS

- **by Email**

ne_hnhs@navy.mil.gr

- **by Fax**

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