

Application for Rewrite of Certificate of Classification

To: NIPPON KAIJI KYOKAI (Classification Department)

Date:

Fax: +81-43-294-5449 E-mail: cldjt@classnk.or.jp

Applicant

Name:	Signature of Applicant:
Address:	Name in
	Block Capitals:
	E-mail:
Tel:	Fax:

We hereby request that you rewrite the Certificate of Classification. This request is made on the basis that we accept the provisions of REGULATIONS AND GUIDANCE FOR THE CLASSIFICATION AND REGISTRY OF SHIPS, and CONDITIONS OF SERVICE FOR CLASSIFICATION OF SHIPS AND REGISTRATION OF INSTALLATIONS.

Billing Contact

 \Box Same as Applicant

XPlease complete the following only in cases where the billing contact and the above applicant are different.

Name: Address:		Signature:	
		Name in Block Capitals:	
		E-mail:	
Tel:	I	Fax:	

_____ Class No.:_____ IMO No.:___ Ship's Name:

We, hereby request you to rewrite the Certificate of Classification for above ship. Reason for Issuance: Change of Registered Owner Other ()

* If the ship's name, flag, and so on are changed, please send APPLICATION FOR SURVEYS AND ISSUE OF CERTIFICATES to our branch office nearest to the place of survey because occasional survey by our surveyor are required.

1. Application for Issuance of Certificate of Particular Change*

* The above Certificate of Particular Change is an evidence that proves change of registered owner, until NK surveyor will rewrite them on documents such as Cargo Gear Booklet and SOPEP at the next survey, but this certificate is an option.

2. Remarks:

Attachment: (Provisional) Certificate of Registry