Го : ClassNK		Date:
Name of Firm (Applicant)	:	
Contact & Personnel	:	
	Tel:	Fax:
	e-mail:	<u>@</u>
for Initial Assessm for Occasional As documents *2, Outline of the alte to carry out Period to carry out Renev to withdraw the ap	nent of Firm, attached of sessment of an alteration: dical Assessment *3, val Assessment and rer	new the approval *4, NK Approval Certificate attached *5,
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-	3/*4	Fax:
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2. Address of Firm *1/*2/	3/*4 /*3/*4 Tel: e-mail:	Fax: