Form AM-LM(E)

То	: ClassNK	Date:		
			Ref. No.:	
Na	me of Firm (Applicant) :			
Co	ntact & Personnel :	- 1		_
		Tel:		Fax:
		e-mail		@
	the basis of the requirement reby make an application,	ts of Rules for A	Approval of Man	nufacturers and Service Suppliers,
	for Initial Assessment of	Firm, attached d	ocuments *1,	
	for Occasional Assessm			s which have been approved, attach
	documents ^{*2} ,			
	Outline of the alteration			
	to carry out Periodical A		an arre tha an marrie	a1 *4
	to carry out Renewal Ass to withdraw the approva			
	<i>Reason</i> :		K Apploval Cell	
1.	Name of Firm *1/*2/*3/*4			
2.	Address of Firm *1/*2/*3/*4	4		
		Tel:		Fax:
	e	e-mail		(a)
3.	Areas where service is suppl			
1.	Approved Number *2/*3/*4	/*5:		
5.	Intended date of field exami			
5.	Attached documents and da occasion other than Initial A		2 copies, relevan	nt documents only in the case of oth
			nitted, refer to	NK Rules "Rules for Approval
	Manufacturers and Service S		,	
-				
7.	Note :			