

To: NIPPON KAIJI KYOKAI

Date: _____

Applicant (Ship Management Company): _____

Address: _____

TEL : _____

FAX : _____

E-Mail: _____

Application for Continuous Machinery Survey (CMS)

We hereby request the application for CMS to the following ship.

Ship's Name: _____

Class No.: _____

Type of Main Engine: _____

We assure you that the arrangement on CMS will be made under the following conditions.

- (1) One cycle of each CMS item is to be completed within five (5) years.
- (2) The survey schedule for each item of the machinery and equipment is to preferably be planned in such a way that the conditions of the other machinery and equipment can be assumed from the result of an open-up inspection of the machinery and equipment.
- (3) In case of the ship class-transferred from other classification society, the due date of each CMS item succeeded to previous class to be observed.

Applicant's Signature: _____

Attachment: Schedule of Continuous Machinery Survey (CMS)

(for NK Use)

Distribution: Original: NK Head Office
1 Copy: Ship's File
1 Copy: Shipowner