

Application for Type Approval of Sewage Treatment Plant/Sewage Comminuting and Disinfecting System
Initial Renewal Modification

To: Material & Equipment Department, NIPPON KAIJI KYOKAI
 3-3, Kioi-cho, Chiyoda-ku, Tokyo 102-0094, JAPAN

Ref. No.:
 Date:

Name of Applicant:
 Address:
 Tel/Fax :
 E-mail :
 Name of the Person in Charge:

We hereby request type approval for the following plant/system in accordance with the requirements of Chapter 2, Part 8 of the Guidance for the Approval of Materials and Equipment for Marine Use of Nippon Kaiji Kyokai.

Names/Types of Plant/System					
Type approval Nos. If Available					
Particulars					
Names of Manufacturer and Production Site					
Address of Manufacturer					
Drawings and Documents Attached	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; padding: 5px;">Drawings</td> <td style="width: 85%;"></td> </tr> <tr> <td style="padding: 5px;">Documents</td> <td></td> </tr> </table>	Drawings		Documents	
Drawings					
Documents					
Date(s) and Location(s) of Tests/Inspections					

Notes:

1. Use additional sheets if necessary
2. Tick off where appropriate