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| Application for Applying Machinery and Equipment Manufactured with Approved Standardized Design to an NK-Classed ship［標準構造図面の承認を受けた船用機器を本会船級船に適用するための申請］ |
| Nippon Kaiji Kyokai［日本海事協会 御中］ | （☐New［新規］ ☐Change［変更］ ☐Renewal［更新］） | Date ［年月日］ |
| Name of applicant［申請者氏名］ |  |
| Address［郵便番号、住所］ |  |
| Telephone, Fax No., E-mail etc.［電話、FAX番号、メールアドレス等］ |  |
| On the basis of the relevant requirements of 2.1.2, Part 2 of the Rules for the Survey and Construction of Governmental and Naval Ships, we hereby request approval for applying the following product manufactured in accordance with the drawings as the standardized design to a ship classed with Nippon Kaiji Kyokai. This request is made on the basis that we accept the provisions of the *REGULATIONS FOR THE CLASSIFICATION OF GOVERNMENTAL AND NAVAL SHIPS*, *CONDITIONS OF CLASSIFICATION AND TECHNICAL SERVICES FOR GOVERNMENTAL AND NAVAL SHIPS* and *RULES FOR THE SURVEY AND CONSTRUCTION FOR GOVERNMENTAL AND NAVAL SHIPS* (as well as the provisions of *REGULATIONS FOR TECHNICAL SERVICES* when requesting technical services) of *NIPPON KAIJI KYOKAI*. Whether surveys are completed or not, we agree to pay all survey fees and expenses incurred as a result of the above-mentioned survey(s) and/or issuance of relevant certificate(s) within the payment term designated on your invoice.［日本海事協会の「官公庁船登録規則」、「官公庁船の船級登録及び技術サービスに関する業務提供の条件」及び「官公庁船の検査及び構造規則」（技術サービスを申込む場合は「技術サービス規則」を含む。）を了承の上、官公庁船の検査及び構造規則2編2.1.2の関連要件に基づき、本会船級船に標準構造図面に従って製造された次の製品を，標準設計として適用するために申請します。※検査手数料等は検査の合否に関わらず申込者に請求してください。］ |
| Name of Product［製品名］ |  |
| Existing “Certificate of Approval” No.［承認番号］ |  |
| Type and Model Number ［製品番号］ |  |
| Specification ［仕様］ |  |
| Product Number ［製造番号］ |  |
| Ship to which the product is applied ［適用船］ | ☐New ship ［新造船］ ☐Existing ship ［既存船］ |
| For New Ship［新造船］ | Name of Shipbuilder［建造所名］ |  |
| Hull number［建造番号］ |  |
| For Existing ship［既存船］ | Name of ship［船名］ |  |
| Name of Owner［船主］ |  |
| Name of manufacturer (name of works is also to be stated) ［製造者名（工場名まで記載）］ |  |
| Address of Manufacturer (Tel, Fax No., E-mail)［製造者住所（電話、FAX番号、メールアドレス）］ |  |
| Reference for liaison［連絡先］ | Address, ［住所］ |  |
| Tel, Fax, E-mail［電話、FAX、メールアドレス］ |  |
| Name of section in charge:［担当者の所属部署名］ |  |
| Name of the person:［担当者名］ |  |
| Remarks ［備考］ |  |

Notes:

1. In case of shortage of space, fill out in a separate sheet(s). ［記入欄が不足する場合は，別紙に記載して下さい。］

2. Check the item concerned. Take off unnecessary characters with lines.

［該当の項目に✓を記入下さい。不要な文字は削除下さい。］