Application for Approval of Airborne Sound Insulation Properties					
Nippon Kaiji Ky	/okai	(□New	□Change	□Renewal)	Date
Name of applicant					
Address					
Telephone, Fax No., E-mail etc.					
We hereby request issuance of a "Certificate of Approval" for the below-described product on satisfactory completion of tests and inspection in accordance with the Rules for the Survey and Construction of Governmental and Naval Ships.					
Product name					
Type (the same type is to be stated in attached sheet)					
Existing "Certificate of Approval" No.					
Existing "Certificate of Approval" Valid until					
Application standards (publishing year is also to be stated)		Basic spe	ecification		
		Special s	pecification		
Name of manufacturer (name of works is also to be stated)					
Address of Manufacturer (Tel, Fax No., E-mail)					
Attached data	Drawings				
	Other data				
Expected date of tests					
Reference for liaison	Address,				
	Tel, Fax, E-mail				
	Name of section in	charge:			
	Name of the person	:			
Make public by list of approved materials and equipment		☐ Yes ☐ Yes ☐ No	(Partial) *		
Remarks					

Notes:

- 1. In case of shortage of space, fill out in a separate sheet(s).
- 2. Check the item concerned. Take off unnecessary characters with lines.
- 3. * If there are contents (Particulars (or ratings), Special specification, etc.) to not be public, such contents are stated in the column "Remarks".