

APPLICATION FOR CLASSIFICATION SERVICES DURING CONSTRUCTION

(For Governmental and Naval Ships)

Application Document No.:	Application Date:
---------------------------	-------------------

To: NIPPON KAIJI KYOKAI

APPLICANT

Name Address	Signature and/or Official Stamp of Applicant
	(in Block Capitals)
	TEL
	FAX

We hereby request your Society to carry out the survey for registration and issue the certificates described in the attached Form 1A(GS)-1. 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. We agree to pay all survey fees and expenses incurred as a result of the above-mentioned survey and issuance of relevant certificate(s), regardless of whether the class is registered or not.

SHIP INFORMATION ※ Main particulars of hull and machinery are to be filled in using separate Form 1A(GS)-1.

Shipbuilder Name		Hull Number ⁽¹⁾	
Address		Date of Building Contract ⁽²⁾	
<input type="checkbox"/> Same as applicant. (If the shipbuilder and the applicant are the same, please tick this box.)			
Prospective Owner (Ship Owner listed on the National Registry Certificate)		Construction Schedule ⁽³⁾	Keel Laying Launch Completion
Proposed Flag	Port of Registry	Purpose of Ship	
Full Load Disp. or Gross Tonnage	Main Engine	Number	Type MCR kW
Navigation Area ⁽⁴⁾ <input type="checkbox"/> International <input type="checkbox"/> Non-international <input type="checkbox"/> Ocean going <input type="checkbox"/> Non-ocean going (Please specify):			
Operating in Polar Waters <input type="checkbox"/> Not Apply <input type="checkbox"/> Apply (<input type="checkbox"/> Category A <input type="checkbox"/> Category B <input type="checkbox"/> Category C)			
If dual class, specify other class			

- (1) Please fill-up the hull Nos. of all ships included in the same building contract.
 (2) Please enter the date (or scheduled date) of building contract signed between the prospective owner and the shipbuilder to be classed.
 (3) In cases where sister ships will be built continuously under the same contract, please fill-up Form 1A(GS)-SIS with the schedules for the second and the latter ships to be classed.
 (4) Tick all boxes applicable.

CLASSIFICATION During Construction

Classification	Hull / Machinery	Classification Characters and Notations applying for	NS* MNS* (<input type="checkbox"/> Automatic and Remote Control Systems(M0))
		Descriptive Note(s)	
	Equipment	Notations for Guideline	<input type="checkbox"/> Environmental Awareness (EA +) <input type="checkbox"/> Exhaust Gas Cleaning System Ready (<input type="checkbox"/> EGCSR-G <input type="checkbox"/> EGCSR-F) <input type="checkbox"/> High Voltage Shore supply System (HVSS) <input type="checkbox"/> Inventory of Hazardous Materials (IHM) <input type="checkbox"/> Mechanical Vibration Awareness (MVA) <input type="checkbox"/> Noise and Vibration Comfort (NVC·) <input type="checkbox"/> Other Notation ()
<input type="checkbox"/> Safety Equipment <input type="checkbox"/> Radio Installations <input type="checkbox"/> Navigation Equipment <input type="checkbox"/> Marine Pollution Prevention Installations <input type="checkbox"/> Crew Accommodation Arrangements <input type="checkbox"/> Anti-Fouling Systems <input type="checkbox"/> Ballast Water Management Installations <input type="checkbox"/> Cargo Handling Appliances (Please fill in the Form 1A(GS)-CG and Form 1A(GS)-C) <input type="checkbox"/> Preventive Machinery Maintenance Systems <input type="checkbox"/> Integrated Fire Control Systems (<input type="checkbox"/> IFC · M <input type="checkbox"/> IFC · A <input type="checkbox"/> IFC · AM) <input type="checkbox"/> Other (Please specify):			

Attached sheets to this application : Form 1A(GS)-1 Form 1A(GS) DG Form 1A(GS) CG Form 1A(GS)-C Form 1A(GS)-SIS
 To be submitted : Form 1A(GS)-1 Form 1A(GS) DG Form 1A(GS) CG Form 1A(GS)-C Form 1A(GS)-SIS

BILLING CONTACT ※ Please complete the following only in cases where the billing contact and applicant are different.

Name Address	Signature and/or Official Stamp
	(in Block Capitals)
	TEL
	FAX

For NK internal use	Receipt Date	Receipt No.
---------------------	--------------	-------------

- Remarks:
 1. Please send this form to the ClassNK Government Ship Service Department (GSS).
 2. If any of the above required items are not fixed at the time of the application, please fill in the relevant columns as "TBN".
 3. If any of the information provided in this form changes or if undecided items have been cleared, please inform GSS. In cases where ClassNK deems that any of the information included in this form needs to be altered during the Classification Survey process, the applicant will be notified.

SURVEY, CERTIFICATES & MAIN PARTICULARS

Date of Application Form 1A(GS)	
Date of Submission of this sheet	<input type="checkbox"/> Same as above /

Shipbuilder <input type="checkbox"/> Same as applicant.	Hull Number(s)
--	----------------

SURVEY AND ISSUANCE OF CERTIFICATES / ATTESTATION

Requested Survey and Certificates/Attestation to be issued. (※)The combination forms of SC, SE, and SR Certificates.	Survey	Certificate/Attestation	Survey	Certificate/Attestation
	<input type="checkbox"/>	<input type="checkbox"/> Load Line (<input type="checkbox"/> include statement) (Type of freeboard:) (Intended Freeboard(m):)	<input type="checkbox"/>	<input type="checkbox"/> Oil Pollution Prevention
<input type="checkbox"/>	<input type="checkbox"/> Safety Construction(SC)	<input type="checkbox"/>	<input type="checkbox"/> Sewage Pollution Prevention	
<input type="checkbox"/>	<input type="checkbox"/> Safety Equipment(SE)	<input type="checkbox"/>	<input type="checkbox"/> Air Pollution Prevention	
<input type="checkbox"/>	<input type="checkbox"/> Safety Radio(SR)	<input type="checkbox"/>	<input type="checkbox"/> Energy Efficiency	
<input type="checkbox"/>	<input type="checkbox"/> Safety ^(※)	<input type="checkbox"/>	<input type="checkbox"/> Ballast Water Management	
<input type="checkbox"/>	<input type="checkbox"/> Fitness for Ship Carrying Dangerous Goods (Please fill in the boxes of the main particulars of dangerous goods.)	<input type="checkbox"/>	<input type="checkbox"/> Anti-Fouling System	
		<input type="checkbox"/>	<input type="checkbox"/> Deadweight	
		<input type="checkbox"/>	<input type="checkbox"/> Tonnage Certificates	
		<input type="checkbox"/>	<input type="checkbox"/> Other (Please specify in the Form 1A(GS)-C)	

MAIN PARTICULARS OF HULL

Lpp x B x D (m)	x B _{max} : , B _{mean} ⁽¹⁾ : x
Hull Number of Sister ship(s) ⁽²⁾	

(1) Please enter the average width of the ship. (2) Please fill-up, if sister ship(s) has been already registered in NK.

MAIN PARTICULARS OF MACHINERY

Main Engine	Model			
	Maximum Output x Number of units		kW(@ min ⁻¹) x	
	Manufacturer/Workshop			
Application of Tier III NOx Regulation for Diesel Engines Installed Onboard			<input type="checkbox"/> Applied <input type="checkbox"/> Not Applied	
Reduction gears	Model: Manufacturer:	Revolution of output shaft(min ⁻¹):	Number of units:	
Thrusters	Type		No. of units	
	<input type="checkbox"/> Fixed pitch propeller	Diameter:	Number of blades:	
	<input type="checkbox"/> Controllable pitch propellers	Manufacturer:		
	<input type="checkbox"/> Waterjet propulsion systems	Model: Manufacturer:	Impeller Dia.:	
	<input type="checkbox"/> Azimuth thrusters	Model: Manufacturer:	Diameter:	
Type of Propeller Shaft, etc.	<input type="checkbox"/> 1A <input type="checkbox"/> 1B <input type="checkbox"/> 1C <input type="checkbox"/> 1W		Preventive Maintenance Systems	<input type="checkbox"/> PSCM <input type="checkbox"/> PSCM · A
			Alternative Survey Methods	<input type="checkbox"/> APSS · O <input type="checkbox"/> APSS · W
Generator	Total Output	kVA	Prime mover	Model: Manufacturer:
	Maximum Working Pressures x Number of units		MPa x	Number of units:
	Manufacturer / Workshop			
Fuel oil	(ISO-F) <input type="checkbox"/> DMX <input type="checkbox"/> DMA <input type="checkbox"/> DMZ <input type="checkbox"/> DMB or <input type="checkbox"/> Other:			
Exhaust Gas Cleaning System	<input type="checkbox"/> Fitted <input type="checkbox"/> Not fitted			

MAXIMUM NUMBER OF PERSONS ACCOMMODATED

Maximum Number of Persons Accommodated	Total No.:	(Crew: Other:)
--	------------	-----------------

DG CERTIFICATE
(To be submitted where applicable)

Date of Application Form 1A(GS)	
Date of Submission	<input type="checkbox"/> Same as above /

Shipbuilder <input type="checkbox"/> Same as applicant.	Hull Number(s)
--	----------------

DG CERTIFICATE

Space(s) for carrying DG	<input type="checkbox"/> Weather Deck(Name): <input type="checkbox"/> Compartment (Name):
Class of Dangerous Goods <i>(1)Please complete when restrictions apply to loading of specified cargo in order to meet relevant requirements.</i>	<input type="checkbox"/> 1.1-1.6 <input type="checkbox"/> 1.4S <input type="checkbox"/> 2.1 <input type="checkbox"/> 2.2 <input type="checkbox"/> 2.3(<input type="checkbox"/> (flammable) <input type="checkbox"/> (non-flammable)) <input type="checkbox"/> 3 (all) <input type="checkbox"/> 3 (liquid: flashpoint (°C) <input type="checkbox"/> below 23° <input type="checkbox"/> between 23° and 60°) <input type="checkbox"/> 4.1 <input type="checkbox"/> 4.2 <input type="checkbox"/> 4.3(<input type="checkbox"/> liquid <input type="checkbox"/> solid) <input type="checkbox"/> 5.1 <input type="checkbox"/> 5.2 <input type="checkbox"/> 6.1 (All) <input type="checkbox"/> 6.1 (liquid: flashpoint (°C) <input type="checkbox"/> below 23° <input type="checkbox"/> between 23° and 60° <input type="checkbox"/> over 60° <input type="checkbox"/> solid) <input type="checkbox"/> 8 (All) <input type="checkbox"/> 8 (liquid: flashpoint (°C) <input type="checkbox"/> below 23° <input type="checkbox"/> between 23° and 60° <input type="checkbox"/> over 60° <input type="checkbox"/> solid) <input type="checkbox"/> 9 <input type="checkbox"/> Loading restrictions for Specified Cargo ⁽¹⁾ :

Remarks:

In cases where it is impossible to submit this form at the same time as the application form, please make sure to submit this form before the submission of any drawings for approval (including maker drawings).

VARIOUS ATTESTATION
(To be submitted where applicable)

Date of Application Form 1A(GS)	
Date of Submission	<input type="checkbox"/> Same as above /

Shipbuilder	<input type="checkbox"/> Same as applicant.	Hull Number(s)	
-------------	---	----------------	--

VARIOUS ATTESTATION

Cargo Gear Certificate etc. (1)Including Loose gear (except ropes) & Rope.	<input type="checkbox"/> Cargo Gear Book <input type="checkbox"/> Cargo Gear Certificate ⁽¹⁾ <input type="checkbox"/> Crane <input type="checkbox"/> Ramp-way, Lift for Cargo <input type="checkbox"/> Other (Please specify):
Certificate of Fitness for National Regulations of Flag State (Please indicate applicable requirements in space provided.)	
Attestation of USCG	<input type="checkbox"/> Oil Pollution Prevention (33CFR Part155) <input type="checkbox"/> Vapor Emission Control System (46CFR Part39) <input type="checkbox"/> Other (Please specify):
Certificate of Inventory of Hazardous Material (IHM)	Applicable regulation: <input type="checkbox"/> Hong Kong Convention(HKC) <input type="checkbox"/> EU Regulation (EU SRR)
Other	

**List of Series of vessels
in the Building Contract**
(To be submitted where applicable)

Date of Application Form 1A(GS)	
Date of Submission	<input type="checkbox"/> Same as above /

	Hull No.	Construction Schedule		
		Keel Laying	Launch	Completion
1st ship ⁽²⁾				
2nd ship				
3rd ship				
4th ship				
5th ship				
6th ship				
7th ship				
8th ship				
9th ship				
10th ship				
11th ship				
12th ship				
13th ship				
14th ship				
15th ship				

Note:

- (1) Please fill up the schedules of all ships to be classed, included in the same building contract.
- (2) The above "1st ship" means the first ship of a series of vessels having the same design, to be built by the same builder and under single building contract.