		rms carrying out an In-water Survey odical*3 Renewal*4 Withdrawal*5)
To: ClassNK		Date:
Name of Firm (Applicant) : Contact & Personnel :	T.I.	Γ
	Tel:	Fax:
•	e-mail s of <i>Rules for Approva</i>	(a) l of Manufacturers and Service Suppliers, we hereby make
		on to the items which have been approved, attached
to carry out Periodical		
	Assessment and to rene	ew the approval *4.
		Approval Certificate attached *5.
1. Name of Firm $*1/*2/*3/*$	4	
2. Address of Firm *1/*2/*3	/*4	
	т.1.	E
	Tel:	Fax:
	e-mail	\widehat{a}
3. Areas where service is s	upplied:	
4. Underwater thickness	measurements and	will be carried out.
non-destructive testing*	1/*2/*4:	will not be carried out.
		(: check as appropriate)
5. In-water survey will be o	carried out for*1/*2/*4	ships. mobile offshore units.
6. In-water survey will be o	carried out by*1/*2/*4:	
,	,	Remotely Operated Vehicle (ROV).
	_	(: check as appropriate)
7. Engaged service*1/*2/*		n-water survey in lieu of a docking survey.
		The internal hull survey of compartments filled with water. : check as appropriate)
8. Approved Number *2/*.		
 Approved Number 27 Intended date of field ex 		
10. Attached documents ar occasion other than Initia (For the documents and	nd data *1/*2/*3/*4 (2) al Assessment): data to be submitted,	2 copies, relevant documents only in the case of other refer to NK Rules "Rules for Approval of Manufacturers
and Service Suppliers".) 11. Note:		