

## APPLICATION FOR CLASSIFICATION AND STATUTORY SERVICES DURING CONSTRUCTION

To: NIPPON KAIJI KYOKAI

Application Document No.:		Application Date:	
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### APPLICANT

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

We hereby request that you carry out the survey for registration and issue the certificates described in the attached Form 1A-1. This request is made on the basis that we accept the provisions of REGULATIONS FOR THE CLASSIFICATION AND REGISTRY OF SHIPS, CONDITIONS OF SERVICE FOR CLASSIFICATION OF SHIPS AND REGISTRATION OF INSTALLATIONS and REGULATIONS FOR THE ISSUE OF STATUTORY CERTIFICATES (as well as the provisions of REGULATIONS FOR TECHNICAL SERVICES when requesting technical services) of NIPPON KAIJI KYOKAI and that we allow flag authorities and authorized audit teams on board for the purpose of their assessing NIPPON KAIJI KYOKAI's compliance with applicable rules, regulations and quality standard. 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 class and/or installations are registered or not.

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

Shipbuilder Name Address <input type="checkbox"/> Same as applicant. (If the shipbuilder and the applicant are the same, please tick this box.)	Yard/Hull Number			
	Date of Building/Option Contract <sup>(1)</sup>			
	Exercise date of Optional Contract <sup>(2)</sup>			
	Date of Building Contract of the first ship <sup>(4)</sup>			
Prospective Owner (Ship Owner listed on the National Registry Certificate)  <input type="checkbox"/> Undecided	Yard/Hull No. of the first ship <sup>(4)</sup>			
	Date of Keel Laying (Estimated)			
	Date of Launch (Estimated)			
	Date of Completion (Estimated)			
Proposed Flag	Port of Registry	Purpose of Ship	MCR	kW
Gross Tonnage	Main Engine	Number	Type	
Navigation Area <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"/> Apply ( <input type="checkbox"/> Category A <input type="checkbox"/> Category B <input type="checkbox"/> Category C) <input type="checkbox"/> Not Apply				
Shore Archive <sup>(5)</sup> <input type="checkbox"/> ClassNK <input type="checkbox"/> Other ( ) <input type="checkbox"/> Undecided <input type="checkbox"/> N.A. If dual class, specify other class				

- (1) Please enter the date of building contract signed between the prospective owner and the shipbuilder or "its scheduled date". If this ship is an optional ship, please enter the date of optional contract signed. In cases where the scheduled building contract date has been changed, please inform us without delay.
- (2) If this ship is "Optional ship", please enter the date of Exercise the optional contract. The optional contract is to be exercised not later than 1 year after the contract to build the series was signed. (IACS PR No.29)
- (3) In cases where the ship is the first ship under the building contract, please add the details (Hull No., Schedule etc.) of all sister /optional ships under the same building contract to Form 1A-SIS. In cases where the first ship under the building contract is registered with another classification society, please add the details (Hull No., Schedule etc.) of all sister /optional ships, including the first ship under the building contract, to Form 1A-SIS when applying for "ship scheduled to be registered first in NK under the building contract".
- (4) In case of the second ship or later and optional ship(s) under the building contract, please enter "The date of building contract" and "Yard/Hull No." of the first ship. Note: "First ship" in this form is the first ship of a series of vessels built to the same approved plans for the classification purposes at the same builder, under a single building contract. "Optional ship" is a part of the same series of vessels for which the optional contract is ultimately exercised under a single building contract.
- (5) Please enter the name of shore archive (GBS-SCF) for ships subject to SOLAS Chapter II-1 Regulation 3-10 and submit an "Application for ClassNK Archive Center Service" separately if apply. If this ship is not applied, please check the "Not applicable" box.

### CLASSIFICATION / INSTALLATION REGISTRATION During Construction

Classification	Classification Characters and Notations applying for	NS* MNS*
	Descriptive Note(s)	
	Notations for Guideline	<input type="checkbox"/> Environmental Awareness (EA + ) <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· )
	Special Description	<input type="checkbox"/> n.s. <input type="checkbox"/> n.f. <input type="checkbox"/> Other (Please specify):
Installations	<input type="checkbox"/> Safety Equipment <input type="checkbox"/> Radio Installations <input type="checkbox"/> Marine Pollution Prevention Installations <input type="checkbox"/> Crew Accommodation Arrangements (Applicable only to Japanese flag ships) <input type="checkbox"/> Anti-Fouling Systems <input type="checkbox"/> Ballast Water Management Installations <input type="checkbox"/> Cargo Handling Appliances <input type="checkbox"/> Automatic and Remote Control Systems ( <input type="checkbox"/> MC <input type="checkbox"/> MO <input type="checkbox"/> MO · A <input type="checkbox"/> MO · B <input type="checkbox"/> MO · C <input type="checkbox"/> MO · D) <input type="checkbox"/> Preventive Machinery Maintenance Systems <input type="checkbox"/> Cargo Refrigerating Installations ( <input type="checkbox"/> RMC <input type="checkbox"/> RMC · CA) <input type="checkbox"/> Navigation Bridge Systems ( <input type="checkbox"/> BRS <input type="checkbox"/> BRS1 <input type="checkbox"/> BRS1A) <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):	

Attachments :  Form 1A-1  Form 1A DG-BC  Form 1A CG  Form 1A-C  Form 4A  Form 1A-SIS  
 Submit later :  Form 1A-1  Form 1A DG-BC  Form 1A CG  Form 1A-C  Form 4A  Form 1A-SIS  
 Omit to submit (Sister Ship Hull No. ):  Form 1A-1  Form 1A DG-BC  Form 1A CG  Form 1A-C  Form 4A

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

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

For NK internal use	Receipt Date	Receipt No.	
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Remarks:

1. Please send this form to the nearest ClassNK branch office.
2. If any of the above required items are not determined at the time of the application, please fill in the relevant columns as "Undecided".
3. If any of the information provided in this form changes or if undecided items have been determined, please inform the nearest ClassNK branch office. 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 Classification Survey Application	
Date of Submission	<input type="checkbox"/> Same as above /

Shipbuilder	<input type="checkbox"/> Same as applicant.	Yard/Hull Number	
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### SURVEY AND ISSUANCE OF CERTIFICATES

※ The following information is not required for Japanese flag ships. Please submit an "APPLICATION FOR ISSUE OF CERTIFICATES (Form 4A)" separately.

Survey for Statutory Certificates and Issuance of Certificates  (1) For Japanese flag ships, NK conducts surveys only. (2) For Japanese flag ships, the Japanese Government conducts surveys and issues certificate(s). (3) The combination forms of SC, SE, and SR Certificates.	Survey <input type="checkbox"/>	Certificate <input type="checkbox"/> Load Line (Please fill in the boxes of the main particulars of load lines.) <input type="checkbox"/> Passenger Ship Safety <sup>(2)</sup> <input type="checkbox"/> Cargo Ship Safety Construction <input type="checkbox"/> Cargo Ship Safety Equipment <input type="checkbox"/> Cargo Ship Safety Radio <input type="checkbox"/> Cargo Ship Safety <sup>(3)</sup> <input type="checkbox"/> Exemption <input type="checkbox"/> Fixed Fire-Extinguishing System <input type="checkbox"/> Fitness for the Carriage of Dangerous Chemicals in Bulk <sup>(1)</sup> <input type="checkbox"/> Fitness for the Carriage of Liquefied Gases in Bulk	Survey <input type="checkbox"/>	Certificate <input type="checkbox"/> Fitness for Ship Carrying Dangerous Goods <sup>(1)</sup> (Please fill in the boxes of the main particulars of dangerous goods.) <input type="checkbox"/> Oil Pollution Prevention <sup>(1)</sup> <input type="checkbox"/> Pollution Prevention Certificate for the Carriage of Noxious Liquid Substances in Bulk <sup>(1)</sup> <input type="checkbox"/> Sewage Pollution Prevention <sup>(1)</sup> <input type="checkbox"/> Air Pollution Prevention <sup>(1)</sup> <input type="checkbox"/> Anti-Fouling System <input type="checkbox"/> Ballast Water Management <sup>(1)</sup> <input type="checkbox"/> Grain Loading Booklet <sup>(2)</sup> <input type="checkbox"/> Energy Efficiency <sup>(1)</sup> <input type="checkbox"/> Other (Please specify):
	Tonnage Certificates (4) For Japanese flag ships, the Japanese Government conducts measurements and issues certificate(s).	Measurement <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Certificate <input type="checkbox"/> International Tonnage <sup>(4)</sup> <input type="checkbox"/> PC/UMS Documentation of total volume <sup>(4)</sup> <input type="checkbox"/> Suez Canal <sup>(4)</sup> <input type="checkbox"/> National Tonnage <sup>(4)</sup> (Applicable rule: )	
Assignments (5) Applicable only to Japanese flag ships.	<input type="checkbox"/> Freeboard <input type="checkbox"/> Incinerator <sup>(5)</sup> <input type="checkbox"/> Lift for Crew etc. <sup>(5)</sup>			

### MAIN PARTICULARS OF HULL

Lpp x B x D (m)	x                      x	Deadweight	
Yard/Hull Number of Sister ship(s) <sup>(1)</sup>		Coal Carrying	<input type="checkbox"/> Yes <input type="checkbox"/> No

(1) Please complete if sister ship(s) has been already registered in NK.

### MAIN PARTICULARS OF MACHINERY

Main Engine	Model			
	Maximum Output <sup>(1)</sup> & Revolutions per minute		kW · PS                      ·                      RPM	
	Manufacturer Workshop			
Application of Tier III NOx Regulation for Diesel Engines Installed Onboard			<input type="checkbox"/> Applied <input type="checkbox"/> Not Applied	
Propeller	Number, Type & RPM		·                      ·                      RPM	
	Type of Propeller Shaft, etc.	<input type="checkbox"/> 1A <input type="checkbox"/> 1B <input type="checkbox"/> 1C <input type="checkbox"/> 1W <input type="checkbox"/> 2	Preventive Maintenance Systems Alternative Survey Methods	<input type="checkbox"/> PSCM <input type="checkbox"/> PSCM · A <input type="checkbox"/> APSS · O <input type="checkbox"/> APSS · W
Boiler <input type="checkbox"/> Main <input type="checkbox"/> Auxiliary	Number & Maximum Working Pressure <sup>(1)</sup>		·                      MPa · kg/cm <sup>2</sup>	
	Manufacturer Workshop			
Generator	Total Output		kVA	
Use of Low-flashpoint Fuel	<input type="checkbox"/> Yes ( <input type="checkbox"/> Natural gas / <input type="checkbox"/> Other: ) <input type="checkbox"/> No			

(1) For Japanese flagged ships, please select a SI unit.

### MAIN PARTICULARS OF LOAD LINES

Type of Ship	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> B+ <input type="checkbox"/> B-60 <input type="checkbox"/> B-100	Timber Freeboard	<input type="checkbox"/> Yes <input type="checkbox"/> No
Intended Freeboard (m)		<input type="checkbox"/> Multiple Load Line System	

### MAXIMUM NUMBER OF PERSONS ACCOMMODATED

Maximum Number of Persons Accommodated	Total No.:                      (Passenger:                      Crew:                      Other:                      )
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### MAIN PARTICULARS OF CARGO REFRIGERATING INSTALLATIONS

※ Please complete when requesting to register refrigerating installations.

Intended Notation				
Type of Refrigerant		Cooling System	Total Capacity of Cargo Chamber	m <sup>3</sup>

## DG CERTIFICATE & IMSBC CODE FITNESS CERTIFICATE

Date of Classification Survey Application	
Date of Submission	<input type="checkbox"/> Same as above /

Shipbuilder	<input type="checkbox"/> Same as applicant.	Yard/Hull Number	
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### DG CERTIFICATE ※ For Japanese flag ships, NK conducts surveys only.

Solid Dangerous Goods in Bulk	Where loaded	<input type="checkbox"/> Cargo Hold No.: <input type="checkbox"/> Other (Please specify):
	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"/> 4.1 <input type="checkbox"/> 4.2 <input type="checkbox"/> 4.3 <input type="checkbox"/> 5.1 <input type="checkbox"/> 6.1 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> Loading restrictions for Specified Cargo <sup>(1)</sup> :
Other Dangerous Goods	Where loaded	<input type="checkbox"/> Weather Deck <input type="checkbox"/> Cargo Hold No.: <input type="checkbox"/> Other (Please specify):
	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 <sup>(1)</sup> :

### IMSBC CODE FITNESS CERTIFICATE

IMSBC Code Fitness Certificate	<input type="checkbox"/> Group A cargoes   ( <input type="checkbox"/> with / <input type="checkbox"/> without restrictions on moisture content of cargoes) <input type="checkbox"/> Group C cargoes <input type="checkbox"/> Group B cargoes <i>(Please list all cargoes. If insufficient space, please continue on a separate sheet.)</i>
	<div style="border: 1px solid black; border-radius: 50%; width: 100%; height: 100%; margin: 0 auto;"></div>

**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).

## MAIN PARTICULARS OF CARGO GEAR

Date of Classification Survey Application	
Date of Submission	<input type="checkbox"/> Same as above /

Shipbuilder	<input type="checkbox"/> Same as applicant.	Yard/Hull Number	
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### CARGO GEAR (DERRICK / CRANE)

Location and description with distinguishing number or mark, if any	Intended safe working load (tons) - allowable minimum angle (degrees) or allowable maximum radius (meters)			
	Load	Angle/Radius	Dual	
			Load	Angle/Radius

### UNION PURCHASE *\* Please complete the following datasheet with detail.*

Location and description with distinguishing number or mark, if any	Intended safe working load (tons) - allowable minimum angle (degrees) or allowable maximum radius (meters)			
	Safe working load	Maximum fall angle	Swing system	
			Load	Angle/Radius

### Datasheet for Union Purchase <sup>(1)</sup> <sup>(2)</sup>

- Location of Derricks: Fore / Aft of hatch no. (            ).
- Distance of lower guy eyes from upper deck <sup>(3)</sup>: Inboard boom (            ) meters  
Outboard boom (            ) meters
- Safe Working load in Union Purchase: (            ) tons
- Fall angle: (            ) degrees
- Allowable lifting height from upper deck: (            ) meters
- Outside diameter and thickness of derrick boom: Inboard boom            φmm ×            mm  
Outboard boom            φmm ×            mm

Remarks:

- (1) This form is to be prepared separately for each gang.
- (2) Camber, sheer, trim, and heel are to be ignored.
- (3) Enter the value 0 meters in cases where the guy eye is fixed to the upper deck.

## VARIOUS ATTESTATION

Date of Classification Survey Application	
Date of Submission	<input type="checkbox"/> Same as above /

Shipbuilder	<input type="checkbox"/> Same as applicant.	Yard/Hull Number	
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## VARIOUS ATTESTATION

<p>Cargo Gear Certificate etc.</p> <p>(1) Including Loose gear (except ropes) &amp; Rope. (2) These forms are to be prepared by the applicant.</p>	<input type="checkbox"/> Cargo Gear Book <input type="checkbox"/> Cargo Gear Certificate <sup>(1)</sup> <input type="checkbox"/> Derrick <input type="checkbox"/> Derrick for Union Purchase <input type="checkbox"/> Crane <input type="checkbox"/> Ramp-way, Lift for Cargo <input type="checkbox"/> Other (Please specify):	<input type="checkbox"/> GN <input type="checkbox"/> JP <sup>(2)</sup> <input type="checkbox"/> PK <sup>(2)</sup> <input type="checkbox"/> Other <sup>(2)</sup> : <input type="checkbox"/> GN <input type="checkbox"/> JP <input type="checkbox"/> PK <sup>(2)</sup> <input type="checkbox"/> Other <sup>(2)</sup> :  GN: Form for NK classed ships JP: Form for Japanese flag ships PK: Form for Pakistani service
<p>Document of Compliance for a Non-party to a Convention</p>	<input type="checkbox"/> Cargo Ship Safety Construction <input type="checkbox"/> Cargo Ship Safety Equipment <input type="checkbox"/> Cargo Ship Safety Radio <input type="checkbox"/> Oil Pollution Prevention <input type="checkbox"/> Pollution Prevention Certificate for the Carriage of Noxious Liquid Substances in Bulk <input type="checkbox"/> Other (Please specify):	
<p>Certificate of Fitness for National Regulations of Flag State (Please indicate applicable requirements in space provided.)</p>		
<p>Attestation of USCG</p>	<input type="checkbox"/> Oil Pollution Prevention (33CFR Part155) <input type="checkbox"/> Liquid Gas Carrier (46CFR Part154) <input type="checkbox"/> Vapor Emission Control System (46CFR Part39) <input type="checkbox"/> Other (Please specify):	
<p>Other Certificate(s)</p>	<input type="checkbox"/> ILO Crew Accommodation <input type="checkbox"/> Attestation of Load Lines <input type="checkbox"/> Attestation of Deadweight <input type="checkbox"/> Certificate of Keel Laying <input type="checkbox"/> Other (Please specify):	

## List of Series of vessels in the Building Contract

Date of Classification Survey Application	
Date of Submission	<input type="checkbox"/> Same as above /

Shipbuilder	Date of contract for construction
<input type="checkbox"/> Same as applicant.	
Ordering party (Prospective Owner)	

	Hull No.	Class <sup>(3)</sup>	Optional Ship <sup>(5)</sup>	Date of Keel Laying (Estimated)	Date of Launch (Estimated)	Date of Delivery (Estimated)
1st ship <sup>(4)</sup>						
2nd ship			<input type="checkbox"/> ( )			
3rd ship			<input type="checkbox"/> ( )			
4th ship			<input type="checkbox"/> ( )			
5th ship			<input type="checkbox"/> ( )			
6th ship			<input type="checkbox"/> ( )			
7th ship			<input type="checkbox"/> ( )			
8th ship			<input type="checkbox"/> ( )			
9th ship			<input type="checkbox"/> ( )			
10th ship			<input type="checkbox"/> ( )			
11th ship			<input type="checkbox"/> ( )			
12th ship			<input type="checkbox"/> ( )			
13th ship			<input type="checkbox"/> ( )			
14th ship			<input type="checkbox"/> ( )			
15th ship			<input type="checkbox"/> ( )			

Note:

- (1) Please fill up the details of all ships / optional vessels included in the same building contract.
- (2) This list is to be completed when applying for the first ship under the building contract. In cases where the first ship under the building contract is registered with another classification society, this list is to be completed when applying for "ship scheduled to be registered first in NK under the building contract". It is also possible to attach it in place of this form, if the shipbuilder issues the similar list of the series vessels.
- (3) In case that the vessel will be registered with another classification society, please describe the name of Class or describe as "Other Class".
- (4) The above "First ship" is the first ship of a series of vessels built to the same approved plans for the classification purposes at the same builder, under a single building contract.
- (5) "Optional ship" is a part of the same series of vessels for which the optional contract is ultimately exercised under a single building contract. For Optional Ship, please tick a box and fill up the Exercise date of Optional Contract. The optional contract is to be exercised not later than 1 year after the contract to build the series was signed. (IACS PR No.29)