

Application form for Type tests
☐New ☐Change ☐Renewal

Date

Nippon Kaiji Kyokai (ClassNK)

Name of applicant

Address

Telephone, Fax, E-mail etc.

We hereby agree with the provisions of "*REGULATIONS FOR THE CLASSIFICATION AND REGISTRY OF SHIPS, CONDITIONS OF SERVICE FOR CLASSIFICATION OF SHIPS AND REGISTRATION OF INSTALLATIONS*" of NIPPON KAIJI KYOKAI and request to apply Type Tests for the product mentioned below. We agree to pay all survey fees and expenses incurred as a result of the above-mention services regardless of whether the results of the services are acceptable or not.

Product name		
Type (the same type is to be stated in attached sheet)		
Particulars (or ratings)		
Application standards (publishing year is also to be stated)		
Name of manufacturer (name of works is also to be stated)		
Address of Manufacturer (Tel, Fax No., E-mail)		
Attached data	Drawings	Drawing No. of main part
	Other data	
Expected date of tests		
Reference for liaison	Address, Tel, Fax, E-mail	
	Name of section in charge: Name of the person:	
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.