Application for Wind Farm Certification（Initial）

To: Nippon Kaiji Kyokai (ClassNK)

Application Date	

Applicant

Company Name		
Address		
Title		
Name of Representative		(Signature)

We hereby request that ClassNK carries out the evaluation regarding the Wind Farm Certification and issue the Statement of Compliance and its relevant reports. This request is made on the basis that we accept the *NKRE-SP-0003: Wind Farm Certification* issued by ClassNK. We agree to pay all evaluation fees and expenses, regardless of whether its certification is completed or not.

1. Subject wind farm of the evaluation

Wind Farm Name			
Location (Address)			
Wind Farm Operator			
WT Manufacturer			
WT Type		No. of WT	
Tower Design			
Foundation Design			
Construction Control			

2. Subject to evaluation

☐ Onshore	☐ [M1] Site conditions (Wind condition)	☐ [M2] RNA design
	☐ [M3] Support structure design (Tower)	☐ [M4] Support structure design (Foundation)
☐ Offshore (bottom fixed)		
☐ Offshore (floating)		

3. Contact details of the person in charge

Company Name			
Title / Name (PIC)			
TEL		E-mail	

4. Billing contact *Please fill in if the billing contact and applicant are different. We will send the original invoice via PDF attached to an email.

Company Name			
Address			
Name (Addressee)			
TEL		E-mail	

5. Special notes

Remarks
1) If any of the above required items are not determined at the time of the application, please fill in the relevant columns as “Undecided”.
2) If any of the information provided in this form changes or if undecided items have been determined, please inform the ClassNK.
3) In cases where ClassNK deems that any of the information included in this form needs to be altered during the Wind Farm Certification process, the applicant will be notified.

For ClassNK internal use		
Receipt No.	Receipt Date	Receipt Stamp
Control No.		