NIPPON KAIJI KYOKAI

Renewables and Environment Department

[RE-071-36] Rev.3

E-Mail: re@classnk.or.jp FAX: 03-5226-2060

Application for small wind turbine type certification (Change)

I, undersigned applicant, am requesting a quotation under the following condition.

1.	Applicant					
	Date of application: (day, month, year)					
	Company name:					
	Detailed Address:					
	Name of representative:					
	Signature:					
	Tel: E-mail:					
2.	Type of application					
	Certification No.:					
	Date of initial certification: (day, month, year)					
	Contents of change					
3.	Contact Person					
	Company name:					
	Address:					
	Name of the person:					
	Tel: E-mail:					
4.	Note (Please check)					
	We have read "NKRE-SP-0001 Guidance for Certification of Products" and understood the contents.					
5.	Submitted Documents *Submit the documents through NK-PASS					
	Checklist for applicant (Please check) Checklist for NK					
1)	Explanation documents about planed change details					
2)	Evaluation report of assumed effects from planed change					

*Bottom column is for use in ClassNK.

Receipt Date:	(d),	(m),	(y)	Receipt Nu	imber:
Management Representative		Technical P.I.C			Administrative P.I.C