**APPLICATION FOR FINAL SURVEY AND ISSUE OF CERTIFICATE**

To: NIPPON KAIJI KYOKAI

|  |  |  |  |
| --- | --- | --- | --- |
| Purchase Order No. |  | Application Date |  |

**APPLICANT**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name  Address |  | | | | Signature of Applicant | |  |
|  |  | | | | Name in Block Capitals | |  |
|  | TEL |  | FAX |  | E-mail |  | |

We hereby request that you carry out survey(s) and/or issue certificate(s) described below. This request is made on the basis that we accept the provisions of *REGULATIONS FOR THE CLASSIFICATION AND REGISTRY OF SHIPS 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. Whether surveys are completed or not, we agree to pay all survey fees and expenses incurred as a result of the above-mentioned survey(s) and/or issuance of relevant certificate(s) within the payment term designated on your invoice.

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

We ensure the payment of all survey fees and expenses incurred in the below-mentioned survey(s) and/or issue of relevant certificate(s).

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name  Address |  | | | | | | | Signature | | |  | |
| Name in Block Capitals | | |  | |
| TEL | |  | FAX | |  | | E-mail |  | | | |
| Ship’s Name: | | |  | | | G.T. | |  | | | Class No. | |  |
| Ship owner name | | |  | | | | | | | | IMO No. | |  |
| Flag | | |  | | | Official No. | |  | | | IMO registered owner No. | |  |
|  | | |  | | | Service Area | |  | | | IMO Company No. | |  |

1. Survey(s) to be carried out (Please tick in the appropriate box(es))

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Final Survey (HKC): | Current IHM certificate status: | | Valid | Invalid or Never issued |
|  | Approved Ship Recycling Plan: | | Available | Not Available |
| Final Survey (EU-SRR) (Note: Only applicable EU/EEA flagged ship) | |  |  |  |

2. Other Survey(s)

|  |  |
| --- | --- |
| Initial Survey (  HKC  EU-SRR) | Note: If the IHM Certificate has not been issued, an application for the Initial Survey must be submitted together with the Final Survey |

3. Certificate to be issued

|  |  |  |  |
| --- | --- | --- | --- |
| Ready for Recycling Certificate ( RfR ) (  HKC  EU-SRR) |  |  |  |

Remarks: For Statutory Certificates for Japanese flag ships, please apply to the Japanese Government.

4. Date and Place of Survey

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| (1) Place of Survey: | |  | | | | | | | |
| (2) Date of Survey: | |  | | ETA: | |  | | ETD: |  |
| (3) Name of Local Agent : | |  | | | | | Contact Person: | |  |
| (Tel) |  | | (E-mail) | |  | | | | |

5. Detail of Ship Recycling Facility information

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of Ship Recycling Facility: |  | | | |
| Address: |  | | | |
| Distinctive Recycling Company identify number\*: | |  | Date of expiry of DASR: |  |

\* This number is based on the Document of Authorization to conduct Ship Recycling (DASR)

6.Message (if any)

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7.Supplementary note

(1) This form is also available for Japanese flag ships.

(2) Please attach a copy of latest Certificate of Vessel’s Nationality and application for Ready for Recycling Certificate to the Japanese Government in case of Japanese flag ships.

- The End -