

機関継続検査(CMS)申込書**Application for Continuous Machinery Survey (CMS)**

日本海事協会 船級部(審査部門) 御中

To: ClassNK, Classification Department (Record Review Section)(E-Mail: cldjc@classnk.or.jp)

日付 / Date:

申込者(船舶管理会社) / Applicant (Ship Management Company):

所属 / Dept.:

氏名 / Name:

住所 / Address:

TEL:

E-Mail:

日本海事協会の「船級登録及び設備登録に関する業務提供の条件」を了承の上、下記船舶の機関継続検査(CMS)の採用を申し込みます。

We hereby request the application for CMS to the following ship. This request is made on the basis that we accept the provisions of CONDITIONS OF SERVICE FOR CLASSIFICATION OF SHIPS AND REGISTRATION OF INSTALLATIONS of NIPPON KAIJI KYOKAI.

船 名:

Ship's Name:

船級番号:

Class No.:

機関継続検査(CMS)は下記条件のもとに行います。

We assure you that the arrangement on Continuous Machinery Survey (CMS) will be made under the following conditions.

- (1) 機関継続検査(CMS)の各項目は、5年以内に検査を一巡させること。
One cycle of each Continuous Machinery Survey (CMS) item is to be completed within five (5) years.
- (2) 一部の機器を開放することにより、検査員が機関・装置全体の状態を類推できるように、受検計画を策定すること。
The survey schedule for each item of the machinery and equipment is to preferably be planned in such a way that the conditions of the other machinery and equipment can be assumed from the result of an open-up inspection of the machinery and equipment.
- (3) 他の船級より転入級した船舶では、前の船級より引継いだ CMS 各項目の受検期限を遵守すること。
In case of the ship class-transferred from other classification society, the due date of each CMS item succeeded to previous class to be observed.

添 付:

Attachment: Schedule of Continuous Machinery Survey (CMS)

(for NK Use)

配布先:

Distribution: 写し: 本船ファイル
1 Copy: Ship's File
写し: 船主
1 Copy: Shipowner