

## APPLICATION FOR APPROVAL OF AIRBORNE SOUND INSULATION PROPERTIES

(Initial Modification)

To: Material &amp; Equipment Department, NIPPON KAIJI KYOKAI

Date:

Name of Applicant:

Address:

Tel/Fax :

E-mail :

Name of the Person in Charge:

We hereby agreed to *Conditions of Service for Classification of Ships and Registration of Installations* and apply for approval of the airborne sound insulation properties of the following material under the requirements of An5.2, Annex 2.3.1-2, Part B of the *Rules for the Survey and Construction of Steel Ships* and in accordance with the requirements of Chapter 6, Part 4 of *Guidance for the Approval of Materials and Equipment for Marine Use* of Nippon Kaiji Kyokai.

Type of Product	
Trade Name	
Name and Address of Manufacturer	
Approval Nos. (for renewal or modification)	
Date(s) and Location(s) of Tests/Inspections	

Notes:

1. Use additional sheets if necessary
2.  Tick off where appropriate