

## Application for Rewrite of Certificate of Classification

To: NIPPON KAIJI KYOKAI (Classification Department)			Date:		
Fax: +81-43-294-5449 E-mail: cldjt@classnk.or.jp					
Applicant					
		Signati	Signature of		
Name:		Applio			
Address:		Name Block Ca	-		
		E-m			
Tel:		Fax:	411		
We hereby request that you rewrite the Certificate of Classification. This request is made on the basis that we accept the provisions of REGULATIONS AND GUIDANCE FOR THE CLASSIFICATION AND REGISTRY OF SHIPS, and CONDITIONS OF SERVICE FOR CLASSIFICATION OF SHIPS AND REGISTRATION OF INSTALLATIONS.					
Billing Contact					
☐ Same as Applicant					
**Please complete the following only in cases where the billing contact and the above applicant are different.					
Name: Address:		Signature:  Name in Block Capitals:			
		E-m	ail:		
Tel:		Fax:			
Ship's Name: Class No.: IMO No.:					
We, hereby request you to rewrite the Certificate of Classification for above ship.  Reason for Issuance:   Change of Registered Owner   Other ( )					
*If the ship's name, flag, and so on are changed, please send APPLICATION FOR SURVEYS AND ISSUE OF CERTIFICATES to our branch office nearest to the place of survey because occasional survey by our surveyor are required.					
1. Application for Issuance of Certificate of Particular Change*  * The above Certificate of Particular Change is an evidence that proves change of registered owner, until NK surveyor will rewrite them on documents such as Cargo Gear Booklet and SOPEP at the next survey, but this certificate is an option.					
2. Remarks:					

Attachment: (Provisional) Certificate of Registry