APPLICATION FOR APPROVAL OF USE OF SHIPBOARD INCINERATOR								
(Initial Renewal Modification)								
To: Material & Equipment Department, NIPPON KAIJI KYOKAI 3-3, Kioi-cho, Chiyoda-ku, Tokyo 102-0094, JAPAN								
	Ref. No.: Date:							
Name of Applicant:								
Address:								
Tel/Fax:								
E-mail:								
Name of the Person in Charge:								
We hereby apply for approval of use of the following shipboard incinerator in accordance with the requirements of Chapter 10, Part 2 of the Guidance for the Approval and Type Approval of Materials and Equipment for Marine Use of Nippon Kaiji Kyokai.								
Names/Types of shipboard incinerator								
Type approval Nos. If Available								
Particulars								
Names of Manufacturer and Production Site								
Address of Manufacturer								
Drawings and Documents Attached	Drawings							
	Documents							
Date(s) and Location(s) of Tests/Inspections								

Notes:

- 1. Use additional sheets if necessary
- 2.

 Tick off where appropriate