## APPLICATION FOR APPROVAL OF VENTING SYSTEMS AND RELATED EQUIPMENT FOR TANKERS ( Initial Modification) To: Material & 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 following venting systems and related equipment under the requirement of 4.5.3 and 11.6, Part R of the Rules for the Survey and Construction of Steel Ships and in accordance with the requirements of Chapter 7, Part 6 of Guidance for the Approval and Type Approval of Materials and Equipment for Marine Use of Nippon Kaiji Kyokai. □PV valve Flame screen Flame arrester Detonation flame arrester Product High velocity device High level alarm system Rupture disc Pressure monitoring system Trade Name Name and Address of Manufacturer Approval Nos. (for modification) Date(s) and Location(s) of Tests/Inspections

## Notes:

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