Form 8-1

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| Application form for Type tests  (☐New ☐Change ☐Renewal)  Date  Nippon Kaiji Kyokai (ClassNK)  Name of applicant  Address  Telephone, Fax, E-mail etc.  We hereby agree with the provisions of "*REGULATIONS FOR THE CLASSIFICATION AND REGISTRY OF SHIPS, CONDITIONS OF SERVICE FOR CLASSIFICATION OF SHIPS AND REGISTRATION OF INSTALLATIONS*" of NIPPON KAIJI KYOKAI and request to apply Type Tests for the product mentioned below. We agree to pay all survey fees and expenses incurred as a result of the above-mention services regardless of whether the results of the services are acceptable or not. | | |
| Product name | |  |
| Type (the same type is to be stated in attached sheet) | |  |
| Particulars (or ratings) | |  |
| Application standards  (publishing year is also to be stated) | |  |
| Name of manufacturer  (name of works is also to be stated) | |  |
| Address of Manufacturer  (Tel, Fax No., E-mail) | |  |
| Attached data | Drawings | Drawing No. of main part |
| Other data |  |
| Expected date of tests | |  |
| Reference for liaison | Address,  Tel, Fax, E-mail |  |
| Name of section in charge:  Name of the person: |  |
| Remarks |  |  |

Notes:

1. In case of shortage of space, fill out in a separate sheet(s).

2. Check the item concerned. Take off unnecessary characters with lines.