MY CLASSIFICATION

APPLICATION FOR APPROVAL AS SERVICE SUPPLIER

Ref. No:

This form should be filled in by the applicants applying for MY Classification's approval as service supplier/ servicing station in accordance with the Society's Rules for Classification of Ships. The application is to be forwarded by email, fax or online application.

Company Name:			
Address:			
Telephone No:		Telefax:	E-mail:
Contact Person(s):			
Parent Company Name(s):			
Address:			

Type of service(s) provided / to be approved (check off all applicable):

☐	Service suppliers engaged in thickness measurements on ships or mobile offshore units.
☐	Service suppliers carrying out in- water survey on ships and mobile offshore units.
☐	Service suppliers engaged in inspections and maintenance of fire-extinguishing equipment and systems.
☐	Service suppliers engaged in servicing inflatable life-rafts, inflatable lifejackets, hydrostatic release units, marine evacuation systems.
☐	Service suppliers engaged in the inspections and testing of radio communication equipment.
☐	Service suppliers engaged in annual performance testing of Voyage Data Recorders (VDR) and simplified Voyage Data Recorders (S-VDR).
☐	Service suppliers engaged in inspection, performance testing, and maintenance of Automatic Identification Systems (AIS).
☐	Service suppliers engaged in inspections and maintenance of self-contained breathing apparatus.
☐	Service suppliers engaged in maintenance, thorough examination, operational testing, overhaul, and repair of lifeboats and rescue boats, launching appliances, and release gear.
☐	Service suppliers engaged in measurements of noise level on board ships.
☐	Service suppliers engaged in the examination of bow, stern, side, and inner doors of Ro-Ro ships.
☐	Service suppliers engaged in tightness testing of primary and secondary barriers of gas carriers with membrane cargo containment systems for ships in service.
☐	Service suppliers engaged in survey using remote inspection techniques (RIT) as an alternative means for close-up survey of the structure of ships and mobile offshore units.
☐	Service suppliers engaged in visual and / or sampling checks and preparation of Inventory of Hazardous Materials (IHM).
☐	Service suppliers engaged in noise and vibrations measurements within the scope of COMF class notation.
☐	Service suppliers engaged in underwater radiated noise measurements related to URN class notation.
☐	Service supplier engaged in watertight Cable Transit Seal Systems inspection on ships and Mobile Offshore Units.
☐	Service supplier engaged in condition monitoring and condition-based maintenance.
☐	Service suppliers engaged in sound pressure level measurements of public address and general alarm systems.
☐	Service suppliers engaged in inspections of low-location lighting systems using photoluminescent materials and evacuation guidance systems used as an alternative to low-location lighting systems.
☐	Service suppliers engaged in commissioning testing of Ballast Water Management System (BWMS).

Number of Employees: (Note: If there is a company organogram, please attach a copy)
Types of specialized equipment used:
Area of Service Coverage (State / Port):

I request that MY Classification accept this application for approval as Service Supplier for the above listed Company, as reflected by our choice(s) selected. I request that MYC visit our firm as deemed necessary, in order to facilitate the approval process.

It is understood that the event of the specified approval not being completed, then MY Classification reserves the right to charge fees for costs already incurred.

Signature: .....

Name (in block capitals): .....

Place: .....

Date: .....