MY CLASSIFICATION

APPLICATION FOR SURVEY / AUDIT

NAME OF SHIP	OFFICIAL NUMBER	PORT OF REGISTRY	GROSS TONNAGE	OUTPUT (kW)

TYPE OF SHIP			
OWNER			
PLACE OF SURVEY		☐ AFLOAT	☐ DRY-DOCK
DATE OF SURVEY			
CONTACT PERSON			
CONTACT NUMBER	☐ TELEPHONE:	☐ FAX:	

SURVEY(S) / AUDIT(S) TO BE CARRIED OUT:

1. CLASS SURVEYS

☐ ADMISSION TO CLASS FOR NEW BUILDING	☐ EXTENSION FOR CLASS RENEWAL SURVEY
☐ ADMISSION TO CLASS FOR EXISTING SHIP	☐ WITNESS OF TESTS
☐ CLASS RENEWAL SURVEY	☐ DAMAGE SURVEY
☐ INTERMEDIATE SURVEY	☐ OCCASIONAL SURVEY FOR DELETION OF CONDITION OF CLASS
☐ ANNUAL SURVEY	☐ WELDER QUALIFICATION TEST (WQT)
☐ DOCKING SURVEY	☐ MATERIAL / COMPONENT SURVEY (CMC)
☐ IN-WATER SURVEY	☐ EQUIPMENT SURVEY
☐ CONTINUOUS MACHINERY SURVEY (CMS)	☐ OTHER OCCASIONAL SURVEYS
☐ PROPELLER SHAFT & STERN TUBE SURVEY	☐ _____
☐ BOILER SURVEY	☐ _____
☐ CRANE / LIFTING APPLIANCES SURVEY	☐

2. STATUTORY SURVEYS

☐ INTERNATIONAL LOAD LINE SURVEY (ILLC)	☐ INTERNATIONAL OIL POLLUTION PREVENTION (IOPP) SURVEY
☐ MALAYSIA LOCAL FREEBOARD SURVEY	☐ INTERNATIONAL AIR POLLUTION PREVENTION (IAPP) SURVEY
☐ CARGO SHIP SAFETY CONSTRUCTION SURVEY	☐ INTERNATIONAL SEWAGE POLLUTION PREVENTION (ISPP) SURVEY
☐ SAFETY CONSTRUCTION (NON-CONVENTION) SURVEY	☐ BALLAST WATER MANAGEMENT SURVEY (BWM)
☐ CARGO SHIP SAFETY EQUIPMENT SURVEY	☐ HIGH SPEED CRAFT SAFETY CERTIFICATE HSC CODE
☐ SAFETY EQUIPMENT (NON-CONVENTION) SURVEY	☐ DYNAMICALLY SUPPORTED CRAFT CONST. & EQ. CERTIFICATE
☐ CARGO SHIP SAFETY RADIO SURVEY (GMDSS)	☐ SPECIAL PURPOSE SHIP SAFETY CERTIFICATE
☐ SAFETY RADIO TELEPHONY SURVEY	☐ INTERNATIONAL SAFETY MANAGEMENT CODE (SMC / DOC) ISM AUDIT
☐ OCCASIONAL SURVEY	☐ INTERNATIONAL SHIP AND PORT FACILITY AUDIT (ISPS)
☐ MARITIME LABOUR CONVENTION SURVEY	☐ CREW ACCOMMODATION SURVEY

THE APPLICANT AGREES TO PAY THE SURVEY FEES AND THE SURVEY EXPENSES ARISING FROM THE ABOVE SURVEYS / AUDITS. THE FEES WILL BE PAID BY:

_____	_____	_____
NAME	**COMPANY CHOP & SIGN**	**DATE**

FOR INTERNAL USE ONLY

APPLICATION FOR SURVEY RECEIVED BY	:	☐ FAX	☐ PHONE	☐ VERBAL	☐ EMAIL	
JOB ORDER NUMBER ASSIGNED	:	☐ YES	☐ NO		JOB ORDER NO.	:
SURVEYOR ASSIGNED	:	☐ YES	☐ NO		SURVEYOR	:
REVIEWED BY	:				DATE	: