# Questionnaire for Admission to Class (Dry Cargo Vessel)

**Ship Type**
- [ ] General cargo vessel
- [ ] Multi purpose vessel
- [ ] Bulk carrier
- [ ] Container vessel
- [ ] Ro-Ro vessel up to 12 passenger
- [ ] Cargo High Speed Craft
- [ ] Other Dry Cargo Shiptype

**Ship Data**
- **Name of Vessel**
- **IMO No.**
- **GL No.**

**Sister ships**

**Current flag**

**Intended flag**
- [ ] Block fee quotation not requested

**Date of keel laying**

**Date of delivery**
- [ ] Continuous survey system machinery requested
- [ ] Planned maintenance system requested

**No. of crew members**

**Current classification society**

**Owner’s full style address**
(if prospective owner please attach copy of "bill of sale" or "memorandum of agreement")

**VAT Reg. No.**

**PO Number**

**Country**

**Contact Person**

**Ship manager's address**
(if not identical with owner's address)

**VAT Reg. No.**

**Invoicing address**
(if not identical with owner’s address)

**VAT Reg. No.**

**Country**

**Statutory certificates requested**
(if possible please attach a copy of present certificates)

**Presently issued by Present class society**

**Flagstate / Authority**

**Only internal use for DNV GL H.O. Scope of survey**

**Load Line and SOLAS**
- [ ] Load Line Certificate
- [ ] Cargo Ship Safety Construction Certificate
- [ ] Cargo Ship Safety Equipment Certificate
- [ ] Cargo Ship Safety Radio (Certificate only, expert excluded)
- [ ] DoA for the Carriage of Grain*
- [ ] DoC for the Carriage of Dangerous Goods
- [ ] DoC for the Carriage of Solid Bulk Cargoes*
- [ ] Exemption Certificate:

* Vessels equipped with certificates marked ** will be classed as Multi Purpose Dry Cargo Ships.
### Questionnaire for Admission to Class (Dry Cargo Vessel)

**Statutory certificates requested**

(if possible please attach a copy of present certificates)

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<tr>
<th>Certificate</th>
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#### MARPOL

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#### Tonnage

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#### Others

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#### Manual to be reviewed

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### Other Certification / Services (separate quotation)

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### Further requirements

**Business Development Manager / DNV GL Representative**

**Place / Date**

**Customer Representative**

**Place / Date**

Please return all pages to your contact.