|  |  |  |
| --- | --- | --- |
|  | **APPLICATION FOR APPROVAL OF RECOGNIZED ORGANIZATIONS** | |
| **Europe Head Office**  5, Sachtouri Street  Piraeus, Greece,  18536, 6th floor  T: +30 210 4293500  F: +30 210 4293505 | **USA Head Office**  The Woodlands, TX, 77380 9595 Six Pines Drive,  Suite 8210, Office 277  T: +1 832 631 6061  F: +1 832 631 6001 |

part 1. ORGANIZATION GENERAL INFORMATION

|  |  |  |  |
| --- | --- | --- | --- |
| Organization Name: |  | | |
| Address: |  | Town/City |  |
| Country |  | Post/Zip Code |  |
| Telephone Number: |  | Fax Number: |  |
| Email: |  | Website: |  |

part 2. contact details

|  |  |  |  |
| --- | --- | --- | --- |
|  | Managing Director | Technical Director | Contact Person  (If other than Managing Director) |
| Name |  |  |  |
| Surname |  |  |  |
| Citizenship |  |  |  |
| Passport No |  |  |  |
| Address |  |  |  |
| Town/City |  |  |  |
| Country |  |  |  |
| Post/Zip Code |  |  |  |
| Telephone Number |  |  |  |
| Cell Number |  |  |  |
| Fax |  |  |  |
| Email |  |  |  |

part 3. Minimum Standards for RO (ref. Section 3 of Appendix 1 to A.739(18))

|  |  |  |
| --- | --- | --- |
| Does the Organization have functions delegated by another Administration(s)? | | Yes  No |
| If “Yes”, does the Organization meet the Minimum Standards for RO? | | Yes  No |
| If “Yes”, please answer below (1 to 9): | | | |
| 1 | Are rules and regulations published and maintained? | Yes  No |
| 2 | Are representatives of the Administration(s) allowed to participate in the development of the RO’s rules and regulations? | Yes  No |
| 3 | Is the RO governed by principles of ethical behavior? | Yes  No |
| 4 | Does the RO demonstrate technical, administrative and managerial competence? | Yes  No |
| 5 | Does the RO provide relevant information to the Administration(s)? | Yes  No |
| 6 | Has the RO’s management defined and documented its policy and objectives for quality, and implemented it? | Yes  No |
| 7 | Does the RO have Online Database for fleet registered and provide access to Survey Status? | Yes  No |
| 8 | Has the RO developed, implemented and maintained an effective internal quality system? | Yes  No |
| 9 | Has the RO certified its quality system by an independent body of auditors? | Yes  No |

part 4. Internal quality system

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Does the Organization hold valid ISO 9001:2015 Certification? | | | | | Yes  No | |
| Certified By: |  | | | | | | |
| Issued Date: |  | Next Surveillance Date: |  | Expiration Date: | |  | |

part 5. number of employees

|  |  |  |
| --- | --- | --- |
|  | Headquarters | Field |
| Supervisory Personnel: |  |  |
| Technical Appraisal Personnel: |  |  |
| Exclusive Survey Personnel: |  |  |
| Administrative Personnel: |  |  |

part 6. billateral relationship(s)

|  |  |
| --- | --- |
| Does the company have any bilateral agreement with another RO(s)? | Yes  No |
| If “Yes”, please name the RO(s): |  |

part 7. fleet statistics

|  |  |  |  |
| --- | --- | --- | --- |
| Number of Vessels currently holding statutory certificates issued by the Organization: | |  | |
|  | | |
| Fleet percentage estimation per type of vessels: | Passenger Ship |  | |
| Bulk Carrier |  | |
| Oil Tanker |  | |
| Gas Carrier |  | |
| Mobile Offshore Drilling Unit |  | |
| Other Cargo Ship |  | |
|  | | | | |
| Fleet percentage estimation per vessel GRT: | 0 – 1,000 |  | |
| 1,000 – 10,000 |  | |
| 10,000 – 50,000 |  | |
| 50,000 – 200,000 |  | |
| 200,000 + |  | |
|  | | | | |
| Fleet percentage estimation per vessels age: | 0 – 5 |  | |
| 5 – 15 |  | |
| 15 – 25 |  | |
| 25 + |  | |

# part 8. PSC/USCG performance in the past three (3) years

|  |  |  |
| --- | --- | --- |
|  | Inspections | Detentions |
| Paris MoU |  |  |
| Tokyo MoU |  |  |
| US Coast Guard |  |  |

# part 9. Required information to be attached to this application

|  |
| --- |
| 1. Copy of valid ISO 9001:2015 Certificate |
| 1. Code of Ethics, Company Mission Statement and Quality Objectives |
| 1. List any Flag Administration(s) given authorization to the Organization, along with letter of Authorization or evidence of authorization |
| 1. Article of Incorporation of the Company |
| 1. Organization Chart indicating the Organization’s structure |
| 1. CV of Managing Director |
| 1. CV of Technical Director |
| 1. List of Active RO Surveyors/Auditors along with their qualifications and respective geographical area distribution |
| 1. RO Procedure in case of PSC Inspection / Detention and communication with Flag |
| 1. RO Procedure for criteria for acceptance, verification, validation, monitoring and inspection of vessels |
| 1. System/Process of communicating with the Flag in case that statutory or class is suspended |
| 1. System/Process of communicating with the Flag in case of overdue surveys and recommendations |
| **In order to complete this Application, the Palau Flag Authorization may request an onsite audit.** |

part 10. applicant and signature

|  |  |  |  |
| --- | --- | --- | --- |
| I (applicant name)  hereby declare that I am Authorized Person to act on behalf of the Organization and that all information contains in this written application herein are true and correct. | | | |
| Signature | Date | | |
|  |  | | |
|  |  | | |
| A black and silver text on a white surface  Description generated with high confidenceScan to download this  application form |