To: CR Classification Society

Fax: +886-2-2507-4722 Email: cr.tp@crclass.org

LOGIN ID								
	Please	do	not	fill	in	this	blank.	

APPLICATION FOR ARCHIVE CENTER SERVICE

We hereby apply for the Archive Center service with the information given below.

Applicant (IP-Holder)						
Company Name						
Contact Person						
TEL						
E-mail						
Ship						
Shipowner						
IMO number						
Hull number						
Ship name						
drawings concerning lawful and compliand designated represent to fill out this appropriate application must be application must be 2. The applicant commorequired by the CR. The applicant will statistically standard, being submitted ship data and the applicant will the trights. The applicant and the obligations center, the center research.	rm is only applicable for a g a specific vessel. During ant use, updates, and reneratives through written doculication form separately. adhered to. Archive Center, the application and use it lawfully and compake sufficient caution to eat shall bear all losses cause required by the SCF IS/SO serves the right to seek recomposition.	the validity period of wal of ship drawing aments such as emathowever, the secondrawings are not invent shall provide related and the principe, authenticity, accumpliantly. Insure no infringent and by the failure to a standard. If lossourse.	of the bings can ails or fa and and volved in levant delevant delevant of a fulfill ces are in greemen	ilateral be paxes, which is the paxes, which is the paxes, which is the paxes, which is the paxes of the paxe	l agreen roposed vithout clause egal dis entary e ents desc pletene: ird parti- tual obl d to the een both	ment, the d by the the need e of this sputes. If evidence, cribed in ss of the y's legal ligations e archive th parties
Name and Signature			year nte		nonth	date

Form No. XM123 / 11.2024