

**SURVEY DEPARTMENT****MARINE SURVEY REQUISITION FORM**

<b>1</b>		<b>DETAIL OF APPLICANT</b>	
1.1	Company Name	:	_____
1.2	Address	:	_____ _____ _____
1.3	Tel. No.	:	_____
1.4	Fax No.	:	_____
1.5	Email	:	_____
1.6	Contact person / Tel. No.	:	_____
<b>2</b>		<b>TYPE OF SURVEY REQUESTED</b>	
<i>Please tick on relevant column</i>			
2.1	:	Damage Survey / Insurance Claim / Loss Adjusting	
		(i)	Commodity
		(ii)	Container
		(iii)	Vessel / Ship Hull and Machinery
2.2	:	Quality and Quantity Survey	
		(i)	Outturn Survey (Petroleum Clean Product)
		(ii)	Vessel Draft Survey
		(iii)	Dry Bulk
		(iv)	Pre-shipment Inspection and Sampling
2.3	:	Ship Related Survey	
		(i)	Bunker Survey
		(ii)	Suitable Survey
		(iii)	Hold and Tank Cleaning Certification
		(iv)	Stowage Survey
		(v)	Lashing and Securing Survey
		(vi)	Ships Condition Survey
		(vii)	Pre-loading Survey
		(viii)	On and Off hire Survey
		(ix)	On and Off hire Survey
<b>3</b>		<b>PLACE / LOCATION OF SURVEY REQUESTED</b>	
3.1	Name	:	_____
3.2	Address	:	_____ _____ _____
3.3	Tel. No.	:	_____
3.4	Email	:	_____
3.5	Fax No.	:	_____
3.5	Contact person / Tel. No.	:	_____

**SURVEY DEPARTMENT****MARINE SURVEY REQUISITION FORM****4 OTHER INFORMATION**

4.1	Target date of survey	:		
4.2	Is it a joint survey	:	Yes	No
4.3	Is it for Insurance	:	Yes	No
4.4	Is it for P & I club	:	Yes	No

**5. Declaration**

*"We hereby declare that the details finished are true and correct and we undertake to inform you that of any changes there in, immediately.*

*In case any of the above information is found to be untrue of misleading or misrepresenting, we are aware that we may be held liable for it"*

Name : \_\_\_\_\_

Signature : \_\_\_\_\_

Designation : \_\_\_\_\_

Tel. No. : \_\_\_\_\_

Fax No. : \_\_\_\_\_

E-mail : \_\_\_\_\_