



Rev.2

Application for Bahamas Authorised Service Provider Certificate of Authorisation under MSC.402(96)

Application type

- | | |
|------------------------|--------------------------|
| New authorisation | <input type="checkbox"/> |
| Authorisation renewal | <input type="checkbox"/> |
| Request for amendments | <input type="checkbox"/> |

Application for:

Original Equipment Manufacturer (OEM)

- | | |
|---|--------------------------|
| Acting as service provider for own equipment only | <input type="checkbox"/> |
| Acting as service provider for equipment other than own equipment | <input type="checkbox"/> |

Independent service provider

- | | |
|---|--------------------------|
| Certified by a Bahamas Recognised Organisation | <input type="checkbox"/> |
| Authorised by another Administration | <input type="checkbox"/> |
| Certified to ISO9000 standard | <input type="checkbox"/> |
| Certified to a recognised equivalent to ISO 9000 standard | <input type="checkbox"/> |

Ship operator acting as an independent service provider (for own ships only)

- | | |
|---|--------------------------|
| Certified by a Bahamas Recognised Organisation | <input type="checkbox"/> |
| Authorised by another Administration | <input type="checkbox"/> |
| Certified to ISO9000 standard | <input type="checkbox"/> |
| Certified to a recognised equivalent to ISO 9000 standard | <input type="checkbox"/> |

Please state make and type:

Make & Type listing		
Equipment	Types or Ranges	Manufacturers

** If more space is required please re-print page 2 as needed.

Please attach copies of the following documents:

1. Home country Company Registration Certificate/Certificate of Incorporation.
2. Illustrative company organisation and management structure.
3. Latest ISO 9000 Series Certification or equivalent.
4. Certification issued by another Administration or Recognised Organisation.
5. Evidence of approval/acceptance by other bodies, if any.
6. Evidence of availability of documented procedures and instructions for the selected Make & Type.
7. Evidence of Training Matrix for the selected Make and Type.
8. Evidence of qualification on job matrix and its verification.
9. Evidence of service and experience in the selected make and type of equipment.
10. Evidence of publication subscription and availability to IMO, international standards, as applicable, and Service Bulletins applicable to the selected Make & type.
11. Evidence of procedures and instructions for the recording of damages and defects found during the inspection, servicing and repair work.
12. Procedures and instructions for control and management of the quality work of subcontractors, if any.
13. Evidence of Data control to protect records, reports, jobs performed along with vessel name and by which personnel.
14. Evidence of record-keeping of the operator, technician and Supervisor, the record shall contain formal education, training and experience to the equipment to which they are qualified.
15. Records of customer complaints.

Application Date:

Signature: