

APPLICATION FOR CERTIFICATION OF LIFT

Date:
Manufacture's name:
Representative's name:
Address:
Telephone No:

**To
Hellenic Register of Shipping
23, Akti Miaouli
Piraeus, 18535**

ΘΕΜΑ: Application for certification of lift

We would like to apply for certification of a hydraulic / electric lift which is established at the following address:

Street:
Number: Town: P.C.:

Evaluation process:

I submit the following attached documents:

- a. Technical documentation
- b.
- c.

DECLARATION

I have never submitted to another notified body any application of certification of lift for the above product.

The applicant