



SAFETY MANAGEMENT CERTIFICATE

REPUBLIC OF MARSHALL ISLANDS

Issued under the provisions of the INTERNATIONAL CONVENTION FOR THE SAFETY OF LIFE AT SEA, 1974, as amended Under the authority of the Government of the Republic of Marshall Islands by NIPPON KAIJI KYOKAI

Name of ship:

TS DALIAN

Distinctive number or letters:

9749

Port of registry:

Majuro

Type of ship*:

Other cargo ship

Gross tonnage:

28,007

IMO Number:

IMO 9348857

Name and address

Fleet Management Limited

of the Company:

27th Floor, South Island Place, 8 Wong Chuk Hang Road,

HONG KONG

Company identification number:

IMO 1601573

THIS IS TO CERTIFY THAT the Safety Management System of the ship has been audited and that it complies with the requirements of the International Management Code for the Safe Operation of Ships and for Pollution Prevention (ISM Code), following verification that the Document of Compliance for the Company is applicable to this type of ship.

This Safety Management Certificate is valid until 14th April 2027 , subject to periodical verification and the Document of Compliance remaining valid.

Completion date of the verification on which this certificate is based: 15th April 2022

Issued at

Busan

Date of issue

15th April 2022

Anniversary Date: 14th April



H. B. BAE, Auditor

NIPPON KAIJI KYOKAI



Insert the type of ship from among the following: passenger ship; passenger high-speed craft; cargo high-speed craft; bulk carrier; oil tanker; chemical tanker; gas carrier; mobile offshore drilling unit; other cargo ship.

ENDORSEMENT FOR PERIODICAL VERIFICATION AND ADDITIONAL VERIFICATIONS (IF REQUIRED)

THIS IS TO CERTIFY THAT, at the periodical verification in accordance with regulation IX/6.1 of the Convention and paragraph 13.8 of the ISM Code, the safety management system was found to comply with the requirements of the ISM Code.

Intermediate Verification (to be completed between the second and the third anniversary date)	Signed:	(Signature of authorized official)
	Place:	
	Date:	
Additional Verification	Signed:	(Signature of authorized official)
		(Signature of authorized official)
	Place:	
	Date :	
Additional Verification	Signed:	(Signature of authorized official)
	Place:	
	Date :	
Additional Verification	Signed:	(Signature of authorized official)
	Place :	*
	Date :	



ENDORSEMENT WHERE THE RENEWAL VERIFICATION HAS BEEN COMPLETED AND PART B 13.13 OF THE ISM CODE APPLIES

alid until		
	Signed:	(Signature of authorized official)
		(Signature of authorized official)
	Place:	
	Date:	
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