Certificate No. **24HB-M001200ATGDOC**

# DOCUMENT OF COMPLIANCE

**ANTIGUA AND BARBUDA**

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 Antigua and Barbuda
by NIPPON KAIJI KYOKAI

Name and address of the Company : (see paragraph 1.1.2 of the ISM Code) **Jüngerhans Maritime Services GmbH & Co. KG**

**Boschstrasse 31, 49733 Haren/Ems / GERMANY**

Company identification number : **IMO 1346032**

**THIS IS TO CERTIFY THAT** the Safety Management System of the Company 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) for the types of ships listed below (delete as appropriate):

~~**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**

This Document of Compliance is valid until **13th May 2029** , subject to periodical verification.

Completion date of the verification on which this certificate is based: **8th May 2024**

Issued at **Hamburg**
Date of issue **8th May 2024**
Anniversary Date : **13th May**

**Kai Thielemann, Auditor**

**NIPPON KAIJI KYOKAI**



https://e-certificate.classnk.or.jp/veryfication.aspx?imo=1346032&tid=43509-71713-07457-42188

# ENDORSEMENT FOR ANNUAL VERIFICATION

**THIS IS TO CERTIFY THAT**, at the periodical verification in accordance with regulation IX/6.1 of the Convention and paragraph 13.4 of the ISM Code, the Safety Management System was found to comply with the requirements of the ISM Code.

**1st Annual Verification**

Signed Kai Thielemann
(Signature of authorized official)

Place Harren, Ems, Germany

Date 17th July 2025

**2nd Annual Verification**

Signed Min Qu, Jan Habighorst
(Signature of authorized official)

Place Haren, Ems, Germany

Date 16th July 2026

**3rd Annual Verification**

Signed .....
(Signature of authorized official)

Place .....

Date .....

**4th Annual Verification**

Signed .....
(Signature of authorized official)

Place .....

Date .....



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