

Certificate No. **18YH-M0067SMC****SAFETY MANAGEMENT CERTIFICATE****REPUBLIC OF PANAMA**

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 Panama
by NIPPON KAIJI KYOKAI

Name of ship : **MOL ENDOWMENT**
Distinctive number or letters : **3EMV4**
Port of registry : **Panama**
Type of ship* : **Other cargo ship**
Gross tonnage : **54098**
IMO Number : **IMO 9333852**
Name and address
of the Company : **MOL SHIP MANAGEMENT (SINGAPORE) PTE.
LTD.**

**5 SHENTON WAY #17-04, UIC BUILDING,
SINGAPORE 068808**

Company identification number : **IMO 5261954**

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 **9th July 2023** , subject to periodical verification and the Document of Compliance remaining valid.

Completion date of the verification on which this certificate is based: **10th July 2018**

Issued at **Yokohama**
Date of issue **10th July 2018**
Anniversary Date : **9th July**



S. AKEDA, 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: [Handwritten Signature]
(Signature of authorized official)

Place: SAVANNAH, GA., USA

Date: 9 NOVEMBER 2020

Additional Verification

Signed: _____
(Signature of authorized official)

Place : _____

Date : _____

Additional Verification

Signed: _____
(Signature of authorized official)

Place : _____

Date : _____

Additional Verification

Signed: _____
(Signature of authorized official)

Place : _____

Date : _____