

# DOCUMENT OF COMPLIANCE

Certificate No:  
**n1556723-jwi**  
DNV Id No:  
**181953**  
Date of issue:  
**2021-06-30**

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 LIBERIA

by DNV

### Particulars of Company <sup>1</sup>

Company Name:	<b>Yang Ming Marine Transport Corporation</b>
Company Address:	<b>No. 271, Ming De 1st Road, Cidu District, Keelung 20646, Taiwan CHINA</b>
Company Identification Number:	<b>0415893</b>

### 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:

**Other cargo ship**

**(Container ship)**

This Document of Compliance is valid until: **2026-08-08**, subject to periodical verification.

Completion date of audit on which this Certificate is based: **2021-06-30**

Issued at **Keelung, Taiwan, China** on **2021-06-30**



for DNV

*This document is signed electronically in accordance with IMO  
FAL.5/Circ.39/Rev.2. Validation and authentication can be obtained from  
trust.dnv.com by using the Unique Tracking Number (UTN):  
n1556723-jwi and ID: 181953*

**Edward Wen-Jen Wu**  
Auditor

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<sup>1</sup> See paragraph 1.1.2 of the ISM Code.





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**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.

Anniversary date is

**08 Aug**

Range:

**08 May to 08 Nov**

\*Renewal range is three (3) months prior to DOC expiration

1st Annual Verification

Place: .....

Date: .....

Signature: .....

Stamp

2nd Annual Verification

Place: .....

Date: .....

Signature: .....

Stamp

3rd Annual Verification

Place: .....

Date: .....

Signature: .....

Stamp

4th Annual Verification

Place: .....

Date: .....

Signature: .....

Stamp