



DOCUMENT OF COMPLIANCE

Certificate No:
n1615287-ira
DNV Id No:
10400278
Date of issue:
2021-07-16

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 CYPRUS

by DNV

Particulars of Company ¹

Company Name: **Petronav Shipmanagement Ltd.**

Company Address: **145-149 Chr. Hadjipavlou Street
3036 Limassol
CYPRUS**

Company Identification Number: **1841621**

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:

**Chemical tanker
Oil tanker**

This Document of Compliance is valid until: **2024-04-20**, subject to periodical verification.

Completion date of audit on which this Certificate is based: **2019-04-10**

Issued at **Limassol, Cyprus** on **2021-07-16**



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):
n1615287-ira and ID: 10400278*

Evgenios Koumoudhis
Auditor

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¹ See paragraph 1.1.2 of the ISM Code.



Form code: ISMC 101

Revision: 2021-03

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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

20 Apr

Range:

20 Jan to 20 Jul

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

1st Annual Verification

Place: **Limassol, Cyprus**

Date: **2020-07-17**



Signature: **Evgenios Koumoudhis**

2nd Annual Verification

Place: **Limassol, Cyprus**

Date: **2021-07-16**



Signature: **Evgenios Koumoudhis**

3rd Annual Verification

Place: _____

Date: _____

Signature: _____

Stamp

4th Annual Verification

Place: _____

Date: _____

Signature: _____

Stamp