

Material Declaration

<Date of declaration>

Date	
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<MD ID number>

MD-ID-No.	
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<Supplier (respondent) information>

Company name	
Division name	
Address	
Contact person	
Telephone number	
Fax number	
E-mail address	
SDoC ID-No.	

<Other information>

Remark 1	
Remark 2	
Remark 3	

<Product information>

Product name	Product number	Delivered unit		Product information
		Amount	Unit	

<Material information>

This materials information shows the amount of hazardous materials contained in

1	Unit
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Table	Material name	Threshold level	Present above threshold level	If yes, material mass		If yes, information on where it is used
			Yes/No	Mass	Unit	
Table A** <small>(materials listed in appendix 1 of the Convention)</small>	Ozon depleting substance	0.1%*				
		50 mg/kg				
		no threshold level				
		no threshold level				
		no threshold level				
		no threshold level				
		no threshold level				
		no threshold level				
		no threshold level				
		no threshold level				
Table B** <small>(materials listed in appendix 2 of the Convention)</small>		2,500 mg total tin/kg				
		100 mg/kg				
		1,000 mg/kg				
		1,000 mg/kg				
		1,000 mg/kg				
		50 mg/kg				
		1,000 mg/kg				
		50 mg/kg				
		no threshold level				
	1%					
Annex II*** <small>(Additional materials)</small>		no threshold level				
		no threshold level				

*Please refer to footnote 18 on the "Form of Material Declaration" in the IMO Guidelines Resolution MEPC.269(68).
 **Hong Kong International Convention for the Safe and Environmentally Sound Recycling of Ships, 2009 (SR/CONF/45).
 ***Regulation EU No. 1257/2013 of the European Parliament and of the Council of 20 November 2013 on Ship Recycling and amending Regulation EC No. 1013/2006 and Directive 2009/16/EC

Supplier's Declaration of Conformity for Material Declaration Management

1) SDoC No.: _____

2) Issuer's name: _____

Issuer's address: _____

3) Object(s) of declaration: 1) _____
 2) _____
 3) _____
 4) _____

4) The object(s) of the declaration described above is/are in conformity with the following documents:

5) **Applicable Regulations or other stipulated requirements and documents**

Document No.	Title	Edition	Date of issue

6) **Additional Information:**

Signed for and on behalf of: _____

Place of issue

Date of issue

7) Erica Yu

Name, function



Signature