Republic of the Philippines
Department of Transportation and Communications
MARITIME INDUSTRY AUTHORITY

Observations

ISM CODE CERTIFICATION

Date: _____

Name of Company: MARINA Accreditation No.:	Name of Ship: Official No.:
Lead Auditor:	☐ Company Audit ☐ Ship Audit
Audit Team Member(s):	Audit Date:
Description of Observation/s:	

Company Representative/DP/Master:……
(Printed Name & Signature)

Lead Auditor: …….. Member Auditor(s): ……
Signature Signature