

# DOCUMENT OF COMPLIANCE

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

United States of America

(name of state)

by the **AMERICAN BUREAU OF SHIPPING**

Name and address of the Company: **HARVEY GULF INTERNATIONAL MARINE, LLC.**

701 POYDRAS STREET SUITE 3700

NEW ORLEANS LA 70139 United States

(see paragraph 1.1.2 of the ISM Code)

Company identification number: **1140931**

**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 (delete as appropriate):

- ~~Passenger Ship~~                      Other Cargo Ship                      Offshore Support Vessel
- ~~Passenger high Speed Craft~~
- ~~Cargo High Speed Craft~~
- ~~Bulk Carrier~~
- ~~Oil Tanker~~
- ~~Chemical Tanker~~
- ~~Gas Carrier~~
- ~~Mobile Offshore Drilling Unit~~

This Document of Compliance is valid until 11 September 2021, subject to periodical verification.

Completion date of the audit on which this certificate is based: 31 August 2016

Issued at: Morgan City, Louisiana  
(place of issue of the document)

Date of Issue: 16 September 2016

  
Sharpe, Deniz, Morgan City Port  
(Signature of the duly authorized official issuing the certificate)



## 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.

### 1st ANNUAL VERIFICATION

Signed: \_\_\_\_\_

(Signature of authorized official)

Place: \_\_\_\_\_

Date: \_\_\_\_\_

### 2nd ANNUAL VERIFICATION

Signed: \_\_\_\_\_

(Signature of authorized official)

Place: \_\_\_\_\_

Date: \_\_\_\_\_

### 3rd ANNUAL VERIFICATION

Signed: \_\_\_\_\_

(Signature of authorized official)

Place: \_\_\_\_\_

Date: \_\_\_\_\_

### 4th ANNUAL VERIFICATION

Signed: \_\_\_\_\_

(Signature of authorized official)

Place: \_\_\_\_\_

Date: \_\_\_\_\_