

THE REPUBLIC OF LIBERIA LIBERIA MARITIME AUTHORITY

INTERNATIONAL SHIP SECURITY CERTIFICATE

Issued under the provisions of the INTERNATIONAL CODE FOR THE SECURITY OF SHIPS AND PORT FACILITIES

(ISPS Code)

under the authority of the Government of

The Republic of Liberia

by the Office of the Deputy Commissioner, Liberia Maritime Authority

Name of ship

CSAV TYNDALL

Distinctive number or letters

D5FN8

Port of registry

MONROVIA, LIBERIA

Type of ship

Other cargo ship

Gross Tonnage

96,628

IMO Number

9627928

Name and address of Company ZODIAC MARITIME LTD.

5th Floor, Portman House

2 Portman Street London, W1H 6DU

UNITED KINGDOM

Company identification Number 0034961

THIS IS TO CERTIFY:

- that the security system and any associated security equipment of the ship has been verified in accordance with section 19.1 of part A of the ISPS code.
- that the verification showed that the security system and any associated security equipment of the ship is in all respects satisfactory and that the ship complies with the applicable requirements of Chapter XI-2 of the Convention and part A of the ISPS code.
- 3. that the ship is provided with an approved ship security plan.

Date of renewal verification on which this Certificate is based 18 10 to 2018

This Certificate is valid until 22 50 by 2024 subject to verifications in accordance with

section 19.1.1 of part A of the ISPS Code.

Issued At: Gioia Tauro, Italy

Date of issue: 18 June 2019

LIBERIAN SECURITY AUDITOR
ON BEHALF OF DEPUTY COMMISSIONER
OF MARITIME AFFAIRS OF LIBERIA

ENDORSEMENT FOR INTERMEDIATE VERIFICATION

THIS IS TO CERTIFY that at an intermediate verification required by section 19.1.1 of part A of the ISPS Code the ship was found to comply with the relevant provision of Chapter XI-2 of the Convention and part A of the ISPS Code.

| INTERMEDIATE VERIFICATION | Signed: |
|--|--|
| | (Signature of authorized official) |
| (to be completed between the second and third anniversary date) | Place : |
| | Date : |
| ADDITIONAL VERIFICATION | Signed : |
| | (Signature of authorized official) |
| | Place : |
| | Date : |
| ADDITIONAL VERIFICATION | Signed: |
| | (Signature of authorized official) |
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