DET NORSKE VERITAS

DNV Ship Id. No.: **26986**
DNV Company No.: **193754**
Certificate number: **D26986/060804F**

SAFETY MANAGEMENT CERTIFICATE

Issued under the provisions of the INTERNATIONAL CONVENTION FOR THE SAFETY OF LIFE AT SEA, 1974, as amended

Issued under the authority of the Government of:

THE REPUBLIC OF PANAMA

by Det Norske Veritas

Name of ship:	**"OOCL VANCOUVER"**
Distinctive number or letters:	**3EBG2**
Port of Registry:	**PANAMA**
Type of Ship*:	**Other cargo ship**
Gross Tonnage:	**66462**
IMO Number:	**9306990**
Name and address of the Company: (as per ISM Code sec. 1.1.2)	**Anglo-Eastern Ship Management Ltd.** **23/F., 248 Queen's Road East** **Wanchai** **Hong Kong**

THIS IS TO CERTIFY THAT the safety management system of the ship 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), following verification that the Document of Compliance for the Company is applicable to this type of ship.

The Safety Management Certificate is valid until **2011-06-16** ,subject to periodical verification and the validity of the Document of Compliance remaining valid.

Completion date of the audit on which this certificate is based: **2006-06-16**

Issued at: **Høvik, Norway**

Date of Issue: **2006-08-04**

DET NORSKE VERITAS * 1864 *

Øivind N.Bråten
Head of Section

* Insert the standard IMO ship type.

DNV Ship Id. No.:
26986
DNV Company No.:
193754
Certificate number:
D26986/060804F

ENDORSEMENT FOR PERIODICAL VERIFICATION AND ADDITIONAL VERIFICATION (IF REQUIRED)

THIS IS TO CERTIFY THAT, at the periodical verification in accordance wtih regulation IX/6.1 of the Convention and paragraph 13.8 of the ISM Code, the safety management system was found to comply with the requirements of the ISM Code.

Intermediate Audit range: **2008-06-16** (yyyy-mm-dd) to **2009-06-16** (yyyy-mm-dd)

Intermediate Verification
(To be completed between the second and third anniversary dates)

Signed _____
Place _____
Date _____

Additional Verification*

Signed _____
Place _____
Date _____

Additional Verification*

Signed _____
Place _____
Date _____

Additional Verification*

Signed _____
Place _____
Date _____

*If applicable. Reference is made to the relevant provisions of section 3.2 "Initial Verification" of the Revised Guidelines on Implementation of the International Safety Management (ISM) Code by Administrations adopted by the Organization by resolution A.913(22).