



Republic of the Marshall Islands

Maritime Administrator

International Ship Security Certificate

Issued under the provisions of the International Ship and Port Facility Security (ISPS) Code

Certificate Number

8011447-SS-296H-23



Under the authority of the Government of the Republic of the Marshall Islands

Particulars of the Ship:

Name of Ship: THAI CHEMI
 Distinctive Number or Letters: 10075
 Port of Registry: Majuro
 Gross Tonnage: 8259
 IMO No.: 9330393
 Type of Ship: OIL TANKER/CHEMICAL TANKER

Name and Address of the Company:

Company Name: GFSM CO., LTD
 Company Address: 5F, 501HO, PRESIDENT O/T 13, JUNGANG-DAERO 180-BEON-GIL DONG-GU BUSAN REPUBLIC OF KOREA
 Company Identification Number: 6364355

THIS IS TO CERTIFY THAT:

1. 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;
2. 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 International Convention for the Safety of Life at Sea, 1974 (SOLAS) as amended and part A of the ISPS Code; and
3. the ship is provided with an approved Ship Security Plan.

Date of initial verification on which this Certificate is based: 12 June 2023.

This Certificate is valid until 11 June 2028, subject to verifications in accordance with section 19.1.1 of part A of the ISPS Code.



Issued by the authority of the Republic of the Marshall Islands Maritime Administrator at Ulsan, REPUBLIC OF KOREA this 12th day of June, 2023.

Jiyeon Yoon
Special Agent

(Seal or stamp of issuing authority, as appropriate)

Unique Tracking Number: 2VUS2TCDWN

MSC-296H Rev. 2/18

14

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8011447-SS-296H-23

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 provisions of chapter XI-2 of SOLAS and part A of the ISPS Code.

Intermediate Verification:

Signed: _____

(Name)
(Appointment)

Place: _____

Date: _____

(Seal or stamp of issuing authority, as appropriate)

ENDORSEMENT FOR ADDITIONAL VERIFICATIONS

Additional Verification*:

Signed: _____

(Name)
(Appointment)

Place: _____

Date: _____

(Seal or stamp of issuing authority, as appropriate)

Additional Verification*:

Signed: _____

(Name)
(Appointment)

Place: _____

Date: _____

(Seal or stamp of issuing authority, as appropriate)

Additional Verification*:

Signed: _____

(Name)
(Appointment)

Place: _____

Date: _____

(Seal or stamp of issuing authority, as appropriate)

*This part of the certificate shall be adapted by the Administration to indicate whether it has established additional verifications as provided for in section 19.1.1.4.

MSC-296H Rev. 2/18

