



THE REPUBLIC OF LIBERIA
LIBERIA MARITIME AUTHORITY

INTERNATIONAL SHIP SECURITY CERTIFICATE

Certificate No. 27566

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	APL LATVIA
Distinctive number or letters	D5DM2
Port of registry	MONROVIA, LIBERIA
Type of ship	Other cargo ship
Gross Tonnage	87,865
IMO Number	9532800
Name and address of Company	SHOEI KISEN KAISHA, LTD. 1-4-52, Kouracho, Imabari-city, Ehime-pref. 799-2111 JAPAN
Company identification number	0283610

THIS IS TO CERTIFY:


1. 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;
2. 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 initial verification on which this Certificate is based 09 July 2013

This Certificate is valid until 08 July 2018 subject to verifications in accordance with section 19.1.1 of part A of the ISPS Code.

Issued at: Singapore, Singapore

Date of issue: 09 July 2013


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



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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 II-2 of the Convention and part A of the ISPS Code.

INTERMEDIATE VERIFICATION Signed: *[Signature]* #4689
(to be completed between the second and third anniversary date)
Place: *Los Angeles, CA.*
Date: *15th August 2012*



ADDITIONAL VERIFICATION Signed:
(Signature of authorized official)
Place:
Date:

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(Signature of authorized official)
Place:
Date:

ADDITIONAL VERIFICATION Signed:
(Signature of authorized official)
Place:
Date: