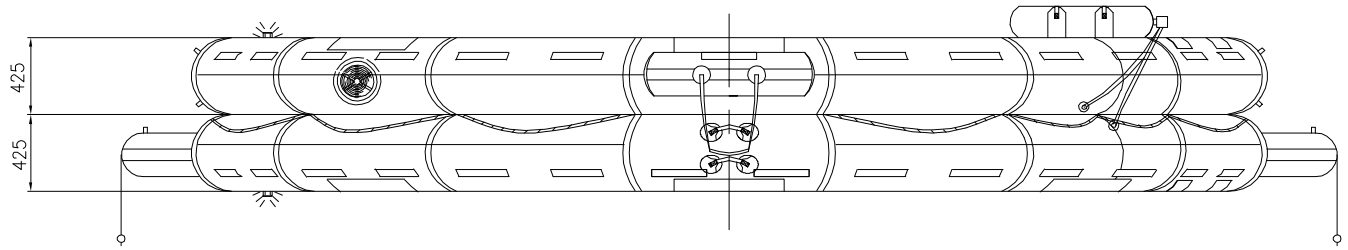

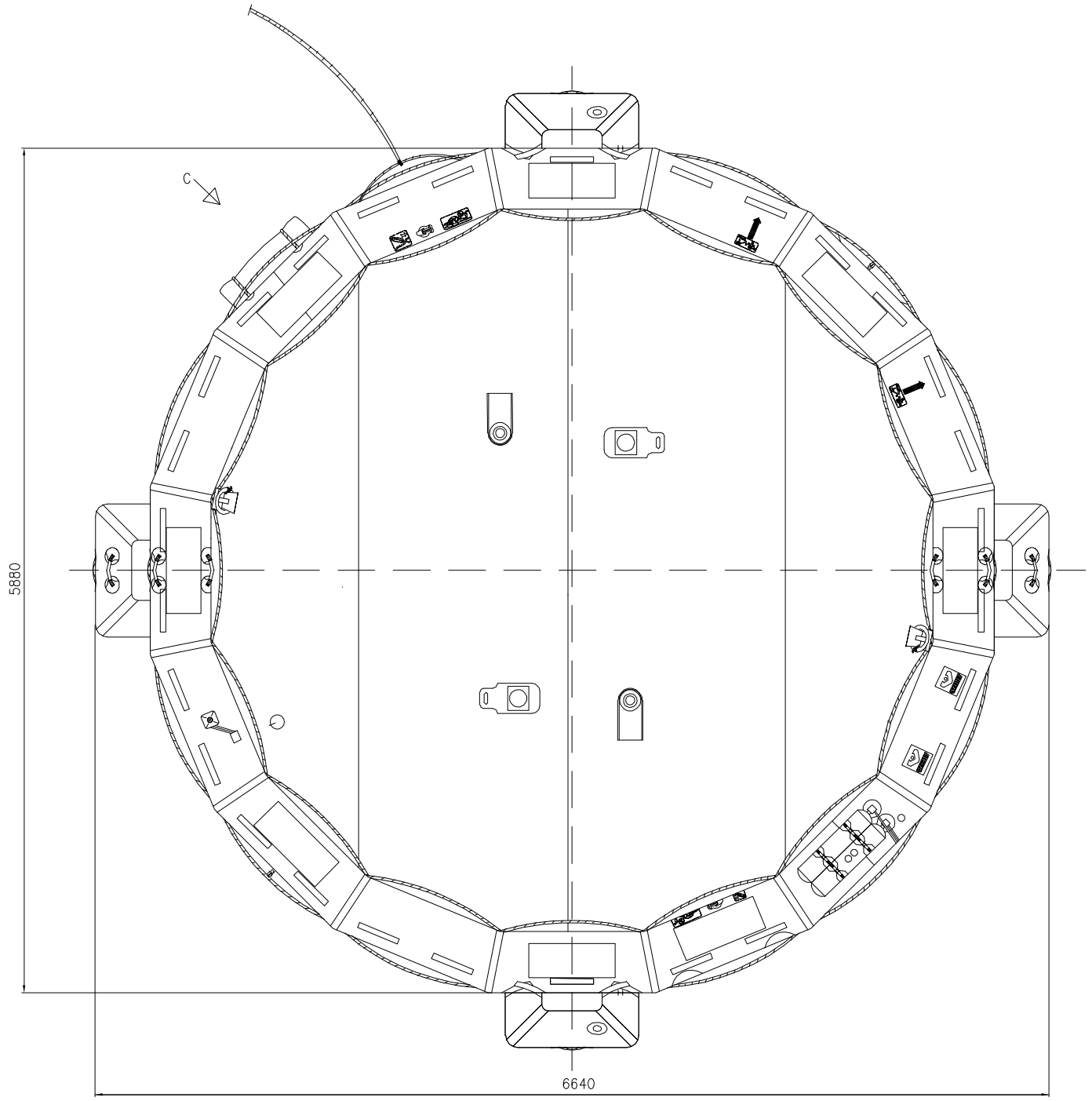

Description of change

POS:	Qty.	Description	Material No:

If the product is requested to be manufactured differently, this MUST be approved by VIKING LIFE-SAVING EQUIPMENT A/S and a specification of change must be filled in if the alteration is approved. Unless otherwise specified the product must always be clearly labelled with Viking part no., manufacturer ID and manufacturing year.

REVISION NO:	REVISION DESCRIPTION:	REVISION DATE:	APPROVAL INITIALS:
01	Add material number 1084658	10.04.2020	PSOM

MATERIAL NO:	STATUS:	UNITS:	CHECK DATE/INITIALS:
1042307,1084658	–	mm	13.02.2020/TCHR

BASIC MATERIAL:	SURFACE TREATMENT:	SHEETSIZE:	SCALE:	SHEET NO:	DRAWN DATE/INITIALS:
–	–	A3	1:20	–	26.07.2018/CLO

VIKING LIFE-SAVING EQUIPMENT A/S
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Fax.: +45 7611 8101
E-mail: viking@viking-life.com
Web: www.VIKING-life.com

PROJECTION TYPE: FIRST ANGLE PROJECTION

GENERAL TOLERANCE: –

DESCRIPTION: LIFE RAFT TYPE VIKING 50 IBA

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DRAWING NO.: 42005105.000.01