

AUGUST 2015

	European Certification Body GmbH ECB-S C11	
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APPLICATION

for testing / certification / design modification / extension of certificates

(Please tick appropriate boxes and fill in as required)

<input type="checkbox"/> Application for testing according to EN _____	<input type="checkbox"/> Application for certification according to EN _____
<input type="checkbox"/> Application for design modification	<input type="checkbox"/> Application for prolongation of certification

The application shall be made to the European Certification Body GmbH.

1 Type test

<input type="checkbox"/> has already been carried out	<input type="checkbox"/> will be carried out very soon	is being/was carried out by: _____
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The recognized body receives a copy of the application to ECB.

optional/

Information may only be disclosed by ECB to the following bodies (release from confidentiality): _____

2 Applicant

Company			
Street			
Postal code/ place/country			
Contact person		Email	

3 Product for which testing / certification is applied for:

(Please file separate application for each product)

Type of product (i.e. safe grade III)	Types
Name of series	

4 Product for which design modifications are applied for:

ECB•S certificate no.	New types:
Name of the series	Types with changes in design/construction:
	Types not needed anymore:

5 Product for which extension of certification is applied for:

ECB•S certificate no.	Name of the series

6 The products are manufactured by (manufacturing plants):

Company		
Street		
Postal code/ place/country		

7 The quality management system of the manufacturing plant complies with ISO 9001

The quality management system has been certified by:

(Please provide copy of certificate if not already submitted earlier)

The undersigned company herewith confirms that it unreservedly accepts to adhere to the Certification Guideline ECB•S C10 as well as to the technical regulations according to ECB•S C10 (Annex A). It further accepts that data provided may be stored and used electronically by the ECB and the recognized body.

The undersigned also agrees that the recognized body will invoice its services according to the Certification Guideline ECB•S C10 to the undersigned directly and the invoice will be paid by the undersigned within the period set for payment.

(Place and date)

(Company stamp and signature)