



Application for certification of product

Registration number: CNR _____ (to be filled in by the Certification Body)

Organization: _____

Status: _____

Identification data: Business ID No.: _____ VAT ID No.: _____

Contact person, contacts: _____

Address of commercial (street): _____

Town, country: _____

Post address (if different as commercial) _____

Town, country: _____

We require: (please indicate)

- issue of certificate(s)** include the licence for using the Mark of TSÚS
- extension of the licence(s)** number: _____

following products from manufacturing plant:

Name of manufacturing plant: _____

Address (street, town, country): _____

Products made on production line: A (identification by manufacturer)

Product 1: _____

Product 2: _____

Product 3: _____

Products made on production line: B (identification by manufacturer)

Product 1: _____

Product 2: _____

Product 3: _____

Further data towards certification of product

Production of product and product are subject to the factory production control according to relevant standard for product:

- yes no

The factory production control is part of quality system

- yes no

This system is up to standard:

- EN ISO 9001

and it was certificated (by whom): _____

date of certification: _____

The Applicant undertakes to observe the requirements of certification and to give all necessary data to examination of certified product.

If were not signed the contract Certification Body is entitled to require to pay-off registration tax by the Applicant.

Place and date

Applicant's signature

Were enclosed annexes with the apply (please indicate):

- | | |
|---|--|
| <input type="checkbox"/> criteria declaration for capacity parameters | |
| <input type="checkbox"/> drawing documentation | <input type="checkbox"/> direction for use |
| <input type="checkbox"/> list of items | <input type="checkbox"/> pictures |
| <input type="checkbox"/> test results | |
| <input type="checkbox"/> test reports | <input type="checkbox"/> product or specimen |