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| 1. **Information on ACCOUNTS**
 |
| * 1. **Applicant**

|  |  |
| --- | --- |
| Registered company name |  |
| Address |  |
| ZIP Code/City, Country |  |
| Contact person |  |
| Phone |  | e-mail |  |

* 1. **Payer** [ ]  Same as in 1.1. Applicant or enter below

|  |  |
| --- | --- |
| Registered company name |  |
| Address |  |
| ZIP Code/City, Country |  |
| **VAT identification number** |  |  **VAT payer:** [ ]  Yes [ ]  No |
| Contact person |  |
| Phone: |  | e-mail |  |

* 1. **Document Holder** [ ]  Same as in 1.1. Applicant or enter below*Applicant on issued documents*

|  |  |
| --- | --- |
| Registered company name |  |
| Address |  |
| ZIP Code/City, Country |  |

* 1. **Document Recipient** [ ]  Same as in 1.1. Applicant or enter below

|  |  |
| --- | --- |
| Registered company name |  |
| Address |  |
| ZIP Code/City, Country |  |
| Contact person |  | e-mail |  |

* 1. **Manufacturer** [ ]  Same as in 1.1. Applicant or enter below

|  |  |
| --- | --- |
| Registered company name |  |
| Address |  |
| ZIP Code/City, Country |  |

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| 1. **Information on the PRODUCT**
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| * 1. **Product**

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| --- | --- |
| Product name |  |
| Model / type |  |
| Brand name(s) |  |
| Other data |  |

* 1. **Places(s) of manufacture** *Full address (Name, address, ZIP/City, Country)*

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| 1) |  [ ]  Same as in 1.5. Manufacturer |
| 2) |  |
| 3) |  |
| 4) |  |

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| 1. **Requested SERVICES**
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| [ ]  According to the offer |  |
|  | *(offer number, date)* |

Fill-in the following fields if no offer was sent to you or you wish to order additional services.

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| * 1. **Testing according to listed standards**

LVD (Low Voltage Equipment)[ ]  electric safety[ ]  fast evaluation *(a check of basic requirements)*[ ]  EMF *(electromagnetic radiation)***EMC** (Electromagnetic Compatibility)[ ]  EMC[ ]  fast evaluation *(a check of basic requirements)***MD** (Machinery Safety)[ ]  machinery safety[ ]  fast evaluation *(a check of basic requirements)*[ ]  noise[ ]  vibrations**ENV** (Environmental impacts)[ ]  vibrations[ ]  IP[ ]  climatic[ ]  **MDD** (Electrical Medical Devices)[ ]  **CPR** (Construction Products)[ ]  **RED** (Radio Equipment)**[ ]  RoHS** *(XRF method)*According to the following standards/requirements:

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* 1. **Homologation**

**[ ]** Approval of vehicles with regard to electro-magnetic compatibility according to **ECE R10****[ ]  E-mark** (Assistance in homologation) | * 1. **Certificates**

[ ]  IECEE CB [ ]  safety [ ]  EMC[ ]  IECEE CB-FCSIncluding the testing of national deviations for the following countries (mark the relevant countries for IECEE CB and IECEE CB-FCS certification mark):

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| AR | AT | AU | BE | BR | CA | CH | CN | CZ | DE |
| DK | ES | FI | FR | GB | GR | HU | IE | IL | IN |
| JP | KR | MY | MEX | NL | NO | PL | PT | RS | RU |
| SE | SG | SI | SK | THAI | TR | UA | US | ZA |  |
| Other(s): |  |

[ ]  SIQ [ ]  safety [ ]  EMC* 1. **Licences**

*Issue of a licence for use of a mark of conformity, subjectto regular inspections of a manufacturing process.*[ ]  ENEC [ ]  CCA NTR [ ]  CCA EMCIncluding testing of national deviations for the following countries (mark the relevant countries):

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| AT | BE | CH | DE | DK | ES | FI | FR | GB | GR |
| HU | IE | CZ | TR | IT | LU | NL | NO | PT | SE |
| SI | PL | SK |  |  |  |  |  |  |  |
| Other(s): |  |

* 1. **Licences for use of SIQ marks**

*Issue of a licence for use of an SIQ mark of conformity, subject to regular inspections of a manufacturing process.*[ ]  SIQ[ ]  SIQ Bauart Geprüft / Type Approved[ ]  SIQ Medizin Bauart Geprüft / Medical Type Approved* 1. **Certificates of conformity to requirements for CE marking**

*SIQ as an EU notified body no. 1304*[ ]  EC type examination MD (2006/42/EC)[ ]  EC type examination NOISE (2000/14/EC)[ ]  EC type examination RED (2014/53/EU)[ ]  EC certificate of constancy of performanceCPR (305/2011 EU Regulation)* 1. **Permission for use of SIQ marks**

[ ]  SIQ Checked |

* 1. **Assistance in acquiring foreign certificates**

National approvals and other certification marks required to sell the product on individual global markets (state the country, regulator…)

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| 1. **Handling with SAMPLES**
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| After completion of the project and receipt of the notification, the applicant shall collect the samples delivered to SIQ. If the applicant decides to collect the samples but fails to do so within the period specified, SIQ may charge demurrage according to the valid pricelist. SIQ shall keep the samples for the period of maximum six months after completion of the project. After that period, SIQ shall destroy the samples against payment in the presence of a commission. **The applicant agrees that after completion of the project samples shall be:**

|  |  |
| --- | --- |
| [ ]  destroyed in the presence of a commission |  |
| [ ]  stored |  |
| [ ]  returned to the applicant |  |
| [ ]  returned to the applicant via courier |  | , account number |  |

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| 1. **Delivery of DOCUMENTS**
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| After the completion of the service and against payment, all the issued documents are sent in electronic form to the document recipient by email or at SIQ portal (https://portal.siq.si). Other means of delivery:

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| [ ]  printed documents by post (free of charge) |  |
| [ ]  printed documents via DHL (against payment) |  |
| [ ]  printed documents via courier |  | , account number |  |

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| 1. **SUBCONTRACTING of the testing**
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| The applicant agrees that a part of testing will be carried out by one or more of the following subcontractors:

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| [ ]  | SIQ Testing and Certification GmbH, Angerstraße 11, D-86807 Buchloe, Germany*(For the scope of the laboratory see table 23 in LP-009 published on http://www.slo-akreditacija.si/acreditation/slovenski-institut-za-kakovost-in-meroslovje-2/)* |
| [ ]  | SIQ d.o.o. Beograd, Cara Dusana 266, RS-11080 Beograd - Zemun, Serbia*(For the scope of the laboratory see http://www.registar.ats.rs/predmet/978/)* |
| [ ]  | The subcontractor that is stated in the offer for the provision of specific testing. |
| [ ]  |  |

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| 1. **Remarks**
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| Document holder, payer, document recipient, place(s) of manufacture, details of the ordered service, scope of testing, details of requested testing or certification service(s), e.g. extension of validity of documents, differences from the earlier tested/certified product, decision rule to be applied in recording test results and stating conformity with a specified requirement, any other remarks.                                     |

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| *The applicant shall deliver the samples and documents (electrical diagram, list of component parts with alternative components, user manual, technical documentation, including certificates for installed component parts and plastic components, and statements of winding insulation classes, photo documentation, etc.) for the provision of the ordered service(s). If after a review of the application the submitted documentation is found to be incomplete, the applicant will be requested by SIQ to submit the missing documentation or additional test samples. The Applicant agrees that communication is carried out also via e-mail.**By signing this application form the applicant takes full responsibility for all costs related to the performed testing/certification procedure. The applicant agrees that he/she has been given sufficient information on the fees and that this application is considered as an order. All documents will be sent upon the settling of the invoice.**Unless the applicant or the test method defines the decision rule to be applied in recording test results and stating conformity with a specified requirement, the decision rule applied to »Pass/Fail« in test reports shall be based on "simple acceptance" without applying the measurement uncertainty (ISO/IEC Guide 98-4:2012, 8.3.1.2).**The applicant confirms that he/she is familiar with and agrees to comply with the general terms and conditions for services (GN007) published on www.siq.si and the rules and procedures for certification and testing (CP206).* |

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| --- | --- | --- |
| **for applicant** |  | **for SIQ** |
| (name and signature) |  | (name and signature) |
|  |  |  |
| Place, date |  |  | Place, date |  |

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