

1. Information on ACCOUNTS	
<b>1.1. Applicant</b>	
Registered company name	_____
Address	_____
ZIP Code/City, Country	_____
Contact person	_____
Phone	_____ e-mail _____
<b>1.2. Payer</b> <input type="checkbox"/> Same as in 1.1. Applicant or enter below	
Registered company name	_____
Address	_____
ZIP Code/City, Country	_____
VAT identification number	_____ VAT payer: <input type="checkbox"/> Yes <input type="checkbox"/> No
Contact person	_____
Phone:	_____ e-mail _____
<b>1.3. Document Holder</b> <input type="checkbox"/> Same as in 1.1. Applicant or enter below <i>Applicant on issued documents</i>	
Registered company name	_____
Address	_____
ZIP Code/City, Country	_____
<b>1.4. Document Recipient</b> <input type="checkbox"/> Same as in 1.1. Applicant or enter below	
Registered company name	_____
Address	_____
ZIP Code/City, Country	_____
Contact person	_____ e-mail _____
<b>1.5. Manufacturer</b> <input type="checkbox"/> Same as in 1.1. Applicant or enter below	
Registered company name	_____
Address	_____
ZIP Code/City, Country	_____
2. Information on the PRODUCT	
<b>2.1. Product</b>	
Product name	_____
Model / type	_____
Brand name(s)	_____
Other data	_____
<b>2.2. Places(s) of manufacture</b> <i>Full address (Name, address, ZIP/City, Country)</i>	
1) <input type="checkbox"/> Same as in 1.5. Manufacturer	
2) _____	
3) _____	
4) _____	

**3. Requested SERVICES**

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.

**3.1. 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:

---

---

---

---

---

---

---

---

---

---

**3.2. Homologation**

- Approval of vehicles with regard to electromagnetic compatibility according to **ECE R10**
- E-mark** (Assistance in homologation)

**3.8. Assistance in acquiring foreign certificates**

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

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**3.3. Certificates**

- IECEE CB**  safety  EMC
- IECEE CB-FCS**

Including 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

**3.4. Licences**

Issue of a licence for use of a mark of conformity, subject to regular inspections of a manufacturing process.

- ENEC**  **CCA NTR**  **CCA EMC**

Including 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): \_\_\_\_\_

**3.5. 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**

**3.6. 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 performance CPR (305/2011 EU Regulation)

**3.7. Permission for use of SIQ marks**

- SIQ Checked**



