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| --- | --- | --- | --- |
| Applicant Body Name |  | | |
| Applicant Address |  | | |
| Phone |  | Tax Office |  |
| e-mail |  | Tax No |  |
| Web Address |  | Name and Position of the contact person |  |

If the applicant is manufacturer himself, leave skip this section

|  |  |
| --- | --- |
| Manufacturer Name |  |
| Manufacturer Address |  |

The products in the scope of certification, applied standards and legislation:

|  |  |  |
| --- | --- | --- |
| Product Type and Model | Sizes / Size Range | Standard / Legislation |
|  |  |  |
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| Intended Use (Explain) |  |

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| The risks can be associated with the intended use of the PPE (Category II Products) | |
| Protection against mechanical risks  Hit  Vibration  Fall  Slide down)  Protection of any part of the body against static pressure  Protection against simple physical damage | Protection against heat / flame  Protection from cold  Protection against electric shock  Other, Explain  …………………………………………………………….  ……………………………………………………………. |

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| The risks can be associated with the intended use of the PPE (Category III Products) | |
| Substances and mixtures which are hazardous to health  Atmospheres with oxygen deficiency  Harmful biological agents  Ionising radiation  high-temperature environments the effects of which are comparable to those of an air temperature of at least  100 °C  Bullet wounds or knife stabs | Low-temperature environments the effects of which are comparable to those of an air temperature of – 50 °C or less;  Falling from a height;  Electric shock and live working  Drowning  Cuts by hand-held chainsaws  High-pressure jets  Harmful noise |

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| Declarations (Do not forget to check the boxes) |
| I declare that, I did not apply for EU Type Examination service to another Notified Body for the Products listed above  I declare that, I will follow the requirements of “Universal Certification” certification process based on EU 2016/425 reguation and follow the requirements of the EU 2016/425 regulation  I declare that, I will provide samples of products listed above in type and quantity requested by “Universal Certification” for examinations, manufactured by myself or my sub contractor as declared.  I declare that i will not start mass production of the Products listed above and will not refer or use CE mark or Universal Certification Notified Body number until successful completion of EU Type Examination service  I declare that I will annex any result of EU Type Examination gathered from another Notified Body for the products within this application (Expired EU Type Examination Certificate and reports, any negative result for EU Type Examination result etc) |

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| --- |
| I apply for EU Type Examination of the products listed above according to EU 2016/425 regulation as;  the owner entity of the industrial facility (manufacturer)  the authorised representative of the manufacturer (Importer / Economic Operator etc.)  I declare that all information provided in this form are true and I will be responsible for the damages caused by incoreect declaration or information provided in this application. |

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| --- | --- | --- |
| Place | Date | Seal / Authorised Name and Signature |

* The following annexes shall be provided with the application

1. Technical Documentation (as defined in 2016/425/EU Annex 3)
2. Official entitiy registration documents
3. Authorised signature samples
4. Product and package photos and drawings
5. List of inspection and test equipments
6. List of equipments used in manufacturing
7. Sub contractor agreement (if applicable)
8. Authorisation letter (if applicable)
9. Trademark registration (if applicable)