



**QUOTATION REQUEST FORM
PRODUCT TESTING & CERTIFICATION**

LAB TESTING

- | | |
|---|--|
| <input type="checkbox"/> Full set as per standard(s)
<input type="checkbox"/> Functional
<input type="checkbox"/> Climatic
<input type="checkbox"/> Mechanical | <input type="checkbox"/> Electrical safety
<input type="checkbox"/> EMC
<input type="checkbox"/> Assessment
<input type="checkbox"/> Analysis |
|---|--|

TEST REPORT

Delivery address(es): *(Company name, Street, Zip, City, Country, Tel., e-mail, Contact name, Title, VAT number)*
If not same address as mentioned in page 2

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Test Report language(s):

French
 Dutch
 English
 Not Applicable

COMPULSORY FIELD

CERTIFICATION

REQUESTED CERTIFICATION MARK(S)

- | | |
|---|---|
| <input type="checkbox"/> BENOR-ATG
<input type="checkbox"/> BOSEC
<input type="checkbox"/> CE-CPD
<input type="checkbox"/> CERTALARM | <input type="checkbox"/> FINCERTIF
<input type="checkbox"/> INCERT
<input type="checkbox"/> I3
<input type="checkbox"/> ANPI
<input type="checkbox"/> S3 |
|---|---|

Introduction of a new product

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For each new product, enclose a detailed description with this request

New product variant

Variant reference:

Certified product reference:

Certificate n°.:

Nature of the variation:
Enclose details of the differences with original product

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Modification of an existing product

Certified product reference:

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Certificate n°.:

Nature of the modification:
Enclose details of the differences with original product.

<input type="checkbox"/> Electric/electronic	<input type="checkbox"/> Software	<input type="checkbox"/> Other
<input type="checkbox"/> Mechanical	<input type="checkbox"/> Labelling & marking	

Certificate renewal

Certified product reference:

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Certificate n°.:



