

No of order

(will be filled by EZÚ)

test of product (turn over point 6 b.)

☐

I expect output in language:

CZ **EN** **GE**

test Report required

☐ ☐

assessment of documentation

☐ ☐ ☐

EZÚ Certificate

☐ ☐ ☐

CB Certificate

☐

CCA Certificate

☐

others (specify)

☐

No of sample:

(will be filled by EZÚ)

rent of testing premises

☐

homologation

☐ ☐

ESČ Mark License

☐ ☐ ☐

ENEC Mark License

☐

HAR Mark License

☐

CCA-EMC Mark License

☐

ENEC+ Mark License

☐

.....
The cost of testing include one language version of output.

1. Ordering firm

TRADE NAME

VAT No.

INDIVIDUAL PERSON ☐

LEGAL ENTITY ☐

VAT PAYER ☐

ADDRESS

AUTHORIZED FOR CONTRACT NEGOTIATION

PHONE E-MAIL

AUTHORIZED FOR TECHNICAL NEGOTIATION

PHONE E-MAIL

2. Manufacturer/works

TRADE NAME

ADDRESS

PHONE E-MAIL

NAME OF FACTORY

ADDRESS

PHONE E-MAIL

3. Product

NAME

TYPE/SERIES

VARIANTS

BASIC TECHNICAL DATA

4. Other specifications if licenses for ESČ, ENEC, HAR and CCA-EMC

PRODUCT WAS TESTED ☐FACTORY WAS CERTIFIED IN ACCORDANCE WITH ISO 9001 ☐FACTORY INSPECTION WAS CARRIED OUT ☐

CERTIFICATE NUMBER

WITH OTHER SYSTEM

5. Specification (according to which standards do you wish to make tests, etc.)

Please send with the Application a basic technical documentation: drawings, wiring diagrams, service manual, instruction for use, product list, data sheets, etc

6. Tests of the product

OUTPUT REQUIREMENTS ACCREDITED OUTPUT

(Accreditate output is extra charge.)

I REQUIRE THE TEST SAMPLE TO BE RETURNED No

6 a). Specify the Governmental Orders (European Directives),
according to which you are applying for conformity assessment tests.

- ☐ GO 118/2016 - (2014/35/EU) - LOW VOLTAGE DEVICES
- ☐ GO 117/2016 - (2014/30/EU) - EMC
- ☐ GO 163/2002 - (no dir.) - CONSTRUCTION PRODUCTS
- ☐ CPR - (REGULATION (EU) No. 305/2011 OF THE EUROPEAN
PARLIAMENT AND OF THE COUNCIL) - CONSTRUCTION PRODUCTS

6 b). Specify the required tests

- ☐ SAFETY
- ☐ EMC
- ☐ HYGIENIC TESTS
- ☐ VIBRATION
- ☐ CLIMATIC TESTS

☐ I AGREE WITH ELECTRONIC INVOICING.

If you agree with electronic invoicing, please enter your email to send invoices:

.....
DATE.....
STAMP
OF THE ORDERING FIRM.....
NAME AND SIGNATURE OF THE AUTHORIZED
REPRESENTATIVE OF THE ORDERING FIRM**Instructions for filling in the Orde**

- Please fill the Order electronically or printed letters.
- Tick off the ordered service in the box or, if you require one of the licenses of the Conformity Declaration, give also the data in item 4 (if known to you)
- By 'Basic technical data' means e.g. voltages, power input and output, current, frequency, etc.

In case of any uncertainties or additional questions please call +420 266 104 444
Our product managers are ready to help you at any time.

Thanks you for your interest in our services. Team EZÚ.