

Application for Witnessed test



This application will be followed by a general agreement of certification between DBI Certification and you as the customer if certification is decided by DBI Certification.
(If a general agreement regarding the specific area already is issued, no new agreement will be required).

Applicant

Company name	
Address	
Contact person	
Phone no.	
E-mail address	

To be filled in by DBI Certification	
File no.	CSO
Certificate no.	
Testing decided:	Date
Signature:	
Signature:	

List of products to be tested:

Product			Test standard(s)
Product Reference	Product type	Modules of application Guideline (RTL) 003 or MED	No.
Place(s) of Test facilities			

Required documentation:

(In copies)

Document type	Reference no.	Comments
Product specification(s) (including eventual manuals)		
Test report (draft) made by manufacture (if any) Sample report(s) (if any)		
List of components incl. CPR Certificates (only according to Guideline RTL 003)		
General description of product (inclusive testing standard/ points).		
Technical documentation: (E.g. drawings, bill of materials, etc.)		

Date:

Date:

(Customer)

(DBI Certification)