

TSÚ Piešťany, š.p. is registered in the Business Register of the District Court Trnava, Insert No: 10005/T.

Filled by **TSÚ Piešťany, š. p.**
Arrival date : _____**Application no.**

for product assessment and for other services according to :

-
- Directive 2014/53/EU (RED) of the European Parliament and of the Council relating to radio equipment

1. APPLICANT

Trade name:	
Address:	
Country:	
ID:	VAT No:
Registered in Companies Register (position, number):	
Statutory/Authorized representative: (name, position)	Contact person: (name, position)
Tel:	Tel:
E-mail:	E-mail:
Bank:	Account:

2. PRODUCER (do not fill in if the applicant is the producer)

Trade name:	
Address:	
Country:	
ID:	VAT No:
Statutory/Authorized representative: (name, position)	
Tel:	Contact person: (name, position)
Tel:	Tel:
E-mail:	E-mail:

3. PRODUCT

Product trade name:	
Type:	
Derived alternatives:	
<input type="checkbox"/> Repetitive production	<input type="checkbox"/> Custom-made in the number of _____ piece(s)

4. THE APPLICANT ASKS THE NOTIFIED BODY TO REALIZE FOLLOWING ACTIVITIES:

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- EU-type examination**
- Annex III Directive 2014/53/EU (RED) -
- Module B**
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- Conformity based on full quality assurance**
- Annex IV Directive 2014/53/EU (RED) –
- Module H**

5. THE APPLICANT ASKS THE PRODUCT CERTIFICATION BODY TO REALIZE FOLLOWING ACTIVITIES (outside the scope of the Notified Body activities):

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- Conformity assessment of the product**
- with subsequent issuance of the certificate confirming the conformity of the product tested to the essential requirements.

6. THE APPLICANT ASKS THE ACCREDITED LABORATORY TSU TO REALIZE FOLLOWING ACTIVITIES (outside the scope of the Notified Body activities):

-
- Carrying out the tests according to a standard with subsequent issuance of the test report confirming conformity of the product with the requirements of the relevant standard.

Standard (according to the specify of the customer):

- Assistance with drawing up of the **Declaration of conformity**
 Other (specify)

-
- Issue of test reports; language:** English Bilingual: Slovak – English
 Issue of certificates; language: English Bilingual: Slovak – English
 English - Russian
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7. ACCOMPANYING DOCUMENTS

- Technical documentation including analysis and assessment of the risk(s) *Annex no.*
- Brief description of manufacture technology *Annex no.*
- Test reports, technical reports, etc. *(if available)* *Annex no.*
- Management System Certificate and last Audit report *Annex no.*
(if Management System has been certified)
- Application form for testing according to the Annex of the relevant standard *Annex no.*
- Authorization for the Applicant containing the scope of powers given by the producer *Annex no.*
(if the application is not submitted by the producer)

8. DECLARATION OF APPLICANT

The development of the product as a type is finished and all data and technical documentation presented in this conformity assessment application are complete and they represent product state on the date of the submission of this application. We hereby declare that we have not asked any other notified body for conformity assessment of the product.

9. DUTIES OF APPLICANT

Submit documents needed for conformity assessment in Slovak or English language as stated in point 7. Enable sampling or submit the product sample so that the conformity assessment can be completed in a given time. Provide the cooperation during the conformity assessment in the scope required by the Notified Body.

Remarks to the filling of application:

The application is filled in individually for each product type; in case of various product types, these are given in annex of this application. Supporting documents in accordance with part 7, dealing with various products needed for product conformity assessment could be added to only one application and they can be referred to in other applications. Send only one exemplar of the application and supporting documents. All materials shall be sent by e-mail or by registered post at the address presented in the head of the application form. If you need more space than is given in this application, use a special annex.

In _____ date

Statutory/ Authorized representative (name and signature):

Stamp