

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 2014/30/EU (EMC) of the European Parliament and of the Council relating to electromagnetic compatibility
- Directive 2014/35/EU (LVD) of the European Parliament and of the Council relating to relating to the making available on the market of electrical equipment designed for use within certain voltage limits

**1. APPLICANT**

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

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

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

**3. PRODUCT**

<b>Product trade name:</b>	
<b>Type:</b>	
<b>Equipment:</b>	<input type="checkbox"/> apparatus <input type="checkbox"/> fixed installation
<b>Derived alternatives:</b>	
<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:**

- EU-type examination** - Annex III, part A, Directive 2014/30/EU (EMC), (module B)

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

- Conformity assessment of the product** with subsequent issuance of the certificate confirming the conformity of the product tested to the essential requirements.       EMC     LVD
- Conformity assessment of the product including inspection** of Factory Production Control with subsequent issuance of the certificate and performance of periodic surveillance.       EMC     LVD

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Note to be filled in for points 4 and 5.

For EMC: The applicant has to tick the activity in point 4 or point 5. It is not possible to require both of these activities.

For LVD: The applicant has to choose only of the items listed in point 5.

- Assistance with drawing up of the declaration of conformity.  
 Other (specify)

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**Issue of LVD test reports; language:**

Slovak \*       English      Bilingual:  Slovak – English\*

**Issue of EMC test reports; language:**

Slovak \*       English      Bilingual:  Slovak – English\*

*\* option depends on published language versions of STN / EN standards required*

**Issue of certificates; language:**

Slovak       English      Bilingual:  Slovak – English  
 English - Russian

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## 6. ACCOMPANYING DOCUMENTS

- Technical documentation including analysis and assessment of the risk(s)- *in accordance with Annex III of the directive(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 *(if Management System has been certified)* *Annex no.*
- Authorization for the Applicant containing the scope of powers given by the producer *(if the application is not submitted by the producer)* *Annex no.*

## 7. 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.

## 8. DUTIES OF APPLICANT

Submit documents needed for conformity assessment in Slovak or English language as stated in point 6. 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 6, 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**