



AFRICA STANDARDS AND CERTIFICATIONS

Application form for product certification

Date	
Type of client	<input type="checkbox"/> New client <input type="checkbox"/> Existing client
Request for	<input type="checkbox"/> First time product certification <input type="checkbox"/> Inclusion or removal of product from the present certification
Name of client	
Trade name	
Address of product manufacturing division	
Registered communication address /	
Contact person	
Contact no.	
E mail	
Website	

Details of product to be certified

Sr. No.	Name of products	Specifications / Rating	Applicable EU Directives	Reference national / international standard	Intended application

Details of product to be removed from present certificate

Sr. No.	Name of products	Specifications / Rating	Applicable EU Directives	Reference national / international standard	Intended application

Reduction of scope	
Reason for removal of product from the present certificate	
Is your organisation linked to another cooperation?	
Description of technical processes	
Total number of employees	

Number of employees in the production/manufacturing	
Size/output of the manufacturing plant	
Is the company outsourcing any work including testing or production done by another legal entity on your behalf if yes, provide the details and nature of the outsourced organisation	
Tentative plan for product evaluation	
Is your product certified from any other body before this application? If Yes, give the name of body and why do you want switchover?	
Major customers and type of application of the products under certification	
We hereby declare that the information given above is true as per best of my knowledge and we are bound to follow the rules of certification.	
Name, designation and signature of the authorized person with seal	
FOR OFFICE USE: Final Review	
Confirmation of customer details :	
Confirmation of Scope :	
Reviewed by and Date :	
Signature :	
Comments :	