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| 1. **Applicant Information** | |
| Applicant/Company |  |
| Open Address |  |
| Legal Authorised |  |
| Contact Person |  |
| Wire |  |
| e-mail / Web |  |
| Turkish ID No / Tax Office and No |  |
| Organisation type | Sole Proprietorship  Legal Entity |

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| 1. **Conformity Assessment Information**   \*In order for the application to be evaluated, the documents specified in Article 3 must be legally complete in accordance with the regulations. Missing information and documents may delay the evaluation of the application and the offer. | | |
| Regulation Referred to | Personal Protective Equipment Regulation | |
| Referenced Eligibility Assessment Module | Module B  Module C2  Module B+C2  Module D | |
| Product Category | Category I  Category II  Category III | |
| Certification Standard(s) | Foot, Leg Protective **Equipment** | **EN 13634**  **EN 14404+A1**  **EN 15090**  **EN ISO 17249**  **EN ISO 17249/AC**  **EN 11393-2**  **EN 11393-5**  **EN 13832-3**  **EN ISO 20345**  **EN ISO 20346**  **EN ISO 20347**  **EN ISO 20345:2011**  **EN ISO 20346:2014**  **EN ISO 20347:2012** |
| Hand and Arm Protective Equipment | **EN ISO 21420**  **EN 420:2003+A1:2009**  **EN 407**  **EN 388+A1**  **EN 12477**  **EN 12477+A1**  **EN ISO 374-1/A1:2018**  **EN ISO 374-1**  **EN 659+A1**  **EN 659+A1/AC**  **EN ISO 374-5**  **EN 511**  **EN 13594**  **ISO 11393-4** |
| Protective Clothing for Motorcycle Riders | **EN 17092-2**  **EN 17092-3**  **EN 17092-4**  **EN 17092-5**  **EN 17092-6**  **EN 13634**  **EN 13594** |
| **PRODUCT;** | | |
| **Name / Description** |  | |
| **Model / Type** |  | |
| **Intended Use** |  | |
| **Trademark Registration/Patent Number, if any** |  | |
| **Address (for Module C2)** |  | |

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| **Other** |
| **Has a consultancy service been received regarding the technical file? If so, please indicate the company and person information.**  NO ---  YES........................ |
| **If so, please indicate the number of the notified body issuing the certificate and the validity date of the certificate.**  NO ---  YES........................ |
| **Do you design the product?**  NO ---  YES........................ |
| **Are changes to the design documented?**  NO ---  YES........................ |
| **Do you control the production quality system?**  NO ---  YES........................ |
| **If you do not produce, does your contract with the producer cover the above topics?**  NO ---  YES........................ |
| **Do production activities take place at more than one address?**  NO ---  YES........................  *If yes, please fill in the following information.*  Address:  Production operations belonging to Production Place activities:  Subcontractor activities carried out in this area, if any:  Trade Registry Number: |
| **Please specify your laboratory information, human / technical resources of your inspection facility and the number of personnel working in production, if any, related to the field of certification application.** |
| **Indicate if there are special conditions and limitations related to the production area.** |
| **Is there a quality management system certificate obtained from a relevant accredited institution for the quality management system?** |

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| |  |  | | --- | --- | | 1. **Documents to be submitted with the Application Form**   \*For the evaluation of the application, the documents specified in Article 5 must be legally complete in accordance with the regulations. Missing information and documents may delay the evaluation of the application and the offer. | | | **In case you are a sole proprietorship**   * Identity Photocopy * Signature Declaration * Tax Certificate | **In case you are a legal entity**   * Trade Registry * Signature circular of the Legal Authorised Person * Chamber of Commerce Registration and Activity Certificate (Current) * Tax Certificate (Current) | | **Technical File**  **-** The technical file should be shared during the application.  -The content of the technical file is checked with the PPE Regulation Technical File Review Form. You can access the relevant forms on our website.  -If there are test reports made or made by the company of the product, they should be shared. |  |  1. **About GDPR** | |
| You can review the clarification text within the scope of the Law on the Protection of Personal Data from our web address www.usbcertification.com. | |
| 1. **Declaration and Commitment** | |
| (I hereby declare that I, as the applicant for the units specified in this document, which consists of ) pages, am authorised to request certification of the products in accordance with the certification scopes specified above in this application.  I confirm that all of the information stated above fully and accurately reflects the operation. I understand that the information I have provided above will be treated confidentially by USB Certification and I agree that it may be shared with legal authorities where necessary.  I undertake to comply with the provisions of EU Directive 2016/425 in relation to the product for which I am applying. | |
| **Name - Surname** |  |
| **Position in the Company** |  |
| **Date** |  |
| **Signature and Stamp** |  |

**UOF-NB-KKD-EN-4030 REVISIONS**

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| **Revision No** | **Revision Date** | **Content of the Amendment** |
| 00 | 06.10.2022 | First Publication |