

APPLICATION FORM

For the Granting of Conformity Mark/ Certificate

PRODUCT CERTIFICATION

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For the Granting of Conformity Mark/ Certificate

To the Hellenic Organization for Standardization S.A.- ELOT
313, Acharnon Str., GR- 111 45 Athens, Tel.: +30210 2120403 Fax: +30210 2283721

1. Data concerning the applicant

Name/ surname of applicant :

Address :

Telephone No : **Fax :** **e-mail :**

2. Data concerning the company

2.1. Name of company:

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2.2. Address of company:

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Telephone No : **Fax :** **e-mail :**

2.3. Address of plant (if different) :

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2.4. a) Quality Control Representative of plant

Name/ surname:

Address:

Telephone No : **Fax :** **e-mail :**

b) Quality System Representative of plant

Name/ Surname:

Address:

Telephone No : **Fax :** **e-mail :**

2.5. Authorized person for signing the contract:

Name/ Surname:

Position:

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2.6. Data concerning company representative in Greece:

Name/ Surname:

Address :.....



Telephone No : Fax : e-mail :

2.7. Taxes record

3. Data concerning the product

3.1. Type(-es) of products, for which the Conformity mark/ Certificate- CE Mark is sought (according to the name of types in the relevant products) :

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3.2. Normative documents, according to which the Conformity Mark/ Certificate is sought

Code reference of normative documents	T I T L E	Date of issue of normative documents

3.3. Commercial name, according to producer' s catalogues :

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3.4. General data concerning the company :

3.4.1. Number of personnel at plant (-s) where the products, for which certification is sought, are produced :

- a) **In the Marketing/ Sales Dpt:**
- b) **In design and development:**
- c) **In the production departments of product(s) referred to in the present application:**
- d) **In the Quality Control Dpt.:**
- e) **In inspection/ control sites of production:**
- f) **In the Quality Assurance:**
- g) **In assembly/ installation:**
- h) **Other activities:**

3.4.2. Conformity Marks/ Certificates, CE marking, Quality System Certification by other body?

Body	Year	Standard
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3.4.3. Data of company representatives :

<u>Title or position</u>	<u>Name/ surname</u>
General Manager	:
Technical Manager	:
Production Manager	:
Design/ Development Manager	:
.....	:
.....	:

3.4.4. Does any member of the company personnel participate in Technical Committees for the elaboration of standards? If yes, please state their names:

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3.4.5. Are there any subsidiaries/ warehouses/ distribution centers of the company, located elsewhere outside the production plant? If yes, please state their position:

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4. Other useful data :

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4.1. Proposed date for initial inspection:

4.2. Type (-s) of products, produced by company (total number):

Number of products for which Conformity Mark/ Certificate is sought :

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4.3. Other useful information :

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I declare that the company will :

a) conform to the requirements of the General Rules for Product Certification, the corresponding Special Certification Rules and Ministerial Decree 22792/509/1998-06-26 (Government Gazette 708/B/1998-07-13) «Certification procedures of the Hellenic Organization for Standardization S.A. (ELOT)» of which I am aware

b) pay the corresponding, to the above mentioned procedure, fees

Athens,

.....
(signature)

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(name and surname)