

Company

hereby applies to RISE Research Institutes of Sweden AB, as Notified Body, for initial assessment of a quality system according to PPE Regulation (EU) 2016/425, annex VIII (module D).

Type of products

The application shall include documentation:

- details about the manufacturer (see page 2)
- relevant information about the product type envisaged
- a list over the products that shall be included in the assessment
- documentation concerning the quality system as stated in Annex VII 3.2 of the regulation
- if the EC/EU-type examination of the products are issued by another Notified Body, the technical documentation and copies of the EC/EU-type examination certificates

The applicant hereby confirms

- that the same application for assessment is not made to another Notified Body
- that the company notifies RISE of all significant changes in the quality system, in its activities and/or organization, and of any delivery of unsafe nonconforming products
- that RISE is allowed to publish official information contained in the certificate
- that the applicant/manufacturer will fulfil the obligations arising out of the quality system as approved and to maintain it so that it remains adequate and efficient and fulfils the requirements of the regulation

Note: Certificate will be issued in English.

Place, date

Signature of the person representing the company (applicant)

Clarification/name of the person representing the company (applicant)

- Send in the application by e-mail: certifiering@ri.se, or
- by e-mail to your contact person at RISE: firstname.secondname@ri.se, or
- by mail to: RISE Certification, Product Certification, Box 857, SE-501 15 Borås, Sweden

Information about the applicant

Manufacturer

Authorised representative

Company name:

Full postal address:

Invoice address
(if other than above)

Visiting address:

Org./VAT No.:

Phone company:

E-mail company:

Internet (www):

Contact person:

Phone contact person:

E-mail contact person:

Manufacturing places:

Information about the place of manufacture (if other than above) i.e. where the audit can take place:

Company name:

Full postal address:

Visiting address:

Org./VAT No.:

Phone company:

E-mail company:

Internet (www):

Contact person:

Phone contact person:

E-mail contact person:

Other information