|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Manufacturer and address:** | |  | | | | | | | | | | |
| **­** |  |  | | | | | | | | | | |
| **Manufacturing locations:** | |  | | | | | | | | | | |
|  |  | |  | | | | | | | | | |
| **Production sites:** | | |  | | | | | | | | | |
|  |  | |  | | | | | | | | | |
| **Quality assurance according to ATEX, Annex No.:** | | | | | | |  | | *(Annexes IV, VI or VII; Modules D, C or E)* | | | |
|  | | | |  | | | | | | | | |
| ***Quality assurance according to IECEx Scheme:*** | | | | | | | | *Yes/No:* | |  |  | |
|  | | | |  | | | | | | | | |
| **Quality system certified:** | | | | | **Yes/No:** | | |  | **if yes, by:** | | |  |
| *If yes please attach a copy of the certificate.* | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| *Consultancy services used:* | | | | | *Yes/No:* | | |  | *if yes, provided by:* | | |  |
|  | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **Type examination certificate numbers of products for which this quality assurance certification is requested:** | | | | | |  | | | | | | |
| *If above listed Type Examination Certificates have not been issued by FIDITAS Ltd., please attach a copy of each certificate.* | | | | | | | | | | | | |
|  | | | |  | | | | | | | | |
| **Outsourced processes which are important for product conformity to requirements:** | | | | | |  | | | | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | *Applicant's Verification* **:** | | |  | | | |
|  | |  | | | | | |
| **Place:** | | |  | | **Date:** | |  |
|  | | |  | |  |  | |
| **Name and Surname:** | | |  | | **Signature:** | |  |

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