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| **PART – 1** |
| 1. **Economic Operator Details:**
 |
| Role in the supply chain: | [ ]  | Manufacturer | [ ]  | Importer |
| [ ]  | Authorized representative | [ ]  | Distributer |
| Company Name: |  |
| Address: |  |
| Contact Person: |  | Position: |  |
| Tel.: |  | Fax: |  |
| Email: |  | Website: |  |

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| 1. **Factory Details:**
 |
| Company Name: |  |
| Address: |  |
| Contact Person: |  | Position: |  |
| Tel.: |  | Fax: |  |
| Email: |  | Website: |  |
| Storage Details: |  |

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| 1. **Supporting Documents:**
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| Please ensure that the following documents are submitted together with the application form where appropriate: |
| 1. Commercial Register certificate.
 |
| 1. Original or copy of (EMC and safety) test report(s) bearing recognized accreditation logo with certification number.
 |
| 1. Product specifications (E.g. Component list, material list, drawing and risk analysis)
 |
| 1. Original or certified true copy of authorization letter from manufacturer if applicant is not the manufacturer confirming that applicant is authorized to deal in the product.
 |
| 1. Original or certified true copy of the authorization letter from the owner of test report (if the applicant is not the owner of test report) confirming that the applicant is authorized to use the test report for application.
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| 1. **Product Details:**
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|  |
|  | Kindly complete below table and attach additional documents if necessary |

| **No.** | **Product/Serial No.** | **Brand / Model** | **HS Code** | **Standard / Tech. Regulation** | **Test Report (Yes/No)** | **Product Details** |
| --- | --- | --- | --- | --- | --- | --- |
| **1** |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |

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| **Select your country for certification** |
|[ ]  KSA |[ ]  UAE |[ ]  Bahrain |[ ]  Oman |[ ]  Qatar |[ ]  Kuwait |[ ]  Yemen |

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| We declare under our own responsibility that the product listed in the previous table, satisfy the requirements of gulf technical regulation for low voltage electrical equipment and appliances, and has not been lodged with any other notified body. |

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| --- | --- | --- |
| Authorized Person / Position | Authorized Signature and Date | Company Name / Stamp |
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| **PART – 2 Contract Agreement** |
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| Applicant agreed to: |
| 1. Comply with the requirements for certification and to supply any information as needed for assessment of our (applicant) product to be certified.
 |
| 1. Make all necessary arrangements for the conduct of the assessment, including provision for examining documentation and access to all areas, records and personnel for the purpose of assessment.
 |
| 1. Make claims regarding certification only in respect of the scope for which certification has been granted.
 |
| 1. Not use its product certification only in respect of the scope for which certification body into disrespect and does not make any statement regarding its product certification which the certification body may consider misleading or unauthorized.
 |
| 1. Discontinue the use of all advertising matter upon suspension or termination of certification and shall return any certification documents as required by TABSEER.
 |
| 1. Use certification only to indicate that products are certified as being in conformity with specified standards/technical regulations.
 |
| 1. Ensure that no certificate or report nor any part thereof is used in a misleading manner.
 |
| 1. Making reference to its product certification in communication media such as documents, brochures or advertisement that comply with the requirements of TABSEER.
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| **PART – 3 Declaration** |
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| 1. The organization named above applies for certification for the scope(s) set out in this application. I declare that the information on this form and any information given in support of this application are correct and accurate to the best of my knowledge.
 |
| 1. Moreover, I acknowledge that the information declared herein shall only be valid within one (1) month from CB’s acceptance date. If for any reason, an assessment has not been confirmed within the said period, it will be my responsibility to update the CB of my organization’s information by resending a new application form.
 |
| 1. I have read the TABSEER Certification Body general Conditions for certification and undertake that the organization will comply with these requirements if this application is accepted.
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| 1. We declare that we do not engage any consultancy from TABSEER on the product intended for this application.
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| **Name** | **Signature** |
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