**Appendix to Application for Conformity Assessment**

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| Pursuant to Government Regulation **118/2016 Coll.**\*) (hereinafter referred to as GR) (Directive **2014/35/EU**\*)) |
| **ELECTRICAL EQUIPMENT DESIGNED FOR USE WITHIN CERTAIN VOLTAGE LIMITS**  |

*Please submit with your Application the following:*

*Technical documentation required for conformity assessment pursuant to Annex 3 (2) to GR 118/2016 Coll.*

*(Please mark with a cross the activities you wish to order)*

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| **The Customer hereby orders from the Engineering Test Institute, Public Enterprise, the following activities:** |
| [ ]  | **1** | **Assessment of conformity of electrical equipment** to essential requirements of principal elements of the safety objectives set out in Annex 1, incl. assessment of technical documentation specified in Annex 3 to GR 118/2016 Coll., with subsequent issuance of a **Certificate** attesting the conformity of the electrical equipment to the essential requirements |
| [ ]  | **2** | **Assessment of conformity of electrical equipment** to essential requirements of principal elements of the safety objectives set out in Annex 1, incl. assessment of technical documentation specified in Annex 3 to GR 118/2016 Coll., concluded with issuance of a **Final report**  |
| [ ]  | **3** | **Assessment of a set of technical documentation**  |
| [ ]  | **4** | **Assessment of conformity of electrical equipment** to essential technical requirements of GR 117/2016 Coll. (2014/30/EU) |
| [ ]  | **5** | Verification of the electrical equipment conformity with requirements of the standard **(standards)**  |
| [ ]  | **6** | **Issuance of:** | [ ]  | Certificate/s |
|  |  | Language: | [ ]  | Czech | [ ]  | English | [ ]  | German | [ ]  | Other  |
| [ ]  | **7** | **Issuance of:** | [ ]  | Final (summary) report |
|  |  | Language: | [ ]  | Czech | [ ]  | English | [ ]  | German | [ ]  | Other  |
| [ ]  | **8** | **Other** *(specify):* |       |
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| Appendix completed by: |
|  |       |  |       |  |  |  |
|  | *Name and position of responsible person* |  | *Date* |  | *Signature, stamp* |  |

Should you need any help with completion of this form, please contact:

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