**Application for sampling**

*All fields are obligatory, except the fields with a specific remark*

**1.Data of the applicant**

|  |  |
| --- | --- |
| Company: |  |
| Reg No: |  |
| Legal address: |  |
| Sampling location:  (*filled if it is different from legal address*) |  |
| Contact person: |  |
| Position of contact person: |  |
| E-mail of contact person: |  |
| Phone of contact person: |  |

**2. Aim of the sampling**

|  |  |
| --- | --- |
| Applied / harmonized product standard: |  |
| Test standard: |  |
| Test laboratory, reference to accreditation/notification:  *(filled if manufacturer have already choosed laboratory)* |  |

**3. Product information and documentation required**

|  |  |
| --- | --- |
| Name and type of the product: |  |
| Description of the product: |  |
| Drawings of the product: |  |
| Specification of the product:  List of all components, including parameters and manufacturers of components |  |
| Written procedure and/or instructions of manufacturing:  *(Required in case of testing prototypes)* |  |

I declare that:

* I submit all the necessary documentation which is required by Inspecta Estonia OÜ;
* all data given in this application is correct and truthful.
* I have read the Inspecta Estonia OÜ General Sales and Contract terms and conditions <https://www.kiwa.com/ee/et/ettevottest/uldtingimused/> I understand the content and comply with the contract.

|  |  |  |
| --- | --- | --- |
|  |  |  |
| *Authorized representative name and signature* | *Date* |