

## CE-GAR, CE-BED/R813, GASKEUR, GastecQA (gas als warmtebron)

General data of applicant (conform Chamber of commerce)					
Contact person	Mr. / Mrs. / Ms.				
Function					
E-mail					
Name organisation					
Kiwa Customer nr. (if known)					
Following information only needed if no Kiwa customer nr. is available.					
Address					
Zip code and city					
Country					
Mailing address (if different)					
Telephone / Fax					
Website					
Chamber of commerce nr.					
VAT nr.					
Specific product information					
Desired certification according to so					
☐ CE-GAR		☐ CE-BED		GASKEUR	
GastecQA (gas als warmtebron)					
Type of certification:					
☐ Initial certification		☐ Extension		☐ Modification	
Recertification (end date certificate) :				Other:	
Kind of product:					
☐ Cooking or catering appliance		☐ Heating appliance		☐ Domestic hot water appliance	
Fitting (e.g. burner control, gas valve)			Other:		
Surveillance information					
Do you want Kiwa to perform the surveillance? (Mandatory for GASKEUR and GastecQA)			Yes (A sepa	arate application form for surveillance will be sent)	
If applicable, existing Kiwa contract nr.					



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Planning					
In which period would you like the initial testing to take place, if applicable?					
In which period would you like the certification to take place?					
Optional testing					
RED: Radio Equipment Directive (RED) 2014/53/EU.					
☐ Full electrical safety testing, according to EN 60335-1 :2012 and EN 60335-2-102:2016.					
☐ Full EMC safety testing, according to EN 55014-2: 2015, EN 55014-1: 2007, EN 61000-3-2: 2014 and EN 61000-3-3: 2013.					
Additional product information to make a quotation					

Please send this form to Ernst Vossers (Ernst.vossers@kiwa.nl) by mail or e-mail. After receipt we will contact you as soon as possible.