**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* |