***Application Form***

***for assessments within the scope of the ATEX Directive 2014/34/EU***

|  |  |  |
| --- | --- | --- |
| **Applicant:** | Company: |  |
|  | Address: |  |
|  | Zip code/town/state: |  |
|  | VAT no: |  | Contact:  |
|  | Phone: |  | Mobile no: |
|  | E-mail: |  |  |
|  | PO no., if any: |  |  |
|  |  |
|  | ***Includes the following legal entities:*** |
| **Legal**  |  |
| **entities:** |  |
|  |  |
|  | ***Applies for certification of the production site/address:*** |
| **Production site/ Address:** |  |
|  |  |
|  |  |
| **Scope:** | ***The certification shall include:*** |
|  | (please state standards below) |
|  |  |  |
|  |  |  |
|  |  |  |
| **Previous** **certification:**  | Yes \_\_\_ (please enclose certificate) No \_\_\_ |
|  |

|  |  |
| --- | --- |
| **1. Service(s) requested** | **2. Kind of atmosphere** |
| * ATEX *“EU Type Examination Certificate”* to **Annex III**
* ATEX *“Certificate of Conformity”* to **Annex IX (**Unit Verification)
* ATEX *“Production Quality Assurance Notification*” to **Annex IV**
* ATEX *“Product Quality Assurance Notification”* to **Annex VII**
* ATEX *“Notice of Conformity to Type*” to **Annex VI**
* ATEX “Conformity to Type” (Product Verification) to **Annex V**
* ATEX *“Acknowledge of Receipt”* (storage of none-electrical file in 10 years) to **Annex VIII**
 | * Gas (G)
* Dust (D)
* Gas + Dust (D/G)
 |
| **3. ATEX Category**  | **4. Type of protection** |
| * Category 1
* Category 2
* Category 3
* or “mixed category”:
 | **□ ia □ ib □ d □ e □ m □ n****□ o □ p □ q****□ other** |
| **5. Equipment protection level** | **6. Intended marking** |
| * Ga
* Gb
* Gc
 | * Da
* Db
* Dc
 | * Ma
* Mb
 | Ex  |
| **7. Specified ambient temperature area:** (standard -20oC to + 40 oC) |
|  |
| **8. Intended use(s) of equipment, description of functions** |
|  |
| **9. Equipment name, model number(s),type and eventually options** |
|  |
| **10. Intended markets, industries, locations for equipment** |
|  |
| **11. Equipment ratings (electrical, mechanical, max temperature, approvals, etc.)** |
|  |
| **12. Design, Quality Control, and Fabrication** (only to be filled in if application for a “quality module”) |
| * Quality system utilized
* ISO 9001:2000 Registered
* Description
* Register Number
 | Production VolumeNumber of Employees Number of Production Employees Number of Shifts | \_\_\_\_\_\_\_\_\_\_\_\_ |
| **Terms of Certification:**The company agrees to comply with the obligations that are imposed on the company before, during and after the certification in accordance with Dancert’s General Terms and Conditions for Certification, Inspection and Approval:<http://www.dancert.dk/uk/regulations/general-terms/>The company has been informed of Dancert’s processing of personal data:<http://www.dancert.dk/uk/gdpr/privacy-policy/> |
| **Date:** |  |
| **Name and** **Signature:** |  |