

**FLEETWOOD NOTIFIED BODY APPLICATION FORM:
APPLICATION FOR PPE TYPE APPROVAL IN ACCORDANCE WITH REGULATION 2016/425 ON
PERSONAL PROTECTIVE EQUIPMENT, AS AMENDED TO APPLY IN GB**

Section 1: Manufacturer Details

NAME OF MANUFACTURER: _____

ADDRESS OF MANUFACTURER: _____

IS THE ABOVE ADDRESS A PLACE OF PRODUCTION? _____

If no, please also supply additional production address(es) below:

PLACE(S) OF PRODUCTION (if different): _____

APPLICATION SUBMITTED BY: _____

JOB TITLE: _____

DATE OF APPLICATION: _____

Where the application is signed by the Authorised representative on behalf of the manufacturer (who is the named applicant) please provide contact details of the Authorised Representative:

NAME OF AUTHORISED REPRESENTATIVE: _____

ADDRESS OF AUTHORISED REPRESENTATIVE: _____

Section 2: Product(s) Details

Type of Product:	Name of Product(s):	Description of Product(s):
<input type="checkbox"/> Lifejacket <input type="checkbox"/> Buoyancy Aid <input type="checkbox"/> Swim Aid <input type="checkbox"/> Immersion Suit <input type="checkbox"/> Deck Safety Harness <input type="checkbox"/> Deck Safety Line <input type="checkbox"/> Diving Wet Suit <input type="checkbox"/> Diving Dry Suit <input type="checkbox"/> Surface Wet Suit <input type="checkbox"/> Other	<i>Please include any relevant model numbers</i>	<i>Please state performance level (where applicable)</i>

Section 3: Conformity Modules required:

- Module B only (UK Type-examination)**
(please provide details of Surveillance conformity module being applied, for Cat III PPE only)
- Module C2 only (Conformity to type based on internal production control plus supervised product checks at random intervals)**
(please provide Module B details)
- Module D only (Conformity to type based on quality assurance of the production process)**
(please provide Module B details)
- Module B (UK type-examination) plus Module C2 (Conformity to type based on internal production control plus supervised product checks at random intervals)**
- Module B (UK type-examination) plus Module D (Conformity to type based on quality assurance of the production process)**

Do you require certification to include UKNI for Northern Ireland? Yes No

FLEETWOOD TEST HOUSE

Please note that CE approval can be used for placing product on the market in Northern Ireland. Therefore, if you already have a CE approval with an EU27 Notified Body you will not need a separate UKNI mark.

Section 4: Performance standards

Please list the standards to be applied in support of certification.

Section 5: Existing Quality Management System Certification

Do you currently have ISO 9001 certification?

If yes, please supply a copy of ISO 9001 certificate and complete fields below.
If no, please supply any relevant information regarding your current quality management system.

Certification Body details:	Scope of Approval:
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Number of Production Sites:	Number of employees:
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Section 6: Supporting Documentation

Please supply the following documentation as relevant: <input type="checkbox"/> Technical File <input type="checkbox"/> Component/Material Approvals <input type="checkbox"/> Existing Test Reports	<input type="checkbox"/> Existing Certificates <input type="checkbox"/> Copies of UK Declaration of Conformity <input type="checkbox"/> Any other supporting documentation Give further details here:
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Any Additional Comments:

By completing and signing this form the applicant is confirming that no application has been made to another Approved Body and that no other Approved Body has previously refused certification for the product.

Applicants signature:	Date:
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Name in Block Capitals:	Position in Company:
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To be completed by Fleetwood Notified Body on return of application:

The information about the client and the product is sufficient for the conduct of the certification process?	Yes <input type="checkbox"/> No <input type="checkbox"/>
The scope of certification sought is defined.	Yes <input type="checkbox"/> No <input type="checkbox"/>
The means are available to perform the requested evaluation activities?	Yes <input type="checkbox"/> No <input type="checkbox"/>
FNB has the competence and capability to perform the certification activity?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Application accepted <input type="checkbox"/>	Application declined <input type="checkbox"/>	FNB signature
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Additional comments: