

Slovak Institute of Metrology

Notified body 1781 Karloveská 63, 842 55 Bratislava, Slovakia

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Number of Application:
(to be filled by the Slovak Institute of Metrology):

APPLICATION FOR CONFORMITY ASSESSMENT

In accordance with the Directive 2014/32/EU of the European parliament and of the council of 26 February 2014 on

the harmonisation of the laws of the Member States relating to the ma instruments		·	
1. Applicant (manufacturer, authorised representative, a Company name:	import	ers or distributors)	
Address:	ID:		
Representative of the company (Name and Surname):	Phone Emai I agre	l: ee to receive information:	
Representative authorised for the meeting:	Phon		
	Fax:		
	Emai	ail:	
2. Manufacturer			
Company name:		Phone:	
Address		Fax: Email:	
Address:		етан;	
3. Procedure/Modules			
☐ Module H1: CONFORMITY BASED ON DESIGN	EXA	MINATION	
Approval of type			
Amendment/extension of EU design examination of	ertifica	ate	
4. Declaration of the manufacturer/applicant:			
Signing this application, I confirm that the information provided in not applied to any other notified body (authorised body) for or requirements for conformity assessment according to the Directive the product evaluation being assessed I will provide with all the samples of the product the notified body.	conforn 2014/3	nity assessment. I agree with the 2/EU and I am undertaking that for	
		Name and Signature	

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Type of instrument:	Type designation:
	tring instruments (measuring range; auxiliary equipment, which can be connected to the ts part; presentation in which the measuring instrument type is produced;)
type mentioned, or are t	s part, presentation in which the measuring instrument type is produced,)
6. Requiremen and normati	t to perform the tests according to the harmonised standard ve documents:
Marking of the standard	Title of the standard

Number of Application:

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Number of Application:	

7.	List of	enclosed	documen	tation	*/
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Bratislava, date:

	 	
No.	Title	Marking
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*/ In ca	se of lack of place, please add in the enclosure	
Europe Date:	on the market. The territorial validity for this liability insurance is determine. Name and Signature (Applicant):	
Daw.	Nume und dignature (1.197.1.2).	
(Concl	ry NO týkajúce sa preverenia a potvrdenia žiadosti: Jusions of the notified body concerning both the verification and confirmation of the Slovak Institute of Metrology)	of the application - to be
	nuje žiadosť všetky potrebné údaje na posúdenie zhody uvedeného meradla plication contains all necessary data for assessment of accordance measuring instrument):	☐ yes ☐ no
Je tech	hnická dokumentácia (§ 13) a dokumentácia o systéme kvality postačujúca	yes no
	nical documentation and documention of quality system sufficient)? O schopná poskytnúť požiadané posúdenie zhody	
(The Not	tified Body is competent to provide requested assessment of accordance):	∐ yes ∐ no
Poznu	ímka/Notice:	
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	V prípade nedostatku miesta uviesť v prílohe /In case of limited spac	· · · · · · · · · · · · · · · · · · ·

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Bratislava, date: