

# ORDER FORM

## CONFORMITY ASSESSMENT

NEMKO COMLAB



### TASKS TO BE CARRIED OUT:

Identification of test suites: <input type="checkbox"/>	Review of Technical Construction File (TCF): <input type="checkbox"/>	Certificate of Conformity (CoC): <input type="checkbox"/>
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### CUSTOMER DETAILS

Company Name:		Company Registration No (if applicable):
Postal Address:		
Office Address:		
Tel:	Fax:	Email:
Contact:		Customer Reference:
Tel:	Fax:	Email:

### MANUFACTURER (If different from above)

Company Name:
Address:

### PRODUCT INFORMATION (Please be detailed and accurate)

Product Category:	Product Name:
Place of Manufacture:	Anticipated Production Volume:
Type Designation:	Model/Version:
Software Identification and Version:	
Additional Description (Specific Functions, Interfaces, Ports and Other Relevant Information)	

**DOCUMENTATION ENCLOSED** Ref. the R&TTE Directive (1999/5/EC) annex II pt. 4:

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**FOR REVIEW OF TCF**

If other Notified Bodies that have received the TCF for review please list them below:

Identification number:	Name

**ADDITIONAL INFORMATION**

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**CONFIRMATION**

Company Stamp:	Date:
	Name:
	Signature:  I declare that I have read and understood the Nemko Comlab Business Terms.

**Nemko Comlab**  
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