



Product Certification Section
Product Certification and Inspection Department
SIRIM QAS International Sdn. Bhd. (Company No. 410334-X)
 No. 1, Persiaran Dato' Menteri
 P.O. Box 7035, 40911 Shah Alam
 Selangor Darul Ehsan., Malaysia
 Tel: 603 – 55446409/6420 Fax: 603 – 55446484

APPLICATION FOR CB TEST CERTIFICATE (IECEE - CB SCHEME)

- Please tick here for new application
- Please tick here if applying for a change to an existing CB Test certificate and specify certificate number :
MY-.....
- Please tick here if samples submitted together with application.

A. APPLICANT INFORMATION (Name to appear on certificate as the certificate holder)

Name and address of applicant: <i>(Note: Company name with full address)</i>	
Tel. no., Fax no., e-mail address	
Name and address of manufacturer: <i>(Note: Company name with full address)</i>	
Tel. no., Fax no., e-mail address	
Name and address of factory :	
<i>Note: When more than one factory, please complete section D and use supplementary sheets</i>	

B. PRODUCT INFORMATION

PRODUCT NAME	
RATING(S)	
TRADEMARK	
MODEL / TYPE REF.	
IEC STANDARD(S)	
NATIONAL DIFFERENCES (if applicable)	

**C. DECLARATION AND UNDERTAKING
[By Applicant]**

In connection with this application, I/we:

- (a) declare that the information provided in this application is correct and accurate in all respect and that I/we will follow the rules of the CB Scheme;
- (b) undertake to supply all information required by SIRIM QAS International Sdn. Bhd. for the purpose of issuance CB test certificate;
- (c) undertake to make samples of product(s) and materials available to SIRIM QAS International Sdn. Bhd. for evaluation and testing purposes;
- (d) undertake to pay all costs associated with the issue of a CB test certificate;
- (e) agree that SIRIM QAS International Sdn. Bhd. may release information obtained in the course of processing the application to the public or government authorities so far as is prudent to warn in the opinion of SIRIM QAS International Sdn. Bhd.;

Signature of authorized representative:

Date:

.....
Name:

Designation:

**D. DECLARATION OF REPRESENTATIVE PRODUCT(S) FROM MULTIPLE FACTORIES
[By Manufacturer]**

(Note: Not applicable if Declaration Letter is provided by manufacturer)

In connection with this application, I/we:

- (a) declare that the sample(s) submitted for evaluation is (are) representative of the products from each factory.

Signature of authorized representative:

Date:

.....
Name:

Designation:

For SIRIM QAS International Sdn. Bhd. use only.

Acknowledgement of receipt

Job No.:.....

I confirm receipt of the followings :

Application for CB Test Certificate

Test Sample _____ piece(s) (If applicable)

Others (Please specify) :.....

Name:

Signature: