**Appendix to Application for Conformity Assessment**

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| pursuant to Government Regulation **9/2002 Coll.**\*) (hereinafter referred to as GR) (Directive **2000/14/EC**\*)) |
| **PRODUCTS FROM THE POINT OF VIEW OF** NOISE EMISSION  **(Noise emission by equipment for use outdoors)** |

*Please submit with your Application the following:*

*Technical documentation required for conformity assessment pursuant to Annexes 5-8 to GR 9/2002 Coll.*

*(Please mark with a cross the activities you wish to order)*

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| **1. The Customer (the manufacturer or an authorized representative only) hereby orders from the Notified Body the following activities:** | | | | | | | | | | | |
|  | **1.1** | Assessment of technical documentation of the equipment specified in GR 9/2002 Coll., Annex 1 – procedure pursuant to GR 9/2002 Coll., Annex 5 (5), and subsequent issuance of report; | | | | | | | | | |
|  |  | The following checks were chosen during production of the equipment: | | | | | | | | | |
|  |  |  | **Periodical checks** – procedure pursuant to GR 9/2002 Coll., Annex 5 (6.1) | | | | | | | | |
|  |  |  | **Checks at random intervals** – procedure pursuant to GR 9/2002 Coll., Annex 5 (6.2) | | | | | | | | |
|  | **1.2** | **Unit verification** of the equipment specified in GR 9/2002 Coll., Annex 1 – procedure pursuant to  GR 9/2002 Coll., Annex 6 (3, 4), and subsequent issuance of certificate of conformity | | | | | | | | | |
| **2. The Customer hereby orders from the Engineering Test Institute, Public Enterprise, the following activities** (Beyond the scope of the Notified Body's activities): | | | | | | | | | | | |
|  | **2.1** | **Measurement of the sound power level** of the equipment specified in GR 9/2002 Coll., Annex 2 – by methods stated in Annex 3 to GR 9/2002 Coll., and followed by issuance of the test report | | | | | | | | | |
|  | **2.2** | **Issuance of:** | |  | Certificate/s | | | | | | |
|  |  | Language: | |  | Czech |  | English |  | German |  | Other |
|  | **2.3** | **Issuance of:** | |  | Final (summary) report | | | | | | |
|  |  | Language: | |  | Czech |  | English |  | German |  | Other |
|  | **2.4** | **Issuance of:** | |  | Report | | | | | | |
|  |  | Language: | |  | Czech |  | English |  | German |  | Other |
|  | **2.5** | **Other** *(specify):* | | |  | | | | | | |
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| Appendix completed by: | | | | | | |
|  |  |  |  |  |  |  |
|  | *Name and position of responsible person* |  | *Date* |  | *Signature, stamp* |  |

Should you need any help with completion of this form, please contact:

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