

ORDER FORM

APPLICATION FOR _____

Testing, surveillance

No.:	Date:
Type or group of products:	

TO BE FILLED IN BY THE APPLICANT

Applicant:		
Tel:	Mob:	Fax:
Order according to Offer no.:		Offer date:

RESPONSIBILITIES OF THE APPLICANT:

WE GUARANTEE:

- that on base of the final Report on testing according to this application, every product shall be as a whole identical to the sample tested.

WE DECLARE:

- that, according to the Law on consumer protection, every product set for market will be marked with:
 - name of manufacturer company, product origin (manufacturer country) and / or
 - name and head-office of the applicant
 - name of the product
 - basic internal measures
 - type / group of product
 - product's production material and / or determined category.
- that we shall inform You in time about all the changes in the construction or materials in order to perform another testing an to issue a new Report on testing.
- that we shall pay all the costs for taking samples, testing costs and the costs of the issuance of the Report on testing, as well as all the costs of transporting the samples to and from the place of testing and the costs of collaborators who perform the sampling within the legal or agreed term.
- that we shall **take over the samples within thirty (30) days** as of completion of testing. In case that we do not take over the samples within the said time, we leave the samples at the disposal of Euroinspekt . drvokontrola d.o.o..

Authorised contact person:

Applicant:

In _____,
place date

Stamp

Signature of responsible person