

OPERATIONAL DOCUMENT

Request of Inspection

TO BE COMPLETED BY THE CERTIFICATION BODY REQUESTING VISIT

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OD CIG 022422 SECTION A - REQUEST OF INSPECTION

Questionnaire to be completed by the Certification Body requesting the visit.

| A.1 Requesting Certification | Requesting Certification Body: | | Reference No.: | | | |
|---|--|------------|----------------|--|--|--|
| A.2 Requested Inspection Bo | Requested Inspection Body: | | | | | |
| A.3 Factory's.1 Factory | 3 Factory's.1 Factory registered name and addressfactory location: | | | | | |
| Factory'sFactory registered name: | | | | | | |
| Street and No.: | | | | | | |
| Postal Code: | | | | | | |
| City: | | | | | | |
| Province: | | | | | | |
| Country: | | | | | | |
| GPS-coordinates: (optional) | □ N: □ S: □ E: | W: | | | | |
| Factory'sA.3.2 Factory representative name and contact data: | | | | | | |
| Name:Factory representative name: | | | | | | |
| FunctionPosition: | | | | | | |
| Telephone: (incl. country code): | Country Code: | City Code: | Phone: | | | |
| Fax:Mobile (incl. country code): | Country Code: | City Code: | Phone: | | | |
| E-Mail: | | | | | | |
| A.4 Licence Holder registered | d name and addre | ess: | | | | |
| Licence Holder name: | | | | | | |
| Street and No.: | | | | | | |
| Postal Code: | | | | | | |
| City: | | | | | | |
| Province: | | | | | | |
| Country: | | | | | | |
| Telephone: (incl. country code): | Country Code: | City Code: | Phone: | | | |
| Fax:Mobile (incl. country code): | Country Code: | City Code: | Phone: | | | |
| E-Mail: | | | | | | |
| Licence Holder's Holder representative name and contact data: | | | | | | |
| Name: | | | | | | |
| FunctionPosition: | | | | | | |
| Telephone: (incl. country code): | Country Code: | City Code: | Phone: | | | |
| Fax:Mobile (incl. country code): | Country Code: | City Code: | Phone: | | | |
| E-Mail: | | | | | | |
| | | | | | | |

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|-----------------|---|--|------------|--|--|
| A.5 | 5 Product category: | | | | |
| A.6 | Standards: | | | | |
| A.7 | Certification Mark(s) requested: | | | | |
| A.8 | Inspection frequency: | | | | |
| A.9 | Other information (such as documents enclosed): | | | | |
| Place and Date: | | | Signature: | | |