| | CONSTRUCTION PRODUCTS REGULATION APPLICATION FORM |
|---|---|
| **SZUTEST** | |

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|---|---|
| **Company Name** | |
| **Mailing Adress** | |
| **Branch Address** | |

| | | | |
|---|---|---|---|
| **Is the Company listed above a subsidiary of any other Corporation or Company? (if yes please state)** | | | |
| **Number of Sites** | | **Number of Shifts** | |

If your organization is a multi-site organization, please attach the information about address, number of employees and the processes performed for each of the sites.

| | | | |
|---|---|---|---|
| **Telephone** | | **Fax** | |
| **Web Address** | | **e-mail** | |
| **Name of the General Manager** | | **Name of the Management Representative** | |
| **Number of Employees** | | | |

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|---|---|
| **Definition of the product** | |
| **Harmonised standard** | |
| **If applicable - product or quality management certificate** | |
| **Definition of established quality management** | |
| **Out sourced or subcontracted processes** | |

**Documents listed in the following needed to be sent to supply application;**
**1.** Technical File and Quality Manual (last revision)
**2.** Related Product and Quality Certificates
**Company Declaration:** The company will accept to not to apply any other notified body for certification in case of contract is approved between Szutest and the company, and won't apply until evaluation is finished.
The company accepts that any information about the product to be certified will be presented to Szutest. We declare that we will share that last revision of Technical File and Quality Manual starting from the application date.

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| Please specify the certificates which you currently have | Registrar's Name | Type of Certificate | Certification Date |
|---|---|---|---|
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| Where did you hear about Szutest? | |
|---|---|
| Name of the consultancy company and/or consultant (if you utilized one)? | |

| Tentative Audit Date | |
|---|---|
| Requested language of report and certificate | ☐ Turkish    ☐ English |
| I request a certificate for each plant | ☐ Yes    ☐ No |
| I request a certificate for each standard | ☐ Yes    ☐ No |

| Applicant Printed Name and Signature and Stamp | |
|---|---|

### SZUTEST OFFICE USE ONLY

| Is the Application in the Scope? | ☐ Yes  ☐ No | Date | |
|---|---|---|---|
| Name of Szutest Officer | | | |
| Explanation | | | |