

**Application
for carrying out conformity assessment procedure
UNIT VERIFICATION**

According to the requirements of **Annex IX** of the Directive of the European Parliament and of the Council **2014/34/EU** on the harmonisation of the laws of the Member States relating to equipment and protective systems intended for use in potentially explosive atmospheres

1. General information

1.1. Name and address of the applicant (manufacturer):

1.2. An authorized person to contact with Certification Body:

First name, surname:

Telephone / e-mail:

2. Name and address of the manufacturer (if different than in point 1)

3. Name of the product (group of products):

4. Acceptance for laboratory tests:

☐ I agree to carry out laboratory tests, if required.

Submitting this application, I declare that:

- 1) I got acquainted with and will meet all applicable requirements of the Certification Program – “Assessment of equipment and protective systems intended for use in potentially explosive atmospheres”,
- 2) product meets the requirements of Annex II, item 1.2.7 of the Directive 2014/34/EU - ATEX.

According to the Regulation of the Minister of Finance dated 22 March 2002 on implementing certain provisions of the Act on tax on goods and services and excise duty (Journal of Laws No. 27, item. 268), we authorize J.S. Hamilton Poland Sp. z o.o. to issue VAT invoices without our signature.

.....
Location, date

.....
The person authorized for representing
Signature