

# Application form

General data (conform Chamber of commerce)		
Name organisation		
Contact person	Mr. / Mrs. / Ms.	
Position		
E-mail		
Address		
Zip code and city		
Mailing address (if different)		
Telephone / Fax		
E-mail		
Website		
Chamber of commerce no.		
VAT no.		
External consultant	<input type="checkbox"/> None <input type="checkbox"/> Organisation..... Name consultant.....	
How do you know Kiwa?	<input type="checkbox"/> Website <input type="checkbox"/> Social media etc. <input type="checkbox"/> Consultant <input type="checkbox"/> Other: .....	

Specific product information			
<input type="checkbox"/> Initial certification	<input type="checkbox"/> Extension current certificate no. K.....	<input type="checkbox"/> Take over	<input type="checkbox"/> Type testing
<input type="checkbox"/> Hygienic aspects <input type="checkbox"/> Kiwa-NSF/ANSI <input type="checkbox"/> KTW <input type="checkbox"/> BRL-K 15001	<input type="checkbox"/> Recertification (end date certificate) :	<input type="checkbox"/> Other:	
All information required to make an offer			

Applicant declares:
<ul style="list-style-type: none"> <li>That he/she is authorized on behalf of the company to enter into the obligation arising from submitting the application.</li> <li>That he/she knows of no reason that the product should not be used in contact with drinking water.</li> <li>That he/she is familiar with and agrees to the Kiwa Regulations for Product Certification 2014.</li> <li>That he/she will not link the name Kiwa with his/her company in any way by word of mouth or in writing before he/she has conducted a Kiwa-certification agreement with Kiwa.</li> <li>That he/she will not hold Kiwa liable for damage resulting from the application of rejection thereof.</li> <li>The he/she has submitted the full information on the use and composition of the product to Kiwa via               <ul style="list-style-type: none"> <li>accompanying Kiwa wetted parts list form and/or</li> <li>accompanying Kiwa formulation declaration form.</li> </ul> </li> </ul>

Planning
In which period would you like the audit to take place?

Please send this form to  
 Kiwa Nederland B.V.  
 Product group Hygienic Aspects  
 Sir W. Churchill-laan 273, NL - 2288 EA Rijswijk **or**  
 P.O. Box 70, NL – 2280 AB Rijswijk  
 The Netherlands  
 E-mail: [PGHA@Kiwa.nl](mailto:PGHA@Kiwa.nl)

After receipt we will contact you as soon as possible

# Kiwa Formulation Declaration

## Formulation of **TRADE NAME**

nr	CAS# [1]	Chemical name [2]	Trade name [3]	Supplier [4]	Content [5]	Function [6]	Comments [7]
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							

## Kiwa secrecy declaration

Kiwa declares that:

- the information on this form shall be in strict confidence in accordance with the Kiwa Regulations for Product Certification 2014;
- no disclosure of the information will be made to applicants or their suppliers or third parties unless your company provides written approval.  
For Dutch drinking water approvals, the information may need to be disclosed to the Committee of Experts (CvD MC) and its Subcommittee Toxicity W4, according to article 4, paragraphs 1 and 3, of the 'Regeling materialen en chemicaliën drink- en warm tapwatervoorziening' ('Materials and chemicals in the supply of drinking water and warm tap water Regulation'; published in the Government Gazette). Kiwa will disclose only so much of the information to those committees as necessary for the sole purpose of the evaluation of the application for certification of the suitability of the materials in drinking water-contact applications;
- the information will only be used for the evaluation of suitability in drinking water-contact applications; and
- only authorized personnel shall be permitted access to the information.

## Statement

I hereby declare that the information above is accurate and complete and that I, and the Company that I represent, know of no reason the material described herein should not be used in contact with drinking water. It is also understood that the information submitted may be used as a basis for the evaluation of other products which contain this formulation.

Signature \_\_\_\_\_ Date \_\_\_\_\_

☐ check this box to indicate agreement to the Statement above (required) for electronically submitted forms

Name \_\_\_\_\_

Position/Title \_\_\_\_\_

Company \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

# Kiwa Formulation Declaration

## General instructions

- Please indicate ALL components and materials that comprise the formulation.
- For each mixture, polymer, compound or other blend, please indicate the (trade) name and producer. For each of these 'blends' a separate listing of the ingredients, suppliers, etc. is required. Please fill out or ask your supplier to fill out one "Formulation Information" form for each blend.
- Please return the form, after filling out the Statement section, via  
**E-mail:** to [PGHA@kiwa.nl](mailto:PGHA@kiwa.nl)  
**Mail or courier:** to  
Kiwa Nederland B.V.  
Product group Hygienic Aspects  
Sir W. Churchill-laan 273, NL - 2288 EA Rijswijk **or**  
P.O. box 70, NL - 2280 AB Rijswijk  
The Netherlands

## Specific instructions

### 1. CAS#

CAS stands for Chemical Abstracts Service registry number and is a systematic numbering for identifying chemicals. The MSDS for an ingredient should mention its CAS registry number. If an ingredient is a mixture of several chemicals, enter "mixture" in the CAS column. If you cannot determine a CAS registry number for an ingredient, please leave this area blank.

### 2. Chemical name

The chemical name for an ingredient. The MSDS for the ingredient should list this name.

### 3. Trade name

The trade name is the name/number used by the supplier to uniquely identify the ingredient supplied. This name should be directly related to the information entered in the supplier column.

### 4. Supplier

The supplier is the company supplying the ingredient. If the supplier is a distributor, enter both the distributor and the manufacturer. Identify the distributor with a (D) and the manufacturer with a (M). For each ingredient that you buy from more than one supplier, please enter a separate line.

### 5. Content

The amount of the ingredient in the formulation. Can be entered in %, ppm, phr, or other units. Please enter information on the range or uncertainty allowed in the amount, e.g. "10 +/- 1 %" or "9-11 %".

### 6. Function

The function of the ingredient, such as additive, pigment, processing aid, polymerization aid, monomer, etc.

### 7. Comments

Additional information, for example on compliance with (inter)national hygienic requirements.

## Kiwa Wetted Parts List

### Wetted parts list of **TRADE NAME**

Number [1]	Description [2]	Trade name [3]	Supplier [4]	Quantity [5]	Wetted surface (per part) [5]	Comments [7]

### Kiwa secrecy declaration

Kiwa declares that:

- the information on this form shall be in strict confidence in accordance with the Kiwa regulations;
  - no disclosure of the information will be made to applicants or their suppliers or third parties unless your company provides written approval.
- For Dutch drinking water approvals, the information may need to be disclosed to the Committee of Experts (CvD MC) and its Subcommittee Toxicity W4, according to article 4, paragraphs 1 and 3, of the 'Regeling materialen en chemicaliën drink- en warm tapwatervoorziening' ('Materials and chemicals in the supply of drinking water and warm tap water Regulation'; published in the Government Gazette). Kiwa will disclose only so much of the information to those committees as necessary for the sole purpose of the evaluation of the application for certification of the suitability of the materials in drinking water-contact applications;
- the information will only be used for the evaluation of suitability in drinking water-contact applications; and
  - only authorized personnel shall be permitted access to the information.

### Statement

I hereby declare that the information above is accurate and complete and that I, and the Company that I represent, know of no reason the product/material described herein should not be used in contact with drinking water. It is also understood that the information submitted may be used as a basis for the evaluation of other products which contain this product.

Signature \_\_\_\_\_ Date \_\_\_\_\_

☐ check this box to indicate agreement to the Statement above (required) for electronically submitted forms

Name \_\_\_\_\_

Position/Title \_\_\_\_\_

Company \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

# Kiwa Wetted Parts List

## Instructions

### General

- Please indicate ALL components and materials that comprise the product and come into contact with drinking water.
- For each mixture, polymer, compound or other blend, please indicate the (trade) name and producer. For each of these 'blends' a separate listing of the ingredients, suppliers, etc. is required. Please fill out or ask your supplier to fill out one "Formulation Information" form for each blend.
- For each assembled part please indicate the (trade) name and producer. For each of these assemblies a separate listing of the parts, suppliers, etc. is required. Please fill out or ask your supplier to fill out one "Wetted parts list" form for each assembly.
- If the product or any parts receive any (surface) post treatment, please attach a detailed description of the treatment.
- If applicable, please attach a drawing of the product, indicating the separate parts.
- Please return the form, after filling out the Statement section, via

**E-mail:** to [PGHA@kiwa.nl](mailto:PGHA@kiwa.nl)

**Mail or courier:** to

Kiwa Nederland B.V.

Product group Hygienic Aspects

Sir W. Churchill-laan 273, NL - 2288 EA Rijswijk **or**

P.O. box 70, NL - 2280 AB Rijswijk

The Netherlands

### Specific instructions

#### 1. *Number*

Your number for this part, corresponding to the number indicated in the product drawings (if applicable).

#### 2. *Description*

A brief description of the part, e.g. pipe, sealing, coupling, filter, etc.

#### 3. *Trade name*

The trade name is the name/number used by the supplier to uniquely identify the part. If you produce the part and it consists of one material, please enter the trade name of the material. For assembled parts, please fill out a separate wetted parts list, identified with the trade name/number.

#### 4. *Supplier*

The supplier is the company supplying the part. If the supplier is a distributor, enter both the distributor and the manufacturer. Identify the distributor with a (D) and the manufacturer with a (M). For each part that you buy from more than one supplier, please enter a separate line.

#### 5. *Quantity*

The total number of this part used to assemble the completed product (e.g. 2 couplings).

#### 6. *Wetted surface*

The wetted surface area for this part. This information may not be required for certification, but may be required at a later date for migration calculations or changes to the wetted parts list.

#### 7. *Comments*

Additional information, for example on compliance with (inter)national hygienic requirements.