



Request for Product Certificate/Registration/Licence Form*

*Request for Technical Evaluation Report

IMPORTANT: The quality and completeness of the documentation submitted by the Applicant directly influences the time and cost of processing the Registration/Licence request. Incomplete applications will not be processed.

SERVICE LEVEL AGREEMENT (SLA) REFERENCE <i>(If Available)</i>	DATE
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REGISTRATION / LICENCE REQUEST FOR <i>(Country Name)</i>
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PURPOSE OF APPLICATION	NEW	RENEWAL	REVISION
<input type="checkbox"/> REGISTRATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> LICENCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> PRODUCT CERTIFICATE 1 (PC-1 NIGERIA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> PRODUCT CERTIFICATE 2 (PC-2 NIGERIA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> PRODUCT CERTIFICATE 3 (PC-3 NIGERIA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> TECHNICAL EVALUATION REPORT (TER KUWAIT)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> OTHERS, <i>Please Specify</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A P P L I C A N T	COMPANY NAME	ADDRESS		
	CONTACT PERSON	E-MAIL ADDRESS	TELEPHONE	
	<input type="checkbox"/> AUTHORIZED DEALER <input type="checkbox"/> AUTHORIZED DISTRIBUTOR <input type="checkbox"/> MANUFACTURER <input type="checkbox"/> TRADER			
	<input type="checkbox"/> THIRD-PARTY LOGISTICS <input type="checkbox"/> OTHERS, <i>Please Specify</i>			
	REGISTRANT / LICENCEE DETAILS (please provide if you have any existing valid Registration/Licence for any of your products)			
	REGISTRATION NO.			
	LICENCE NO.			
	TER NO.			
	PC-1 NO.			
	PC-2 NO.			
PC-3 NO.				
OTHERS, <i>Please Specify</i>				

P A Y M E N T D E T A I L S	<i>(Party responsible for paying the certification service applied for, if different from the Applicant)</i>			
	COMPANY NAME	ADDRESS		
	CONTACT PERSON	E-MAIL ADDRESS	TELEPHONE	
	PAYMENT TYPE	CASH <input type="checkbox"/> CREDIT	INTERTEK CREDIT REFERENCE NO.	INVOICE CURRENCY TO BE USED
	ADDRESS WHERE INVOICE IS TO BE SENT			

DECLARATION		
PLEASE TICK (✓) HERE <input type="checkbox"/> IF YOU CONFIRM THAT THE ABOVE DETAILS ARE CORRECT.		
<input type="checkbox"/> IF YOU AGREE AND ACCEPT INTERTEK'S TERMS AND CONDITIONS (GLOBAL) AND REGISTRATION AND LICENCE SERVICES WHICH ARE AVAILABLE ON WWW.INTERTEK.COM/TERMS .		
NAME	POSITION	SIGNATURE

DOCUMENTS ATTACHED TO THIS APPLICATION		
<input type="checkbox"/> FACTORY AUDIT REPORT	<input type="checkbox"/> SUPPLIER'S DECLARATION OF CONFORMITY (SDoC)	<input type="checkbox"/> TEST REPORTS
<input type="checkbox"/> PRODUCT IDENTITY DECLARATION	<input type="checkbox"/> VERIFIED MANUFACTURERS TESTING CERTIFICATE	<input type="checkbox"/> PHOTOGRAPHS OF PRODUCTS
<input type="checkbox"/> QMS CERTIFICATES (e.g. ISO 9001, ISO/TS 16949)	<input type="checkbox"/> PRODUCT DATA SHEET / TECHNICAL DATA SHEET	<input type="checkbox"/> MSDS CERTIFICATE
<input type="checkbox"/> ISO/IEC 17025 ACCREDITATION CERTIFICATE	<input type="checkbox"/> OTHERS, <i>Please Specify</i>	

Thank you for taking the time in filling out this form. We appreciate your business!

Please also visit our website www.intertek.com/government to learn about the shipment certification services for other countries.



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PRODUCT DETAILS - GENERAL

NOTE: Please complete the below required details if this information has **NOT** been made available in the submitted invoice/shipment documents or has **NOT** been provided separately in editable electronic format (e.g. word, excel, rich text format document). Should you require additional space, please attach EXTRA SHEETS using the same template as below.

SN	PRODUCT DESCRIPTION	MODEL / TYPE / BATCH NO.	HS CODE	BRAND	COUNTRY OF ORIGIN	MANUFACTURER'S NAME AND ADDRESS	STANDARD REFERENCE
01							
02							
03							
04							
05							
06							
07							
08							
ADDITIONAL INFORMATION PROVIDED ON SEPARATE SHEETS		<input type="checkbox"/> YES NO. OF ADDITIONAL SHEETS		<input type="checkbox"/> NO			

IN GENERAL, THE APPLICANT ACKNOWLEDGES THAT ALL IMPORTED GOODS WHICH ARE SUBJECT TO SPECIFIC PROGRAMME REQUIREMENTS MAY BE RANDOMLY SELECTED FOR INSPECTION AND TESTING FOR SAFETY, QUALITY AND TRADE COMPLIANCE PURPOSES AT THE CUSTOMS TERRITORY OF THE IMPORTING COUNTRY. INTERTEK PERFORMS THE EVALUATION OF CONFORMITY BASED ON A RANDOM SAMPLING OF THEIR PRODUCTS AND ON TESTING OF LIMITED PARAMETERS THROUGH A RISK ASSESSMENT APPROACH. THE APPLICANT AGREES TO TAKE RESPONSIBILITY AND ACKNOWLEDGES THAT THEY ARE AWARE OF THE CUSTOMS LEGISLATIVE AND REGULATORY REQUIREMENTS GOVERNING THE IMPORT OF THEIR PRODUCTS AND COMMIT TO COMPLY WITH THOSE REQUIREMENTS.