|  |  |
| --- | --- |
| Name: | Installer □ Manufacturer □  |
| Address: |  |
| Quality Management System: |  |
| Quality Manager : | For the Quality Management System  |
| Quality Manager : | For the Directive application  |
| Lift Inspector : |  |

**Please use additional documents/pages where necessary**

|  |  |
| --- | --- |
| Annex/Module[[1]](#footnote-1): |  |
| Application Range: |  |
| Lift Types/Standards applied: |  |
| EC Type Examination(s)[[2]](#footnote-2) : |  |
| Design Examination(s)3: |  |

|  |
| --- |
| The inspection and Testing are performed after the suggestion of the manufacturer of the lift in an installation that satisfies the purpose of this on-site evaluation of the examined installation and inspection / testing procedures. |

Certification Terms:

<https://www.qmscert.com/wordpress/wp-content/uploads/documents/F-2002-15-Certification-Contract-QMSCERT-EN.docx>

**We hereby include**

🞏 the documentation on the quality system

🞏 the technical documentation described in point 3 of Annex IV, Part B

**Please**

Proceed with all necessary procedures for the inspection and certification of the lift.

**I hereby declare**

That the same application has not been lodged with any other notified body.

|  |  |
| --- | --- |
| **Application Date:** | **Name / Signature:** |

PERSONAL DATA PROTECTION

**By signing this Agreement**, Customer is committed to have acquired consent from the subjects of any personal data to be used in the context of the control / certification service (including sending offer, signing contract, audit planning / conducting, alerts).

Optionally, by ticking the following checkbox, Customer is committed to have acquired consent from the subjects of any personal data to be used:

☐ for receiving on behalf of the Customer any marketing emails regarding Q-CERT’s new services and certifications

|  |  |  |
| --- | --- | --- |
| ... |  | ... |
| Representative Name | Signature | Date of Application |

Guidelines / Notes:

* This form should be filled in and send either via email to sales@qmscert.com or via fax at **+30 2310 443094**
* Submitting accurate and complete information facilitates and thus accelerates the delivery of our quotation
* You may use additional documents / pages if needed
* In case of a Transfer from other Certification Body, please contact our offices, at: **+30 2310 443041**, **+30 2310 535765**
* You may find additional information regarding the Certification Procedures and Audit Information & Expectations on our website: [www.qmscert.com](http://www.qmscert.com/en)

Q-CERT will process all personal data that it collects during the audit in accordance with the relevant laws / regulations for the purposes stated above. In particular, it will maintain a record that is available to the customer, with a duration as defined by the relevant legislation / regulation. At the end of the scheduled duration of the record, Q-CERT is committed to destroy it in accordance with the applicable provisions. Subjects retain their right to withdraw their consent at any time, by sending a request at privacy@qmscert.com. Additional information on Personal Data Protection is available on Q-CERT website [www.qmscert.com](http://www.qmscert.com)

**Ανασκόπηση Αίτησης**

***Συμπληρώνεται από το αρμόδιο προσωπικό της QMSCERT***

|  |  |
| --- | --- |
| Η QMSCERT μπορεί να πραγματοποιήσει τον έλεγχο;  | [ ]  Ναι[ ]  Όχι |
| Στην περίπτωση που απάντηση είναι αρνητική (Όχι) επιλέξτε μία ή περισσότερες από τις επιλογές: | [ ]  Βάσει των στοιχείων δεν εμπίπτει στο πεδίο Διαπίστευσης / Κοινοποίησης του Φορέα μας. |
| [ ]  Τα πρότυπα που εφαρμόζει είναι παρωχημένα. |
| [ ]  Τα στοιχεία που έχει προσκομίσει είναι σε τοπική γλώσσα χωρίς να υπάρχουν επίσημες μεταφράσεις.. |
|  | [ ]  Άλλο (περιγράψτε) |

|  |  |
| --- | --- |
| Προτεινόμενο άτομο το οποίο θα πραγματοποιήσει τον έλεγχο: |  |
| Η απόφαση πιστοποίησης θα ληφθεί από: |  |

|  |  |
| --- | --- |
| Η ανασκόπηση της αίτησης πραγματοποιήθηκε από: |  |
| **Ημερομηνία** | **Υπογραφή:** |

1. Depend on Certification Procedure for Quality Assurance System (QMS) [↑](#footnote-ref-1)
2. Reference in case of Module E or Module D

3 To annex XI only [↑](#footnote-ref-2)