



**VERIFICATION OF CONFORMITY
PRODUCT MODIFICATION/VARIATION NOTIFICATION AND PROCESSING**

Notification details

Current product designation details

Continuation of product details attached... ___ printed pages

Trade brand	Model/Series	Type/description of product
1		
2		
3		

Description/details of modification/variation

Continuation of description/details attached... ___ printed pages

Product registrant (Company designated as the Registrant for the product(s), as currently listed in the Register of Fire Protection Equipment)

Company (legal) name	Company num.
Trading name	
Postal address	
Premises address	

Customer / contact (Details of the individual submitting the notification of product modification/variation)

Name	
Company name (if different to above)	Company num.
Address (if different to above)	
Position	Division/section
Direct phone	Direct fax
	E-mail

▼ Office use only

Office use only ▼

Processing details

Verification contact (Details of the contact responsible for verifying the conformance of the product modifications/variations)

Name	
Direct phone	Direct fax
	E-mail

Reference criteria (Criteria may be amended, if necessary, during the course of evaluation process)

1.

Evaluation contact (Details of the contact responsible for determining the scope and requirements of evaluation)

Name	
Company name	
Address	
Position	Division/section
Direct phone	Direct fax
	E-mail

Evaluation requirements

Further requirements attached... ___ printed pages

Evaluation notes

Further notes attached... ___ printed pages

Date	Details

Statement of conformity

The designated product/s, subject to the product changes/variations as detailed by this document and related attachments, conform with the relevant requirements of the above-stated reference criteria.

Statement by:	Date of statement:
Name (printed):	Sign:

Acquittal

Acquitted by:	Date of acquittal:
Name (printed):	Sign: