

Annex

Application Form for Recognition of Certification body for TTE

1. Name of certification body: _____
2. Address of certification body: _____
3. Representative: _____
4. Contact person: _____ TEL: _____ FAX: _____ E-MAIL: _____
5. Name of testing laboratory: _____
6. Address of testing laboratory: _____
7. Address of open site: _____
8. Scope of application: (If the space is not enough, please make another similar one of the same format and sign it for confirmation)

Scope	Items	Certification personnel

Documents submitted for application (One copy for each application)

- 1. A copy of identification document specified in the first item of Article 4 of the “Accreditation and Administration Guidelines of Recognized Certification Bodies for Telecommunications Terminal Equipment”.
- 2. A copy of certificate which identifies the testing laboratory subordinate to the certification body is recognized as specified in the third item of Article 4 of the “Accreditation and Administration Guidelines of Recognized Certification Bodies for Telecommunications Terminal Equipment”.
- 3. Basic information of certification personnel regarding certification sector of certification body.
- 4. The organization schema and function description tables regarding to certification sectors of certification bodies.
- 5. The quality manual regarding certification sector of certification body.
- 6. The TTE conformity assessment procedure.
- 7. The list of quality documents regarding to certification sectors of certification bodies.
- 8. Other information specified by the DGT.

I/We hereby declare that I/We are willing to provide necessary information and documents to

help the assessment process if the above documents submitted are incomplete or inadequate.

Application entity (signature): Application date: **/Year /Month /Day**

Representative (signature): Transaction date: **/Year /Month /Day**