

QUESTIONARY OF DELIVERY CERTIFICATE – IMPORTER

product (s):
(fill according to application to certification)

1.Name and address of importer:

2.Person representing importer in case of product certification (name , surname, telephone, fax):

3.Representing person assistant (name, surname, telephone, fax):

4. Place of storage and control of product (specify if different from p.1):

5. Imported assortment (other than reported for Certification):

6.Owned certificates for:

a)applied product

b)other product

c)quality system

7. Does the importer have a documented quality system? (yes - no)

8. If so, with what normative document it's consistent with?

9. From whom the importer buys the product?

10. Who is the manufacturer of the product?

11. Does the importer enters into a contract purchase and sale with the seller (yes - no):

12. If yes, please specify what records are contained in the contract, for *):

- a) product quality requirements,
- b) the packaging conditions,
- c) storage,
- d) transportation,

13. Please indicate the normative documents defining the scope and methods of acceptance tests:

14. Who performs the acceptance test?

15. Please provide **) acceptance tests mode in case of:

- a) their implementation,
- b) the commission to perform,

16. In the case of "a" please describe the measuring and testing equipment owned and describe rules of procedure with these equipment ***):

17. Please provide competence, responsibilities and privileges of staff associated with import (including possible acceptance tests) of product ***):

.....
city, date

.....
Name, position and signature

*

*) Underline appropriate, the content provided in a separate document attached to the questionnaire

**) In a separate document attached to the questionnaire

***) May be in a separate document attached to the questionnaire