

ISSUED: 09.08.2020

# REQUEST FOR

# **CERTIFICATE OF CONFORMITY\***

\*Request for Technical Inspection Report

\*Request for Certification of Inspection

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

TYPE OF APPLICATION			SHIPMENT CERTIFICATION REQUEST FOR (Country name)				
Single Shipment Multiple Shipment**							
Valid from Valid to			APPLICANT TYPE				
**Multiple Shipments is only VALID for regular exporters having frequent shipments of the same products. This RFC can be used for multiple shipments of the same products within the validity period indicated. Validity period shall not exceed one year in all cases.				Trader	ed Dealer	Authorized Distribu Third-Party Logistics	
	EXPORTER				IMPORTER		
Company Name							
Company Address							
Contact Person							
E-Mail Address							
Telephone No.							
Commercial Regi	stration No. or eq	uivalent					
Certificate of Origin No. & Date			Profo	rma Invoice No	o. & Date		
Customer Dealer No.				Ware	house Licence	No.	
AWB No.			BA No.			BL No.	
FDI No.			Importer Code	2		IDF No.	
L/C No.			RC/BN No.			TIN	
UCR No.			Other (please	specify)			
	INSPECTION L	OCATION			PAYER (part	ty responsible for paying t	the certification service)
Company Name							
Company Address							
Contact Person							
E-Mail Address							
Telephone No.							
Payment Type	Cash	Credit	Intertek Credit Re	ference No.		Invoice Currer	ncy to be used
Addresses for inv	oices to be sent						
Purchase Order to be used?					Yes	No	
If eligible, would you like to have your inspections conducted with Inv					Yes	No	
inspection turnaro	und time. Inview de	livers high qua		et our Total Q			inspection experts and faster noting public health and well-

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#### **SHIPMENT DETAILS**

Port of Loading				Port of Disc	charge			
Vessel Name				Goods Con	dition	New	V	Used
Country of Supply				Delivery		Full		Partial
Gross Consignment Weight			Goods Availability Date				d Shipment available)	
Mode of Transport	Air	Rail	Road	Sea Other (please specify)				
Mode of Shipment	Bulk	FCL	LCL	Tanker	Traile	er T	Γruck	Other (please specify)
Quantity								
No. of Container			Container Type	20'	40'	C	Other (pleas	e specify)

#### **DOCUMENTS ATTACHED TO THIS APPLICATION**

Registration/Licence (e.g. GOEIC/SoR/TER/PC)	Certificate of Origin	Photographs of Products	L/C
QMS Certificates (e.g. ISO 9001, ISO/TS 16949)	Packing List	B/L or AWB	Test Reports
Proforma Invoice	IDF	Other (please specify)	

## **DECLARATION**

By submitting this Application

- I/We hereby confirm that the information provided herein for the purpose of obtaining the shipment certification document is accurate and complete in all respects to the best of my/our knowledge.
- I/We have read and fully comprehend the Intertek's Terms and Conditions for Government and Trade Services (GTS) which is available at www.intertek.com/terms and hereby confirm my/our acceptance of these Terms and Conditions for obtaining the shipment certification document.

Name	Position	
*Signature	Date	

<sup>\*</sup> Signatures of Authorized Representatives can be affixed by (a) Physical signature (Handwritten); or (b) Digital signature (Digital image of the signature); or (c) Electronic signature (Printed Name); or (d) Company Stamp (Physical or Digital images).

### **PRODUCT DETAILS**

Please click the appropriate excel template for the data entry of the product details applicable for the certification of your shipment.

• Request for Certificate of Conformity – General Product Details



• Request for Certificate of Conformity – Cosmetics & Perfumery Product Details



• Request for Certificate of Conformity – Vehicle Details

Thank you for taking the time to fill out this form. We appreciate your business.

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

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