



# Multiple Certification Application Form

## Fire Detection and Fire Alarm Products

Please complete the form electronically where possible. If completing by hand, please use **BLOCK CAPITALS** and **BLACK INK**

Please submit this application form with the completed Technical Appendices as applicable to the product type(s). See Section 6.

### SECTION 1 – General information

#### 1.1 Type of product(s) requiring certification

Please state below the type of product(s) to be certified (e.g., smoke detector, sounder, etc). If there are multiple product types, please list them here.

Please select the type of application to be submitted:

New product application ☐      Modification(s) to a certified product ☐      Change due to component shortage ☐ (**Fast Track required**)

#### 1.2 Required Certification Marks

Please select which certification marks are required. **Please note: To use the multiple certification process at least two certification marks must be selected.**

See also Section 7 - Contractual information. *Upon selection, the contractual statements of the related certification bodies will be labelled as **APPLICABLE** in Section 7*

Please tick required certification marks



**Please select the certification body you want to manage the project.**

(Note: The chosen certification body (CB) will become the primary certification body for the project. In the case of modifications or updates to an existing product the primary certification body is likely to have issued the Constancy of Performance certificate. See below).

AFNOR  
Certification

BRE  
Global

DBI  
Certification

VdS

#### 1.3 Constancy of Performance certificate

Do you require a 'Constancy of Performance' certificate to support the following?

- |                 |                          |   |
|-----------------|--------------------------|---|
| a) CE marking   | <input type="checkbox"/> | <i>The Construction Product Regulation (CPR) requires fire detection equipment placed on the European market to have a Constancy of Performance certificate and be suitably marked.</i> |
| b) UKCA marking | <input type="checkbox"/> |   |
| c) UKNI marking | <input type="checkbox"/> |   |

Which certification body do you want to carry out the assessment and verification of constancy of performance in accordance with the CPR?

AFNOR  
Certification

BRE  
Global

CNPP  
Cert.

DBI  
Certification

VdS

#### 1.4a Details of the Applicant – This will be the company that is authorised to apply for multiple certification

Registered company name:

*Please provide evidence of company registration (e.g. Register of Commerce)*

VAT No.

Address:

Please state the name that should appear on the certificate:

Nominated contact within the Applicant company:

Title:                      Name:

Position:

Contact details    Email:

Telephone:



# Multiple Certification Application Form

## Fire Detection and Fire Alarm Products

### 1.4b Details of the Applicant – Continued

There are circumstances where there is a requirement to include a second organisation associated with the applicant that handles specific functions, such as reviewing/accepting quotations, processing invoices or answering technical/administrative questions.

An example where this circumstance might be applicable, is a parent company that owns a group of companies, one of which applies for multiple certification and some of the functions normally attributed to the applicant are performed by the parent company. If this situation or a similar applies please complete the details of the second organisation associated with the applicant. Note. the name of second organisation will not appear of the certificate.

Registered company name:

*Please provide evidence of company registration (e.g. Register of Commerce)*

VAT No.

Address:

Nominated contact within the Applicant company:

Title:	Name:	Position:
Contact details	Email:	Telephone:

*Please state the relationship with the Applicant company declared in section 1.4a*

### 1.5 Details of the European Agent(s)

*Please enter the details of the legal entities (European Agents) acting on behalf of the Manufacturer located outside of the European Economic Area (EEA) and/or the United Kingdom.*

Not Applicable ☐ *If No European Agents are required, please select Not Applicable*

Company name:

Address:	CE Marking	<input type="checkbox"/>
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Company name:

Address:	UKCA Marking	<input type="checkbox"/>
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I hereby authorize the companies named above to represent me throughout the EEA and the UK on all matters relating to the use of the CE/UKCA marking (*tick boxes as applicable*). I commit myself to immediately inform the primary CB whenever a new authorized agent, as referred to above, is appointed.

Nominated contact

Title:	Name:	Position:
Contact details	Email:	Telephone:

### 1.6 Details of existing or previous certification(s)

*Please select the certification bodies that currently audit or have previously audited the designated manufacturing site, and enter the certification reference (i.e., the certificate number).*

*If the designated manufacturing site(s) have no products currently certified select N/A*

AFNOR Certification	<input type="checkbox"/>	DBI	<input type="checkbox"/>
BRE Global (LPCB)	<input type="checkbox"/>	VdS	<input type="checkbox"/>
CNPP Cert.	<input type="checkbox"/>	N/A	<input type="checkbox"/>



# Multiple Certification Application Form

## Fire Detection and Fire Alarm Products

### SECTION 2 – Manufacturing sites

Please enter the details of each company (if more than one) involved with the manufacture of the product(s) for which certification is required

#### 2.1 Details of manufacturing company (Site1)

Company name:

Address:

Indicate the activities performed at site 1 *Select all that apply*

*If other please provide details*

- |                                     |                                      |  |                                     |
|-------------------------------------|--------------------------------------|--|-------------------------------------|
| <input type="checkbox"/> Design     | <input type="checkbox"/> Manufacture | <input type="checkbox"/> Assembly                    | <input type="checkbox"/> Final test |
| <input type="checkbox"/> Inspection | <input type="checkbox"/> Marking     | <input type="checkbox"/> Management of modifications | <input type="checkbox"/> Other      |

Nominated contact within the Manufacturing company 1

Title:

Name:

Position:

Contact details Email:

Telephone:

Legal representative within the Manufacturing company 1

*This section must be signed by the person who oversees the legal affairs of the manufacturing company. **IMPORTANT** - By signing this Application form the person named below accepts the contractual declarations of Section 7.*

Title:

Name:

Position:

Contact details Email:

Telephone:

Signature

Date:

Is the Applicant and the Manufacturing Site the same entity?      Yes      No

#### 2.2 Manufacturing company (Site 2)

Please complete this section if there is more than one manufacturing site involved in the production of the product(s) to be certified

Not Applicable: ☐

*If there is No additional Manufacturing site 2, please select Not Applicable*

Company name:

Address:

Indicate the activities performed at site 2 *Select all that apply*

*If other please provide details*

- |                                     |                                      |  |                                     |
|-------------------------------------|--------------------------------------|--|-------------------------------------|
| <input type="checkbox"/> Design     | <input type="checkbox"/> Manufacture | <input type="checkbox"/> Assembly                    | <input type="checkbox"/> Final test |
| <input type="checkbox"/> Inspection | <input type="checkbox"/> Marking     | <input type="checkbox"/> Management of modifications | <input type="checkbox"/> Other      |

Nominated contact within the Manufacturing company 2

Title:

Name:

Position:

Contact details Email:

Telephone:



# Multiple Certification Application Form

## Fire Detection and Fire Alarm Products

### Legal representative within the Manufacturing company 2

*This section must be signed by the person who oversees the legal affairs of the manufacturing company. **IMPORTANT** - By signing this Application form the person named below accepts the contractual declarations of Section 7.*

Title: Name: Position:

Contact details Email: Telephone:

Signature Date:

Is the Applicant and the Manufacturing Site the same entity? Yes No

### 2.3 Manufacturing company (Site 3)

*Please complete this section if there are more than two manufacturing sites involved in the production of the product(s) to be certified*

Not Applicable: *If there is No additional Manufacturing site 3, please select Not Applicable*

Company name:

Address:

Indicate the activities performed at site 3 *Select all that apply*

*If other please provide details*

- |                                     |                                      |  |                                     |
|-------------------------------------|--------------------------------------|--|-------------------------------------|
| <input type="checkbox"/> Design     | <input type="checkbox"/> Manufacture | <input type="checkbox"/> Assembly                    | <input type="checkbox"/> Final test |
| <input type="checkbox"/> Inspection | <input type="checkbox"/> Marking     | <input type="checkbox"/> Management of modifications | <input type="checkbox"/> Other      |

### Nominated contact within the Manufacturing company 3

Title: Name: Position:

Contact details Email: Telephone:

### Legal representative within the Manufacturing company 3

*This section must be signed by the person who oversees the legal affairs of the manufacturing company. **IMPORTANT** - By signing this Application form the person named below accepts the contractual declarations of Section 7.*

Title: Name: Position:

Contact details Email: Telephone:

Signature Date:

Is the Applicant and the Manufacturing Site the same entity? Yes No



### SECTION 3 – Financial

#### 3.1 Billing information

Please enter the details of the legal entity responsible for paying the test and certification fees

Same as Applicant (Section 1.4) ☐ If the legal entity responsible for paying the test and certification fees is the same as the Applicant, please check box and jump to Section 4

Registered company name:

Please provide evidence of company registration (e.g. Register of Commerce)

VAT No.

Address:

For France:

SIRET No.

APE Code:

Nominated contact *The nominated contact must be the person responsible for authorising payment of the test and certification fees*

Title:

Name:

Position:

Contact details Email:

Telephone:

### SECTION 4 - Quality Management Systems & Factory Production Control of manufacturing

#### 4.1 Contacts responsible for the Quality Management System

Please enter the contact details of the primary contact within the manufacturing site(s) responsible for the Quality Management System.

Contact person name:	Site 1	Telephone (Direct dial number preferred)	email
	Site 2		
	Site 3		

Please enter the details of existing ISO 9001 registrations

#### 4.2 ISO 9001 registered companies

Are all the manufacturing sites ISO 9001 registered? ☐ YES ☐ No but wish to apply for registration *Please give details below and complete Sections 4.3 and 4.4 as applicable*

☐ No and **do not** wish to apply for registration *Jump to Section 5*

Name the organisation(s) from which the ISO 9001 registration was obtained:

Site 1	Site 2	Site 3
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Please confirm the respective certificate numbers:

Expiry Date of the certificate(s):

**Please provide copies of the ISO 9001 certificates for our records**



# Multiple Certification Application Form

## Fire Detection and Fire Alarm Products

### 4.3 Companies that have no ISO 9001 registration but have completed an application for registration

Please answer the following questions if the manufacturing site(s) have no current ISO 9001 registration but an application for registration made has been submitted

To which accredited organisation has the application for registration been made?	For Site 1	Site 2	Site 3
What is the expected date the certificate(s) for registration is(are) to be granted?			

### 4.4 Companies that have no ISO 9001 registration but wish to apply for registration

If applying for ISO 9001 registration please check the following boxes as applicable, to confirm the information supplied

- ☐ Current quality manual submitted with this application form  
*Please provide an English language copy of the quality manual*
- ☐ Technical documentation - Installation manuals, drawings, part lists, schematics, etc
- ☐ Critical component list, including the supplier identification (number and name)
- ☐ Product data sheets/Product specifications
- ☐ Other relevant documentation submitted with this application form

## SECTION 5 – Additional information

### Country/territory specific requirements

Please indicate to which other authorities the product certificates will be submitted:

- ☐ Dubai Civil Defence (For further information see separate Dubai Civil Defence Submission Guidance)

If applicable, please list any other authorities


### Other information

If you wish to provide further information or specific instructions, please use the space below




### SECTION 6 – Technical information

Complete one or more of the Appendices as applicable to the type of product(s) for which certification is required.

Please submit the completed Appendices with your application.

*Please check all boxes that apply*

#### Included standards

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#### APPENDIX 1

SOUNDERS (EN 54-3:2001 + A1:2002 + A2:2006)  
SOUNDERS (EN 54-3:2014 +A1:2019)  
VAD (EN 54-23: 2010)  
SHORT-CIRCUIT ISOLATOR (EN 54-17:2005 + AC:2007)  
INPUT/OUTPUT DEVICE (EN 54-18:2005 + AC:2007)  
COMPONENTS USING RADIO LINKS (EN 54-25:2008 + AC:2010 + AC:2012)

☐

#### APPENDIX 2

SMOKE (EN 54-7:2018)  
HEAT (EN 54 5:2017+A1:2018)  
SHORT-CIRCUIT ISOLATOR (EN 54-17:2005 + AC:2007)  
INPUT/OUTPUT DEVICE (EN 54-18:2005 + AC:2007)  
COMPONENTS USING RADIO LINKS (EN 54-25:2008 + AC:2010 + AC:2012)  
COMBINATION OF SMOKE AND HEAT SENSORS (EN 54-29:2015)  
COMBINATION OF CO AND OPTIONALLY HEAT DETECTORS (EN 54-30:2015)  
COMBINATION OF SMOKE, CO AND OPTIONALLY HEAT SENSORS (EN 54-31:2014 +A1:2016)

☐

#### APPENDIX 3

LINE DETECTORS USING AN OPTICAL BEAM (EN 54-12:2015)  
SHORT-CIRCUIT ISOLATORS (EN 54-17:2005 + AC:2007)  
INPUT/OUTPUT DEVICES (EN 54-18: 2005 + AC:2007)  
COMPONENTS USING RADIO LINKS (EN 54-25:2008 + AC:2010 + AC:2012)

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#### APPENDIX 4

MANUAL CALL POINT (EN 54-11:2001 + A1:2005)  
SHORT-CIRCUIT ISOLATORS (EN 54-17: 2005 + AC:2007)  
INPUT/OUTPUT DEVICES (EN 54-18: 2005 + AC:2007)  
COMPONENTS USING RADIO LINKS (EN 54-25 :2008 + AC:2010 + AC:2012)

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#### APPENDIX 5

FLAME (EN 54-10:2002 + A1:2005)  
SHORT-CIRCUIT ISOLATORS (EN 54-17:2005 + AC:2007)  
INPUT/OUTPUT DEVICES (EN 54-18:2005 + AC:2007)  
COMPONENTS USING RADIO LINKS (EN 54-25:2008 + AC:2010 + AC:2012)

☐

#### APPENDIX 6

POWER SUPPLY EQUIPMENT (EN 54-4:1997 + A1:2002 + A2:2006)  
POWER SUPPLIES (EN 12101-10:2005 + AC:2007)

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#### APPENDIX 7

CONTROL & INDICATING EQUIPMENT (EN 54-2:1997 + A1:2006)  
POWER SUPPLY EQUIPMENT (EN 54-4:1997 + A1:2002 + A2:2006)  
POWER SUPPLIES (EN 12101-10:2005 + AC:2007)

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#### APPENDIX 8

SMOKE ALARM DEVICES (EN 14604:2005)

When complete, each Appendix provides the technical information necessary to generate the quotations.

Applicants should expect a quotation from each Certification body selected in Section 1. These quotations cover the activities that each certification body (and where applicable, the associated testing laboratories) must undertake to complete the multiple certification process.

To comply with Competition Law each certification body (and where applicable, the associated testing laboratory) must issue its own (separate) quotation to the Applicant.





### SECTION 7– Contractual information

In accordance with the certification guidelines of ISO-IEC 17067 a contract shall exist between the certification body and the Applicant. Each EFSG member certification body has its own contractual requirements. To permit the use of a common application form, the Applicant and legal representatives of the associated Manufacturing companies must agree with following declarations as applicable to the certification marks required. The contractual statements that apply based upon the selection of the required certification marks (Section 1.2), are labelled “**APPLICABLE**”.

#### 7.1 AFNOR Certification

##### HOLDER’S COMMITMENT TO THE NF MARK:

For this purpose, I declare that I know and accept the General Rules of the NF brand, the certification rules NF508 – fire safety system (NF-SSI) its appendices and I undertake to respect them throughout the lifetime of use of the NF brand. I also undertake not to use the NF mark before obtaining the right of use. In addition, I note that the NF mark is assigned to a central component OR hardware in a certified NF (SSI) system and in this case only. I certify that the product(s) meets the regulatory requirements applicable to them and undertake not to present for certification counterfeit products.

I undertake to communicate to my subcontractor(s) the general rules of the NF mark as well as the NF-SSI certification rules.

Commercial reference:

Commercial Brand:

In case the product is a component in according to the NF terms please indicate the SSI number:

In case of mutual request (sub-contractor, nominated representative or distributor) please tick one of the boxes and complete the address and the legal name, this document should be signed by the both (nominated representative + subcontractor or distributor):

- ☐ OPTION 1: The central equipment OR component is designed by the subcontractor OR supplier, making a joint application, in the following design unit:  
“legal name + full address”
- ☐ OPTION 2: The central equipment OR component is manufactured by the manufacturer OR subcontractor OR the supplier, making a joint application, in the following manufacturing unit(s): “full address name”.

#### 7.2 BRE Global (UK) Ltd and BRE Global Ireland Ltd

The contractual declarations required by BRE Global (UK) Ltd and BRE Global Ireland Ltd are incorporated into their corresponding quotation templates and the associate terms and conditions. Agreement with the BRE contractual arrangements is required upon acceptance of their quotation(s). The quotation(s) will be generated in response to the receipt of this application form.

#### 7.3 CNPP Cert

##### COMMITMENT

I would like to request a certificate of constancy of performance issued by CNPP Cert allowing the producer to affix the CE mark on the abovementioned product(s), in compliance with the enclosed technical file.

I make a commitment not to present for this, product(s) where other simultaneous requests for a certificate of constancy of performance have been made. Nor to maintain for the same product, another certificate of constancy of performance issued by another certification body (please attach a copy of a valid certificate of constancy of performance for any products already certified by another notified body).

I declare that I have been informed about, and understand and agree with; the reference document A201 Procedure, including its appendices and application circular letters and the applicable fees.

Within the frame of the obligations associated with this application request, I commit myself to abide by the rules prescribed by these documents now and in the future, for the duration of the use of the certification, and especially to:

- Inform CNPP Cert, immediately, about any important change to the product(s), organization, personnel and associated equipment, etc...;
- Facilitate the mission of every person mandated by CNPP Cert. in order to perform the requested inspection(s) as required by the reference document;
- Not to abuse the certification;
- Make all the requested payments according to the reference document, no matter which decision is taken, i.e., agreement or refusal of the certification. In this regard, I validate that this present agreement serves as a placement of the order for the audit service prescribed in the reference document, without sending an individual purchase order for every occurrence.

I am aware this letter and the reference document referred to above, addresses the obligations, rights and requirement of each party and constitutes together a certification contract.

I hereby authorize CNPP Cert. to go ahead with any and all exchanges necessary with the CNPP laboratories.





### 7.4 DBI Certification

#### DECLARATION

I, the applicant, have completed this application and established the facts presented in this application. I declare that the information provided in this application is true and correct and that the same application has not been lodged simultaneously with any other certification body.

I agree that the DBI Certification A/S and the DBI Certification UK Ltd Agreement and Service Terms shall govern the evaluation pursuant to this application, and to provide information required to perform the evaluation.

I declare that the samples placed at the disposal will be fully representative of the production envisaged, and agree to provide further specimens if needed for carrying out the eventual test programme.

Where historical data is submitted as part of the evaluation, I declare that the product tested to obtain the historical data is fully representative of the current production or I have identified any modifications to the design, production processes or materials.

I declare that should any significant changes in the product(s) or in my organisation or any other activity that could affect conformity with the standards that the product(s) is(are) evaluated against occurs, DBIC and DBIC-UK will be informed.

Were DBI has been chosen to provide the assessment and verification of constancy of performance in accordance with the CPR (See Section 1.2), I understand that DBI Certification A/S has the role of notified body in accordance with the product certified and all obligations regarding the CE-CPR and CE-MED certification are towards DBI Certification A/S. I understand that DBI Certification UK Ltd has the role of approved body in accordance with the product certified and all obligations regarding the UKCA-CPR certification are towards DBI Certification UK Ltd. DBI Certification A/S will be the main point of contact, and provide the quotation, testing arrangements, and Factory assessments.

I, the applicant, authorize DBIC and DBIC-UK to proceed with this as an active application evaluation against the Standards required by the CPR/MED/UKCA Program(s).

### 7.5 VdS Certification

#### DECLARATION

##### Data protection

As the responsible body, VdS Schadenverhütung GmbH collects and processes personal data in the course of the procedures described here only to the extent necessary for the performance of the contract (chapter II, art. 6, no. 1 lit. b), GDPR) or on the basis of a specific declaration of consent by the person concerned (chapter II, Art. 6, no. 1 lit. a), GDPR) which can be revoked informally at any time.

For further information on data protection, please refer to the General Terms and Conditions (VdS 3177) or the information on our website (<https://vds.de/de/unternehmen/datenschutz/>).

##### Declaration and consent

I (we) agree that,

- the *General Terms and Conditions of VdS certification body*, VdS 3177,
- the guidelines *Procedure for Testing, Approval and Certification of Products and Systems for Fire Protection and Security Technologies*, VdS 2344 as well as the guidelines *Procedure for the Performance of Product Surveillance*, VdS 2841,
- the associated price list or the offer,

form the basis of this order and accept them in the respective valid version as an integral part of the contract.

Furthermore, I (we) consent to,

- VdS Schadenverhütung GmbH collecting, processing and using personal data or other data within the context of delivering the contract,
- VdS Schadenverhütung GmbH making the certification accessible to third parties (i.e., EFSG member companies) by publishing it in freely accessible directories,
- Documents (e.g., order confirmations, test reports, draft certificates) being transmitted by e-mail. This shall be done exclusively to the e-mail address of the contact person stated under "applicant". Transmission to another e-mail address requires the written consent of this contact person.



# Multiple Certification Application Form

## Fire Detection and Fire Alarm Products

By signing this application form the Applicant and the legal representatives of the manufacturing companies/sites (Section 2) confirm their acceptance of the following;

*Select as appropriate*

- ☐ The applicable declarations of Section 7 based on the selection of the required certification marks of Section 1.2 of this application form
- ☐ Consent to permit EFSG and all its certification body members named in Section 1.2 (and their associated testing laboratories) to exchange information related to this project that includes but is not limited to; product samples, documentation and test results.

By agreeing to give consent the Applicant absolves the above from of their confidentiality obligations associated with this project.

### Nominated Representative

*This section must be signed by the person who oversees the legal affairs of the **Applicant company** or a nominated representative*

Title:

Name:

Position:

Signature

Date:

*Please complete if Section 1.5 is applicable*

### European Agent

*This section must be signed by the person who oversees the legal affairs of the **European Agent** or a nominated representative*

Title:

Name:

Position:

Signature

Date:

### Next steps

Upon completion of the application form please return it to the primary certification body of your choice, i.e., the certification body you want to manage the project (*Refer to the selection in Section 1.2*). You will be contacted to acknowledge receipt.

The primary certification body will coordinate with the other certification bodies involved to create a common test programme (referred to as a 'test schedule') upon which, corresponding quotations are based.

You will receive quotations from each certification body (and where applicable associated testing laboratory) involved.

Each quotation covers a specific aspect of the testing/multiple certification that is to be performed by each certification body (and where applicable associated testing laboratory).

The testing and certification programme can begin when the Applicant confirms acceptance of each quotation.