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| **Please note that in addition to this form, also attach product catalog, Trade Registry Gazette, Chamber Registration Certificate, Tax Board, Trademark registration document if any, to your product technical file. Be responsible for problems caused by incorrect information on forms. Information in the form that belong to the proxy signatures on behalf of the company or the competent authority, the company has adopted filling out the form.** |

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| **Name of the company** | **:** |  |
|  |
| **Address of the company**  | **:** |  |
| **MERSİS number of the company** | **:** |  |
| **Name and address of authorized representative if avaliable** | **:** |  |
| **Trade Mark, if many** | **:** |  |
| **Please attach a copy of your brand registration certificate** |

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| **Tax Office** | **:** |  |
| **Tax no** | **:** |  |
| **Phone number** | **:** |  |
| **Fax number** | **:** |  |
| **e-mail** | **:** |  |
| **Web Address** | **:** |  |
| **Name and title of the manager** | **:** |  |
| **Mobile phone no. of manager** | **:** |  |
| **Name and address of contact person** | **:** |  |
| **Number of personnel** | **:** |  |

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| **Has the organization have an active ISO 9001 quality management system?** | **:** | **[ ]**  | **Yes**  | **[ ]**  | **No**  |
| **Name of the Certification Body that audits the system, if any** | **:** |  |
| **REGULATIONS are applicable for the product** | **:** |  |
| **Applicable national or international product standards** | **:** |  |
| **Conformity Assessment Module referenced?** | **:** |

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| **[ ]  Module A2** | **[ ]  Module E1** |
| **[ ]  Module B-design** | **[ ]  Module F** |
| **[ ]  Module B-type** | **[ ]  Module G** |
| **[ ]  Module C2** | **[ ]  Module H** |
| **[ ]  Module D** | **[ ]  Module H1** |
| **[ ]  Module D1** | **[ ]  Approval of Permanent joining Procedure** |
| **[ ]  Module E** |  |

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| **For only Module C2, D, E, F Applications: Module B Certificate Number, Notified Body Name and NB Number (Module B Certificate and related annexes shall be submitted to CAC with the application form)** | **:** |  |
| **The name of the company if a Professional consultance has been receieved** | **:** |  |
| **Name of the product** | **:** |  |
| **Used harmonised or other standards** | **:** |  |  |  |  |
| **Joining information for Approval of Permanent Joining Procedure** | **:** |

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| **Type of joining** | **[ ]  Welding****[ ]  Brazing****[ ]  Other:** | **Type of Joint:** | **[ ]  Butt****[ ]  Fillet****[ ]  Pipe****[ ] Other** |
| **Welding method:** | **[ ]  111 manual metal arc** **[ ]  114 self-shielded tubular-cored arc** **[ ]  121 submerged arc welding with one wire electrode****[ ]  125 submerged arc welding with tubular cored electrode****[ ]  131 metal inert gas welding (MIG welding)****[ ]  135 metal active gas welding (MAG welding)****[ ]  141 tungsten inert gas arc welding (TIG)****[ ]  Other:** | **Thickness / Diameter** |  |
| **Parent Material Group:** |  | **Number of Passes:** |  |
| **Sh. Gas:** |  | **Filler Mat:** |  |

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| **Technical specifications of the Pressure Equipment** | **Type**  | **:** |  |

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| **[ ]  Pressure Vessel** | **[ ]  Pipe System** | **[ ]  Hot Water Boiler** |
| **[ ]  Pressure Accessories** | **[ ]  Safety Equipment** | **[ ]  Steam Boiler** |
| **[ ]  Pressure Cooker** | **[ ]  Fire-extingusher** | **[ ]  Portable extinguishers** |
| **[ ]  bottles for breathing equipment** | **[ ]  other:** |

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| **Name/type of the product** | **:** |  |
| **Max allowable pressure (bar)** | **:** |  |
| **Max allowable temp. (**ºC**)** | **:** |  |
| **Volume (l) / Diameter (DN)** | **:** |  |
| **Used Fluid and Group** | **:** |  **Gas: Liquid: [ ]  Group 1 [ ]  Group 2** |
| **Intended use**  | **:** |  |  |
| **Calculated Category :** |  | **[ ]  Cat II [ ]  Cat III [ ]  Cat IV**  |

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| **Please define your oursourced processes** |
| **[ ]**  | **No**  | **[ ]**  |  **Yes** | **Explanation** | **:** |  |

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| **Is the company certified by an another Notifed Body for the products in the application?** |
| **[ ]**  | **No**  | **[ ]**  | **Yes** | **Notified body name / number** | **:** |  |
| **Valid Date of the Existing Certificate** | **:** |  |

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| **DECLARATION**1. **I read (FRM.04-1) CAC Application Requirements Information Form and I declare to commit these requirements. I also declare that the information above are valid and correct, I admit to undertake the responsibility of the negative situations occur because of misinformation.**
2. **Hereby I declare that with the date of the completion of this form, I do not have an application to a NOTIFIED BODY or CONFORMITY ASSESSMENT BODY for the product(s) stated in this application form.**
3. **I commit that I’ll perform and maintain completely and efficiently the requirements of Notified Quality System of the products that I undertake their production.**
4. **I commit to supply and share the results of previous audits, information about surveillance audits, certification date, NB that I received the certificate if I have a certificate from another Notified Body for the products covered by this application.**
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| **The company official who filled out the form** |
| **Name and surname** | **:** |  |
| **Date** | **:** |  |
| **Stamp and signature** | **:** |  |
| **Note:For more than one product , please write Product names, inteded use and Location, Product Related Technical Information on your company’s letterhead and attach to this form type.** |