Application for type approval pursuant to the German Radiation Protection Ordinance (StrlSchV)

Administrative details

The personal data provided (such as name, adress, email adress) are processed by the Federal Office for Radiation Protection as part of the processing of your application. Further information, in particular regarding to your rights associated with the use of this data, is included in the Privacy Statement at www.bfs.de.

To be submitted in <u>single copy</u> to: Bundesamt für Strahlenschutz, Bauartzulassungen, Postfach 10 01 49, 38201 Salzgitter, Germany (contact: bauartzulassung@bfs.de)

1. Applicant

1.1 Company, address, contact person (including email and phone number)

		ManufacturerDistributor
1.2 References		
Actual excerpt from the commercial register (register of companies) has been submitted to BfS in a former procedure file number / reference number: Copy enclosed registered company number / local court /	or license for handling radioactive substances has been submitted to BfS in a former procedure file number / reference number: Copy enclosed	
date of the copy:	license number / author	ity / date of the copy:

Applicant's representative (e.g. managing director / holder of a commercial power of attorney):

Certificate of good conduct to be presented to public authorities pursuant to Article 30 para. 5 of the Federal Central Register Act:

_ date of birth ____

has been submitted to BfS in a former procedure (must not be older than 2 years) file number / reference number:

u will be applied for at the competent authority after the procedure has been initiated

2. Manufacturer of the apparatus

Last name, first name

2.1 Company, address (if different from applicant)

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2.2 Person in charge of technical management of production

Last name, first name	_date of birth
References of knowledge and technical expertise (are	a of responsibility / qualification):
Copies enclosed	

3. Quality control pursuant to Article 27 para. 1 no. 2 StrlSchV

3.1 Appointment of qualified experts for supervising quality control

1. Last name, first name	_ date of birth	
2. Last name, first name	_ date of birth	
(Please delete where inapplicable)		
Above designated person / persons will perform the task as a		
qualified expert on the equipment manufacturer's prem	nises	
qualified expert on the distributor's premises		
independent qualified expert on behalf of the applicant	(holder of type approval)	
References of knowledge: technical expertise educational background, professional experience and areas of responsibility, attendance of radiation protection training		
Copies enclosed		
Declaration of the applicant:		
The recommended expert/s to be appointed by BfS who will be has/have sufficient technical knowledge and professional expensional assigned to him/her. We hereby confirm that he/she will be include superiors when acting as a qualified expert.	ertise to embrace the responsibility	
3.2 Quality control concept		

□ Manufacturer of the appliance holds ISO 9001 certificate, valid until
Copy enclosed.
Submission of a quality control concept describing the control measures used to ensure compliance with the radiation protection-relevant features of the appliance.
□ Concept and documents (e.g. corresponding extract from the quality management manual) are enclosed
Further information:

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4. Take-back scheme after the end of use

Details on the take-back concept:

Concept enclosed

Date

Signature and company stamp