

to be established on the applicant's letterhead

CERTIGAZ
Madam Director General
1, rue du Général Leclerc – Le Linéa Building
F - 92800 Puteaux

Subject: **NF APE mark**
Application for admission of the right to use the NF mark for a new product

Madam Director General,

I have the honor to request the right to use the NF mark for the following product/range of products:

<product designation / reference normative document>

manufactured in the following manufacturing entity:

<company name + address>

and for the trademark and for the following reference:

<trademark and trade reference> .

To this end, I declare that I know and accept the General Rules of the NF mark as well as the NF APE Certification Rules and undertake to respect, throughout the duration of use of the NF mark, all these Rules, available on the CERTIGAZ website and provided upon request by CERTIGAZ.

<OPTION (1):

I also authorize the Company (company name), (company status), (registered office) represented by Mr/Mrs/Miss (name of legal representative) as (position) to represent me on French territory for all questions relating to the use of the NF APE mark in accordance with the mandate attached to this application.

I undertake to immediately notify CERTIGAZ of any change in the representative designated above.

<OPTION:

I request that the services I am responsible for be billed directly to them.

They will ensure payment on my behalf and in my name, upon receipt of the invoices as they undertake to do by accepting the representation.

I undertake to pay, upon receipt of invoices, the costs that are our responsibility.

Prices are available on the CERTIGAZ website and can be requested from CERTIGAZ.

Please accept, Madam Director General, my distinguished greetings.

Date and signature
of the legal representative
of the applicant (mandatory)

<OPTION (1): Date and signature
of the representative in the EEA/EFTA>

(1) Only applies to applicants located outside the European Economic Area (EEA) or the European Free Trade Association (EFTA) and optional for others

to be established on the applicant's letterhead

CERTIGAZ
Madam Director General
1, rue du Général Leclerc – Le Linéa Building
F - 92800 Puteaux

Subject: **NF APE**
Request for extension of the right to use the NF mark for a modified product

Madam Director General,

As the holder of the NF mark for the product of my manufacture identified under the following references:

- . product designation/product range:
- . reference normative document:
- . manufacturing entity: (<company name> <address>)
- . trademark and commercial references:
- . certificate number:
- . right to use granted on: (<date of certificate>)

I have the honor to request the extension of the right to use the NF mark for the product(s) of my manufacture for the following modifications:

<statement of changes>.

This product/product range replaces the certified product: ☐NO ☐YES

I declare that the products/range of products which are the subject of this application are, for the other characteristics, strictly compliant with the products/range of products already NF certified and manufactured under the same conditions.

To this end, I declare that I know and accept the General Rules of the NF mark as well as the NF APE Certification Rules and undertake to respect, throughout the duration of use of the NF mark, all these Rules, available on the CERTIGAZ website and provided upon request by CERTIGAZ.

I undertake to pay, upon receipt of invoices, the costs that are our responsibility.

Prices are available on the CERTIGAZ website and can be requested from CERTIGAZ.

Please accept, Madam Director General, my distinguished greetings.

Date and signature
of the legal representative
of the holder

to be established on the applicant's letterhead

CERTIGAZ
Madam Director General
1, rue du Général Leclerc – Le Linéa Building
F - 92800 Puteaux

Subject: **NF APE**
Request for maintenance of the right to use the NF mark

Madam Director General,

I have the honour of requesting the maintenance of the right to use the NF mark for the product(s) which differ(s) from the NF certified product only by its (their) references and/or the trademark affixed to it and by adjustments which do not modify their characteristics in any way.

This request concerns:

- the designation of the product/product range :
- **the name of the initial holder** (company name) (address)
- the right to use granted on: (date)
- the file number: (number)

The trade names requested by the distributor are:

- the commercial reference:
- the trademark:

I declare that the product(s) which are the subject of this application are, for the other characteristics, strictly compliant with the product(s) already certified NF **<certificate no. APE>** and manufactured under the same conditions.

To this end, I declare that I know and accept the General Rules of the NF mark as well as the NF APE Certification Rules and undertake to respect, throughout the duration of use of the NF mark, all these Rules, available on the CERTIGAZ website and provided upon request by CERTIGAZ.

I undertake to pay, upon receipt of invoices, the costs that are our responsibility.
Prices are available on the CERTIGAZ website and can be requested from CERTIGAZ.

Please accept, Madam Director General, my distinguished greetings.

Date and signature
of the legal representative
of the applicant

(and signature of the holder of the NF APE
mark for agreement in the case of a request for
maintenance where the applicant is different
from the holder)

to be established on the applicant's letterhead

CERTIGAZ
Madam Director General
1, rue du Général Leclerc – Le Linéa Building
F - 92800 Puteaux

Subject: **NF APE mark**
Application for approval of a new trigger

Madam Director General,

I have the honor to request approval for the following trigger(s):

<designation>

To this end, I declare that I know and accept the General Rules of the NF mark as well as the NF APE Certification Rules and undertake to respect, throughout the duration of the approval, all these Rules, available on the CERTIGAZ website and provided upon request by CERTIGAZ.

<OPTION (1):

I also authorize the Company (company name), (company status), (registered office) represented by Mr/Mrs/Miss (name of legal representative) as (position) to represent me on French territory for all questions relating to the use of the NF APE mark in accordance with the mandate attached to this application.

I undertake to immediately notify CERTIGAZ of any change in the representative designated above.

<OPTION:

I request that the services I am responsible for be billed directly to them.

They will ensure payment on my behalf and in my name, upon receipt of the invoices as they undertake to do by accepting the representation.

I undertake to pay, upon receipt of invoices, the costs that are our responsibility.

Prices are available on the CERTIGAZ website and can be requested from CERTIGAZ.

Please accept, Madam Director General, my distinguished greetings.

Date and signature
of the legal representative
of the applicant (mandatory)

<OPTION (1): Date and signature
of the representative in the EEA /EFTA>

(1) Only applies to applicants located outside the European Economic Area (EEA) or the European Free Trade Association (EFTA) and optional for others

to be established on the applicant's letterhead

CERTIGAZ
Madam Director General
1, rue du Général Leclerc – Le Linéa Building
F - 92800 Puteaux

Object : **NF APE**
Request for extension or modification of a trigger approval

Madam Director General,

As a holder of an approval for the following trigger(s):

- . manufacturing entity: (<company name> <address>)
- . trademark and commercial references:
- . approval number :
- . date of approval:

I have the honor to request the extension of this approval for the following modifications:
<statement of changes>.

This trigger(s) replace the previous approved trigger(s): ☐NO ☐YES

I declare that the trigger(s) subject to this application are, for the other characteristics, strictly compliant with the products already approved and manufactured under the same conditions.

To this end, I declare that I know and accept the General Rules of the NF mark as well as the NF APE Certification Rules and undertake to respect, throughout the duration of the approval, all these Rules, available on the CERTIGAZ website and provided upon request by CERTIGAZ.

I undertake to pay, upon receipt of invoices, the costs that are our responsibility.

Prices are available on the CERTIGAZ website and can be requested from CERTIGAZ.

Please accept, Madam Director General, my distinguished greetings.

Date and signature
of the legal representative
of the holder

to be established on the applicant's letterhead

CERTIGAZ
Madam Director General
1, rue du Général Leclerc – Le Linéa Building
F - 92800 Puteaux

Subject: **NF APE**
Application for maintenance of approval

Madam Director General,

I have the honor to request the maintenance of the approval of a trigger which differs from the approved product only by its (their) references and/or the trademark and/or by adjustments which do not modify their characteristics in any way.

This request concerns:

- the product designation :
- **the name of the initial holder** : (company name) (address)
- approval granted on: (date)
- under the number : (number)

The trade names requested by the distributor are:

- the commercial reference:
- the trademark:

I declare that the product(s) which is the subject of this application is, for the other characteristics, strictly compliant with the product(s) already approved and manufactured under the same conditions.

To this end, I declare that I know and accept the General Rules of the NF mark as well as the NF APE Certification Rules and undertake to respect, throughout the duration of the approval, all these Rules, available on the CERTIGAZ website and provided upon request by CERTIGAZ.

I undertake to pay, upon receipt of invoices, the costs that are our responsibility.

Prices are available on the CERTIGAZ website and can be requested from CERTIGAZ.

Please accept, Madam Director General, my distinguished greetings.

Date and signature
of the legal representative
of the applicant

(and signature of the holder of the NF APE
mark for agreement in the case of a request for
maintenance where the applicant is different
from the holder)

GENERAL INFORMATION SHEET CONCERNING THE APPLICANT / HOLDER

APPLICANT / HOLDER :

- Company name:
- Address :
-
- Country: Website:
- SIRET No. (1): APE and/or VAT code
- Name and capacity of the legal representative (2):
- Name and position of the correspondent (if different):
- Such : Fax: Mail:
- QHSE system certification: Organization:

MANUFACTURING UNIT for finished products (if different from applicant/holder) :

- Company name:
- Address :
-
- Country: Website:
- Name and capacity of the legal representative (2):
- Name and position of the correspondent (if different):
- Such : Fax: Email:
- QHSE system certification: Organization:

MANUFACTURING UNIT for injected products (if different from the manufacturing unit of the finished products

– paragraph to be duplicated if several injection sites are used) :

- Company name:
- Address :
-
- Country: Website:
- Name and capacity of the legal representative (2):
- Name and position of the correspondent (if different):
- Such : Fax: Email:
- QHSE system certification: Organization:

NOTE: Duplicate the lines above for any other manufacturing step carried out at a different site

MANUFACTURING UNIT for triggers and/or their MOUNTING in connection sockets

(if different from the product manufacturing unit - paragraph to be duplicated if assembly is carried out on a storage site, for example) :

- Company name:
- Address :
-
- Country: Website:
- Name and capacity of the legal representative (2):
- Name and position of the correspondent (if different):
- Such : Fax: Email:
- QHSE system certification: Organization:

EEA REPRESENTATIVE (if requested) or other REPRESENTATIVE :

- Company name:
- Address :
-
- Country: Website:
- SIRET No. (1): APE and/or VAT code:
- Name and capacity of the legal representative (2):
- Name and position of the correspondent (if different):
- Such : Fax: Email:
- QHSE system certification: Organization:

(1) Only for French companies . (2) The legal representative is the legal person responsible for the company .

to be established on the applicant's letterhead

CERTIGAZ
Madam Director General
1, rue du Général Leclerc – Le Linéa Building
F - 92800 Puteaux

Object : **REPRESENTATIVE**

Madam Director General,

I authorize the Company identified below as my agent to represent me on French territory for all questions relating to the use of the NF APE mark. I undertake to immediately notify CERTIGAZ of any new designation of the representative designated below.

- Company name:
- Address :
-
- Country: Website:
- SIRET No. (1): APE and/or VAT code:
- Name and capacity of the legal representative (2):
- Name and position of the correspondent (if different):
- Such : Fax: Email:
- QHSE system certification: Organization:

I request in this regard that the costs I am responsible for be invoiced directly to them. They will ensure payment on my behalf and in my name, upon receipt of the invoices, as they undertake to do when accepting the representation.

Please accept, Madam Director General, the expression of my highest consideration.

<p>Date, name and signature of the legal representative (2) of the applicant/holder preceded by the handwritten note " <i>Good for representation</i> "</p>	<p>Date, name and signature of the representative in Europe preceded by the handwritten note " <i>Good for acceptance of representation</i> "</p>
--	--

(1) Only for French companies.

(2) The legal representative is the person legally responsible for the company.

TECHNICAL FILE MODEL by product reference

The technical file must be composed of at least the following elements. It may be supplemented by quality plans, control plans, and a quality manual. Its codification must allow traceability to establish a link with the version that is the subject of type testing.

The technical file elements are organized in the order defined below.

This file can be communicated to CERTIGAZ in electronic format (in PDF format) on the condition that all these elements are contained in a single PDF file per product reference.

- 1 The information that appears on one of the 005 forms below according to the family. Part of the information on form 004 (**Excel file downloadable from the [CERTIGAZ website](#)**) appears in the 005 forms. During an extension or maintenance, form 004 may be optional depending on the nature of the modification.
- 2 The overall plan or diagram (accessories, triggers, etc.)
- 3 The nomenclature or information of products made up of several components
- 4 Detailed plans or information of all components (defining precisely the materials used)
- 5 The plan or marking information
- 6 The definition of the codification of the batch number indicated on the certified product
- 7 Instructions (installation, usage, as appropriate) ➔ In compliance with regulations, as there are often no instructions
- 8 The type of packaging ➔ In view of the regulations because often there is no information on the packaging and its marking
- 9 ACS (certificate of health conformity) for drinking water application (application group 2-W)
- 10 Material conformity certificates according to the respective specifications:
 - 10.1 For PE resin, NF114 certificate (available on the LNE website) and 3.1 of the NF EN 10204 standard (under audit)
 - 10.2 For metal parts or components or other resins of the components, standard certificate document 3.1 of standard NF EN 10204 (under audit)
 - 10.3 For seals, material certificate according to:
 - ISO 16010, NF EN 549 or NF EN 682 with hardness and temperature classes for gas application
 - ISO 4633 or NF EN 681-1 for water applications

If a certificate is not available but only conformity tests according to a required standard are available, CERTIGAZ will request a test report according to the required standard every 2 years during audits. These tests may be carried out at the French ELANOVA laboratory following the collection of samples conforming to the required standards by CERTIGAZ.
 - 10.4 For lubricants contributing to sealing, certificate according to EN 377

If the lubricant does not have certification according to EN377 but has been used historically for many years by the manufacturer/holder, without generating any complaints, CERTIGAZ may accept it as an exception.
 - 10.5 For adhesives contributing to waterproofing, certificate according to EN 751-1 or EN 751-2 with NF540 certification
- 11 Description of tools
 - 11.1 Key for PDB punches, B1 family
 - 11.2 Compatible tools for implementing RPCs, E2 family
 - 11.3 Compatible tools for the implementation of shut-off and/or bypass connections, family B2