**FK 7.1-1**  To

„Kontrol 94” Ltd.

Gorna Oryahovitsa

**TEST REQUEST**

№.................../...................20.......

/ Completed by „Kontrol 94” Ltd. /

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | **1. Data for applicant:** | | | | | | **2. Data for manufacturer:** | | | |
| Name: | | | | | |  | | | | | |  | | | |
| Address: | | | | | | ....................................................................................................................................  ..................................................................  .................................................................. | | | | | | ................................................................................................................  ........................................................  ........................................................ | | | |
| Phone / fax, Е-mail: | | | | | |  | | | | | |  | | | |
| Identification №;  Tax ID (VAT) № | | | | | | .................................................................................................................................... | | | | | | ................................................................................................................ | | | |
| Quality system: | | | | | |  | | | | | |  | | | |
| Contact Person, Phone: | | | | | |  | | | | | | | | | |
| **3. Object (s) to be tested:** | | | | | | .........................................................................................................................................  .........................................................................................................................................  .........................................................................................................................................  / name, type, brand / | | | | | | | | | |
| **4. Normative documents for testing:** | | | | | | ……………………............…….......................................………...………..............…....  / name of standards, BDS EN, EN, ISO, TS / | | | | | | | | | |
| **5. Additional specific requirements of the applicant:** | | | | | | ................................................................................................................................  ...............................................................................................................................  / title of Regulation (s); requirements for regional norms; others / | | | | | | | | | |
| Return the product after testing: | | | | |  | | Yes |  | No |
| / Check your choice /  Storage of control samples: not stored by the laboratory | | | | | | | | | |
| **6. Would you like a dust sample to be taken during the product test?** | | | | | | | | | | | | | | | |
| Check your choice - | | | |  | Yes; | | | |  | No; **Note:** ............................................................................................. | | | | | |
|  | | | | | | | | | | | | | | | |
| **7. Appliance/s to be tested by the following fuel:** | | | | | | .........................................................................................................................................  / beech wood logs, coal (briquettes) or both, pellets and etc. / | | | | | | | | | |
| 7.1. The test fuel is provided by: | | | | | | |  |  |  |  | | --- | --- | --- | --- | |  | „Kontrol 94” Ltd. |  | Applicant | |  |  |  | Certificate of analysis: .............................. |   / Check your choice / | | | | | | | | | |
| **8. Conformity reporting according to the requirements of the BDS EN ISO/IEC 17025:2018 standard and the product standard:** Do you want the declaration of conformity to be reported in the Test Report issued by the Laboratory? | | | | | | | | | | | | | | | |
| Check your choice - | |  | Yes | | | |  | No | | | | | | | |
| Please report the declaration of conformity according to:   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Check the applicable document** | | | **Standard or other regulatory document** | **Characteristics** | **Requirement** | |  | | | BDS EN 303-5:2021 at nominal and reduced heat output | Carbon monoxide emissions (СО) at 10%О2 | < 1,0 % | |  |  |  |  |  | |  | | |  |  | | Efficiency η | ≥ 50 % | |  | | | Other regulatory document:  ..................................  .................................. |  |  | |  |  | |  |  |  |  |  | |  | | |  |  | |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | | Decision rule defined by: |  | „Kontrol 94” Ltd. |  | Applicant |   / Check your choice /  **Attention:**  When declaring compliance / non-compliance, the laboratory uses a "simple" decision rule according to which there is compliance when the measured value together with the declared uncertainty is within the tolerance range.  The reported expanded measurement uncertainty had obtained as a work of the standard uncertainty and the coverage multiplier k = 2, which at normal distribution corresponds to a coverage probability of approximately 95%.  The default probability of conformity is usually (1 - α) = 0,95 (95%) - error type I α = 0,05 (5%), ie the probability that the measured value is within the specified standard must be higher than 95%.  With a decision-making rule based on simple acceptance and the existence of a normal distribution for the measured value, the probability of accepting a non-compliant element or rejecting a corresponding element may be up to 50%. The risk is then considered a "shared risk" between the laboratory and the client. | | | | | | | | | | | | | | | |
| **9. The conformity assessment for the CE marking shall be indicated in accordance with the requirements of the product standard.** | | | | | | | | | | | | | | | |
| **10.** **The test report should be issued in:** | | | | | | | | |  |  |  |  | | --- | --- | --- | --- | |  | Bulgarian |  | English |   / Check your choice / | | | | | | | |
| **11. The laboratory shall:** be responsible for all information obtained or created during the test and to inform the applicant in advance if it intends to do properly in public, except in the case where this information is required by authorized and control bodies.  The laboratory is responsible for the impartiality of its laboratory activities and does not allow commercial, financial or other pressures to call into question its impartiality. | | | | | | | | | | | | | | | |
| **12. Additional information:**  The client (applicant) has the right to file a complaint concerning the laboratory activities for which the laboratory is responsible. Upon request, the procedure PK 7.9 "Complaints" is provided to all interested parties. It is available on the laboratory's website as well as the complaint form (FK 7.9-2).  The laboratory has a flexible scope of accreditation within the limits described in the Accreditation Certificate and the order to it, as well as in SpK 7.2-3-1, publicly available on the laboratory's website.  The application falls within the flexible scope. | | | | | | | | | | | | | | | |
| **13. Attachments:** | - The design documentation.  - Instructions for installation and operating.  - Certificates and declarations of conformity for used materials.  - Completed and signed forms for preparation of a test request.  - Declaration of conformity for LVD – 2014/35/EU; EMC – 2014/30/EU and machinery – 2006/42/ЕС (where is applicable). | | | | | | | | | | | | | | |
| I agree to use my personal data in the Laboratory in order to perform laboratory activities of the requested product (s) and issue a test report of the same (s).  By signing, I certify that I am familiar with and accept the general terms and conditions of the laboratory and undertake to comply with them.   |  |  | | --- | --- | | Date: ……………... | Applicant:....................................  / …………………….. /  / signature, names and stamp / | | | | | | | | | | | | | | | | |

**Data to be filled in by „Kontrol 94” Ltd.:**

**I. Declaration of Impartiality:** The undersigned’s declare that we have no relationships based on ownership, leadership, management, personnel, shared resources, finances, contracts, marketing (incl. Brands) and payment of commissions from sales or more to attract customers in relation to the object (s) requested for testing. We know that for incorrect information, liability under Art. 313 of the Penal Code:

|  |  |  |
| --- | --- | --- |
| **1.** ..................... / ................................ /  / signature /, / analyzer family name / | **2.** ..................... / ................................ /  / signature /, / analyzer family name / | **3.** ..................... / ................................ /  / signature /, / analyzer family name / |

**II. Risk analysis of impartiality:**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **No** | **Personnel assigned to perform**  **the specified test** | **Threats to impartiality,**  **according to PK 4.1 and FK 4.1-2**  (answer the questionnaire after the table with Yes or No)\* | | | | | | | | | **Availability /**  **Absence**  **of conflict of interest**  (Yes / No) |
| **1.1** | **1.2** | **2.1** | **2.2** | **3.1** | **3.2** | **4.1** | **4.2** | **4.3** |
| 1 |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |  |

**Questionnaire:** In connection with ensuring impartiality and independence of persons designated to carry out the tests of objects in the execution of orders and contracts from customers, the head of the lab asks the following questions to analyze the risk of impartiality and independence of the laboratory.

**Threats to impartiality from:**

**1. Leadership / Management**

1.1 Are you in any way connected with the company assigning activities for the implementation of this request?

(Yes / No)

1.2 Are you a member of the management board of the company assigning activities for the implementation of this request? (Yes / No)

**2. Shared resources - personnel, equipment**

2.1 Do you work in an employment or other relationship within the company contracting activities in implementing this request? (Yes / No)

2.2 Are you aware of the joint use and /or rental of equipment and premises with the contracting authority in this request? (Yes / No)

**3. Contracts - payment of commissions or other incentives to attract customers**

3.1 Do you receive commissions or other incentives from the contracting company for this application in purpose to compromise test results? (Yes / No)

3.2 Have you offered preferences in order to attract the contracting company of this application for our client? (Yes / No)

**4. Personnel**

* 1. Have you been involved in the design, manufacture, supply, installation, repair and maintenance of the appliances covered

by this application? (Yes / No)

* 1. Do you maintain personal relationships (family, friendly or conflicts that have arisen in the past) with personnel members

of the company assigning this application? (Yes / No)

* 1. Have you participated in any refresher courses organized by the contracting company or have you provided services related to the training of employees of the contracting company in this application? (Yes / No)

**\* - The risk of impartiality is assessed as follows:**

Answer **"No"** - there is no risk of impartiality, answer **"Yes"** - there is a threat to impartiality.

In the presence of a risk of impartiality, i.e. answer **"Yes"** to one of the questions, the Head of the laboratory removes the appointed employee from performing the respective test and evaluates a new one, writing this in a note at the end of the application.

|  |  |
| --- | --- |
| Date: ……………... | **Head of laboratory:** .........................................  / eng. Miroslav Raev / |

Records of changes in the service of the application after admission to the Laboratory:

..............................................................................................................................................................…………………………….

Notes: ……...............................................……………………………………………………………………………..............…...

..............................................................................................................................................................…………………………….

............................................................................................................................................................………………………..…….

(records of discussions with the client, significant changes, etc.)

|  |  |
| --- | --- |
| Date: ……………... | **Head of laboratory:** .........................................  / ................................... / |