





## **GasMark Product Certification Application Form**

By the act of completing and submitting this Application Form to IAPMO Oceania, the Certificate Holder is undertaking to adhere to and comply with the GasMark "Governance Rules". Please read these Rules and the Terms and Conditions in this Application Form before you sign this form.

1. Certificate Holder I	Details					
Details of registered company / legal entity applying for	Company Name					
certification.	ABN (Australian Company Only)	Relationship to manufacturer, where different Please Select One				
	Street					
	Suburb City					
	State	Country	Postcode			
Contact Details	Name	Company Position / Title of the applicant	Position / Title of the applicant			
	Phone No.	E-mail address	mail address			
MAILING ADDRESS	Street					
For correspondence relating to this GasMark application.	Suburb	City				
AS ABOVE	State	Country	Postcode			
INVOICING DETAILS	Name	Company Position / Title of the applicant				
For correspondence relating to invoicing.	Street					
AS ABOVE	Suburb	City				
	State	Country	Postcode			
	Phone No.	E-mail address				
2. Nominated Applica	ation Contact Note: Where	not the Certificate Holder or Manufacturer				
Individual representing the certificate holder and being the prime contact	Company Name	Contact Name				
for matters pertaining to this application.  AS ABOVE	Phone No.	E-mail address				
3. Manufacturer Deta						
Details of the manufacturer (company / legal entity) requiring GasMark certification (if different	Company Name  ARN (Australian Company Only)					
from above)	ABN (Australian Company Only)					
Complete ONLY if the Certificate	Street					
Holder is NOT the Manufacturer	Suburb	City				
	State	Country	Postcode			

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AS PER CERTIFICATE HOLDER DETAILS (Item 1)		Name			Company Position / Title of the manufacturer's representative				
			Phone No.			E-mail address			
4. Transfer of current GasMark Certification to IAPMO Oceania ☐ YES ☐ NO									
JAS-ANZ accredited Conformity Assessment			Name of	Name of current CAB		Certificate No.			
Body (CAB)			Date of	Date of Certificate issue		Date of Certificate expiry			
Note Please provide a copy of current certificate, original or certified copies of laboratory Type Test reports, product specifications (including drawings) and instructions, a copy of the last annual product audit report (where applicable) and any other product related technical information, with this application form.								• /	
5. GasMa	rk Cortifi	icatio	on Dotai	le: Infor	mation Abou	ut Your Produ	ot		
	Certiii	Icalic	Uli Detai	15. 111101		which GasMark	<u> </u>		
Product Type	Please Se	elect C	One		Certification i	s sought (If know	vn)		
Model Number	C	Gas Type/s				Brand name an	d descriptio	scription	
Note Please attac	Note Please attach a separate sheet if required Separate sheet attached.								
Electrical Supply Data (if applicable)			Itage (V):		Frequency (Hz):		Current (A):		
Is the submission product a production sample or pro-				roto type?	Production		Prototype or Pre	eproduction	
Other types of certification  Does your product maintain any current Australian or overseas certification(s)? If so please identify the type of certification and certifying body.									
Note IAPMO Oceania may accept, at its discretion recognized local or overseas test report(s) as compliance with some relevant local Standards requirements, providing the assessments and report(s) are from an IAPMO Oceania recognised source and the report and certificate are in English.									
Technical documentation required for certification									
Documentation Any relevant, current test report(s) Technical details									
provided	ovided Instructions (installation; operating and servicing) Bill of materials								
('X', as appropriate)  Product drawings (assembly and discrete components)									
Preferred 'GasMark' marking option – <u>Please select one</u>									
'Labels' – purchased from IAPMO Oceania 'Self Marking' – IAPMO Oceania approved									
Note It is mandatory for all gas appliances to display the GasMark certification mark and it is optional for gas components. Please consult your Certification Engineer for additional information.									
6. Fees a	nd Paym	nent							
<ul> <li>An application fee invoice if applicable will be sent to the invoicing contact as specified on page 1.</li> <li>The certification process will not commence until the application fee has been paid.</li> </ul>									

## Confidentiality

IAPMO Oceania respects its client's privacy and in processing your application, the personal information we collect relating to you and your organisation is for the purpose of providing you and your organization with a high level of customer service. The collected information shall be kept confidential other than that information you have consented to be released; information which is in the

public domain or requested by the Courts, Tribunals, Police, Regulatory Authorities and Government bodies having interest in public safety.

## 7. Terms And Conditions

- 1. The signatory warrants the information contained in the application is true and correct and that they are authorised to sign this application on behalf of the applicant.
- 2. The signatory affirms that they are authorised by applicant to apply for IAPMO Oceania 'GasMark' certification.
- 3. The applicant acknowledges that they have read, and agrees to abide by the following IAPMO Oceania contractual documents:
  - (a) Fee Schedule. Detailed certification services quote available upon request, if not already provided,
  - (b) GasMark "Governance Rules" Scheme document POL-200.
  - N.B. GasMark "Governance Rules" are available from our web site www.iapmooceania.org or upon request.
- 4. The applicant agrees that:
  - (a) When IAPMO Oceania accepts this application in writing; or
  - (b) If the application is not accepted in writing, when IAPMO Oceania starts to supply Certification or Assessment Services to the applicant; there is a contract for the supply of Certification and/or Assessment Services upon the terms set out in the documents listed in clause 3 above.
- 5. The applicant accepts the certification is not a guarantee of product safety; furthermore the certification is based on a 'Type Test' regime of specific sample(s) provided by the applicant and assessed by IAPMO Oceania to establish the product complies with the requirements of relevant Standards and Regulatory Authorities.
- 6. This application is valid for a period of 12 months from the aforementioned application date, after which the application may be terminated by IAPMO Oceania where there has been no active progress.
- 7. The application and certification fees are non-refundable.
- 8. Where additional time is required for an inspection visit; or an additional inspection visit is required to verify the implementation of corrective actions resulting from "Action Items" raised at the Continuous Compliance Inspection visit; IAPMO Oceania may invoice the applicant/certificate holder for audit time and any other expenses related to undertaking the additional inspection visit.

Note: The following signatory must be	e a duly authorised representative a	nd from the or	rganisation named as the 'Certificate Holder'		
Signature of applicant	Full Name of signatory (P	lease print)	Position		
Co	mpany Name		Date		
Please return completed and SIGNED application form together with supporting product documentation to:	info@iapmooceania.org	OR	7-11 Fullard Road Narre Warren VIC 3805 AUSTRALIA		