

Instructions for Radio Equipment Certification according to Annex IV of the R&TTE Directive

1. Application form

On the attached application form please mark Annex IV on the first page (item A2). If you want us to perform the notification procedure for non-harmonized frequencies in several European countries, you can enter a list of countries in item A7.

Notification according to Article 6.4 of the R&TTE Directive is possible in all EU Member States: Austria, Belgium, Bulgaria, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, United Kingdom.

In addition the following countries also accept the notification procedure according to the R&TTE Directive:

Iceland, Norway, Switzerland (+ Liechtenstein).

The country of Liechtenstein does not require a separate notification. It is included in the notification for Switzerland.

2. Power of attorney

We need a power of attorney from the manufacturer to perform the notification to the countries. A sample letter is attached.

3. Declaration of Conformity

On the declaration of conformity please enter all applicable standards regarding:

- Radio Frequency
- EMC
- Safety (electrical safety, e.g. EN 60950 or other applicable standard)
- Health, Electro Magnetic Fields (EMF), e.g. EN 50360 for mobile phones or EN 50371 for Low Power apparatus < 20 mW (if applicable)

A sample DoC form is attached.

4. Marking

The product shall be marked with the CE conformity marking and our Notified Body Id. No. 0678 as shown in the attachment. For equipment operating in non-harmonized frequency bands the Alert Sign (!) shall be added to the marking. If the device uses harmonized frequency bands, no Alert Sign (!) and no notification to the countries is required.

5. Contents of the Technical Construction File

Annex II Point 4 of the R&TTE Directive gives a summary on the technical documentation required for conformity assessment.

The following checklist can be used to compile the TCF:

- (a) Description of intended purpose of the product
- (b) Identification of equipment including model numbers, brand names and variants, manufacturer details, if applicant is not the manufacturer
- (c) Declaration of Conformity signed by the applicant
- (d) Test reports
- (e) Photographs (may be included in the test reports)
- (f) User manual
- (g) Block diagram
- (h) Circuit diagram
- (i) PCB layout
- (j) Parts list
- (k) Software/Firmware Version (if applicable)

Items (a) and (b) shall be included in the application form. Items (c) to (h) are required as a minimum. Items (i) to (k) can be provided, if available and/or applicable.

To be completed by EMCCert DR. RAŠEK	
Project No.	

Application for provision of service

<p style="text-align: center;">1 Sender</p> <p>Firm/name: _____</p> <p>Address: _____</p> <p>Tel.: _____ Fax.: _____</p> <p>Order No.: _____</p> <p>Contact person: _____</p> <p>Tel.: _____ Fax.: _____</p> <p>e-mail: _____</p> <p>Power of attorney: <input type="checkbox"/> enclosed from 2 and/or 3 for 1 <input type="checkbox"/> to be submitted</p>	<p style="text-align: center;">2 Applicant</p> <p><input type="checkbox"/> Manufacturer <input type="checkbox"/> Authorised representative ^{*3)}</p> <p>Name: _____</p> <p>Address: _____</p> <p>Tel.: _____ Fax.: _____</p> <p><small>*3) If authorised representative: please specify manufacturer's address in supporting documents</small></p> <hr/> <p style="text-align: center;">3 Invoice to be sent to</p> <p>Name: _____</p> <p>Address: _____</p> <p>Tel.: _____ Fax.: _____</p>
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A	<p>Application for the following services</p> <p>1 <input type="checkbox"/> Annex III of Directive 99/5/EC: Identification of the test suites considered to be essential</p> <p>2 <input type="checkbox"/> Annex IV of Directive 99/5/EC: Conformity assessment by the Notified Body and issue of a Certificate of Compliance with the essential requirements</p> <p>3 <input type="checkbox"/> Annex V of Directive 99/5/EC: Assessment of a full quality assurance system</p> <p>4 <input type="checkbox"/> Issue of a copy of a Certificate of Compliance</p> <p>5 <input type="checkbox"/> Conformity testing (an accredited test lab will be commissioned to carry out the tests)</p> <p>6 <input type="checkbox"/> Article 6.4 of Directive 99/5/EC: Notification of radio equipment using non-harmonized frequency bands (Please give a list of EC Member States in which placing on the market is planned):</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>7 <input type="checkbox"/> Other services, e.g. type approval management in other countries (Please give a short description of the service(s) agreed):</p> <p>_____</p> <p>_____</p> <p>_____</p>
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B Checklist for conformity assessment	
1 Product details Type/Model name of product or details of standards (for assessment of a full quality assurance system): _____ _____ Description of intended purpose: _____ _____ Equipment class (if available): _____ _____ _____	
2 Power of attorney for sender	<input type="checkbox"/> not applicable <input type="checkbox"/> enclosed <input type="checkbox"/> to be submitted
3 Declaration of conformity to the specific radio test suites and of compliance with the essential requirements	<input type="checkbox"/> not applicable <input type="checkbox"/> enclosed <input type="checkbox"/> to be submitted
4 Test report(s)	<input type="checkbox"/> not applicable <input type="checkbox"/> enclosed <input type="checkbox"/> to be submitted
5 Test report for the quality assurance system issued by an accredited body	<input type="checkbox"/> not applicable <input type="checkbox"/> enclosed <input type="checkbox"/> to be submitted
6 Technical documentation	<input type="checkbox"/> not applicable <input type="checkbox"/> enclosed <input type="checkbox"/> to be submitted

C Declarations and Agreement						
1. We hereby declare that the product meets the essential requirements according to Article 3 of Directive 1999/5/EC. 2. We hereby declare that an identical application for conformity assessment <input type="checkbox"/> has been presented to the following other Notified Bodies: <input type="checkbox"/> has not been presented to any other Notified Body. 3. We agree to accept the EMCCert General Terms and Conditions.						
<table style="width: 100%; border: none;"> <tr> <td style="width: 40%; border: none;"> Signature and company stamp corporate entity / legal status _____ Name </td> <td style="width: 30%; border: none; text-align: center;"> _____ Place </td> <td style="width: 30%; border: none; text-align: right;"> _____ Date </td> </tr> <tr> <td style="border: none;"></td> <td style="border: none; text-align: right;"> _____ enclosure(s) </td> <td style="border: none;"></td> </tr> </table>	Signature and company stamp corporate entity / legal status _____ Name	_____ Place	_____ Date		_____ enclosure(s)	
Signature and company stamp corporate entity / legal status _____ Name	_____ Place	_____ Date				
	_____ enclosure(s)					

Declaration of Conformity

I hereby declare that the product

(Name of product, type or model, batch or serial number)

satisfies all the technical regulations applicable to the product within the scope of Council Directives 2006/95/EC, 2004/108/EC and 99/5/EC:

(Title(s) of regulations, standards, etc.)

All essential radio test suites have been carried out.

NOTIFIED BODY: EMCCert Dr. Rasek GmbH



Stoernhofer Berg 15
91364 Unterleinleiter
Germany
EU Identification Number: 0678

MANUFACTURER or AUTHORISED REPRESENTATIVE:

– **Address:**

This declaration is issued under the sole responsibility of the manufacturer and, if applicable, his authorised representative.

– **Point of contact:**

(Name, telephone and fax number)

(Place, date of issue)

(Signature)

(Name and title in block letters)

Power of Attorney

(to be written on company-paper)

We, the undersigned, hereby authorise

EMCCert DR. RAŠEK GmbH
Stoernhofer Berg 15
91364 Unterleinleiter
Germany

to notify the use of non harmonised frequencies according to article 6.4 of Directive 1999/5/EC of the following radio equipment

(Name of product, type or model)

on behalf of the

manufacturer / authorised representative of the manufacturer
– **Address:**

to the Spectrum Management Authorities of the EU Member States and those non- EU- Member States who have adopted the Directive 1999/5/ EC

*(With this letter the undersigned does **not** appoint EMCCert DR. RAŠEK GmbH to act as authorised representative of the manufacturer. EMCC DR. RAŠEK does not assume any responsibilities or liabilities placed on the manufacturer according to the Directive 1999/5/EC.)*

– **Point of contact:**

(Name, telephone and fax number)

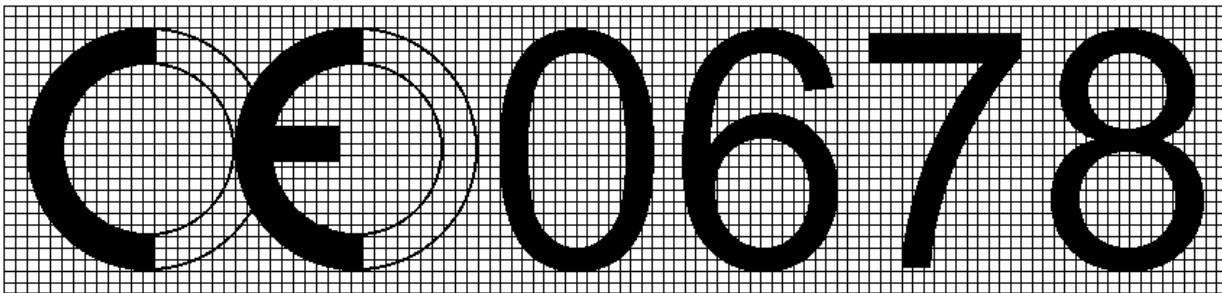
(Place, date of issue)

(Signature / stamp)

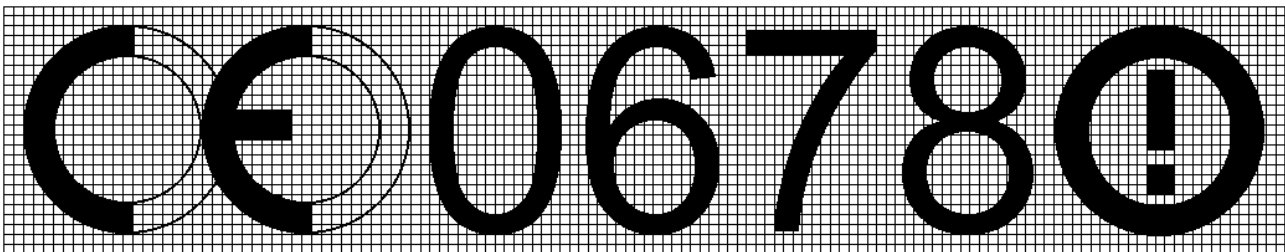
(Name and title in block letters)

The appropriate CE marking depends on the category of equipment and on the applicable conformity assessment procedure. When a Notified Body was involved in the conformity assessment procedure according to ANNEX III, IV or V then the CE marking shall be accompanied by the identification number of the Notified Body. "Class 2" radio equipment shall in addition be accompanied by the "alert symbol".

Sample of CE marking for "Class 1" equipment



Sample of CE marking for "Class 2" radio equipment



- If the CE marking is reduced or enlarged, the proportions given in the above graduated drawing must be respected.
- The CE marking must have a height of at least 5 mm except where this is not possible on account of the nature of the apparatus.
- The CE marking must be affixed to the product or to its data plate. Additionally it must be affixed to the packaging, if any, and to the accompanying documents.
- The CE marking must be affixed visibly, legibly and indelibly.