

ETL Follow-up Services -CLIENT INFORMATION SHEET (CIS) Return to etlriceu@intertek.com and your engineering office

Applicant			(Company who owns the rights to the Listing Report and will appear on Intertek's website)			
Legal E	Entity Name:					
Addres	s:	-				
(important to include State/region/province/county and country)						
Contact person: primary / secondary		/ secondary				
Phone number:		-				
E-mail:		-				
VAT No. and/or Registration No.:		ition No.:				
Bill-To: Legal Entity Name/address						
(For ETL factory inspection and certification fees) (important to include State/region/province/county)						
Contact person:		Name:				
		E-Mail - Finance department:				
		E-Mail - For PDF-invoices:				
		-	Phone no:			
VAT No	o. and/or Registra	ition No.:				
PO number required:		-	YES if yes: NO			
Curren	су		€uro	US\$		SEK
Currency shall be confirmed by		irmed by				
your finance department.		_		'	<u></u>	
Note: Note:	If billing address is different than applicant, a letter accepting responsibility for paying all invoice are required from the company accepting the invoices.					
Note:						
Manufacturer			(Where labelling, final assembly and inspections will take place.)			
Legal Entity Name:						
Addres	s:	-				
(important	t to include State/region/p	province/county)	_			
Contact person: primary / secondary						
Phone number:						
E-mail:						
VAT No. and/or Registration No.:						
	ertification labels vecheck one)	will be:	Purchased from Intertek		ed from ar by yourse	nother source or elf
Sheet bv:	completed				Date:	

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