**Application for Test request**

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| --- | --- |
| Reception umber : |  |
| Date of application: |  |

To: Japan Electrical Safety & Environment Technology Laboratories

|  |  |  |
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| (Applicant's) | Zip code: |  |
|  | Address: |  |
|  | Corporation name: |  |
|  | Representative, position: |  |
|  | Responsible person, division |  |
|  | (Seal or signature) |  |
|  |  |  |
| I delegate the authority on this application procedure to the following proxy. (\*1) | | |
| (Proxy's) | Zip code: |  |
|  | Address: |  |
|  | Corporation name: |  |
|  | Person's name, position: |  |
|  | (Seal or signature) |  |

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| --- | --- | --- | --- | --- | --- |
| Classification of application | | | | □self-confirmation | □Ability for confirmation |
| Category of specified radio equipment | | | | Radio equipment under Article 2 Paragraph ( )  Item( ) of Certification Ordinance | |
| Type or name of radio equipment | | | |  | |
| Name of equipment manufacturer | | | |  | |
| Serial number | | | |  | |
| Number of units applied | | | |  | |
| Emission modes, frequencies and antenna  power to be certified | | | |  | |
| Connection to telecommunication link | | | | □Yes | □No |
| Submission of radio equipment | | | | □Yes | □No |
| Submission of characteristic test report | | | | □Yes | □No |
| Equipment information | | Rated voltage / power / frequency | |  |  |
| Test items | |  | |
| Dimensions / Weight | |  | |
| Contact  address | | Zip code, address | |  | |
| Division name | |  | |
| Name of person | |  | |
| Telephone number | |  | |
| e-mail or facsimile | |  | |
| Remarks | | |  | | |
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