

(Form 1-1/2)

## Application Form for Component Registration

Date:

Receipt No.:

(For JET Use Only)

To the President,  
Japan Electrical Safety & Environment Technology Laboratories:

I wish to register the component described below in accordance with JET's Guidelines on Registration of Certified Components, and hereby apply for registration in accordance with the provisions of Section 4.1 of the Implementation Guidelines.

## 1. Applicant

Company name:

Representative Job title:

Name:

Address:

## 2. Product name:

## 3. Model number:

## 4. Ratings: Rated voltage, rated frequency, rated current

(attach technical information on materials, configuration, dimensions, etc.)

5. Registration format:  Component manufacturer format  
 Assembling manufacturer registration format

## 6. Name and address of manufacturing factory

(list all if more than one):

7. Testing standards:  Description of the technical requirements by the METI Ordinance.  
(APPENDIX )  
 Other (specify: )

8. Application type  New application  
 Additional application (registration number: )

## 9. Contact person:

Company name:

Address:

Section &amp; Job title:

Name:

(Signature or seal)

TEL:

FAX:

E-mail:

(Form 1-2/2)

Receipt No.

Separate sheet 1: List of the name(s) and address(es) of the Manufacturing Factory  
(Factories)

Attached Documents:

- 1) Declaration of Technical Specification
- 2) Power of Attorney
- 3) Supplement to the Application for JET Certification and Points to be confirmed
- 4) Descriptions on Quality control at the Factory (Factories)
- 5) Description on Agreement on Commissioned production or Import
- 6) JET FACTORY INSPECTION REPORT SECTION B  
(If it is the first-time application for the factory)
- 7) Application for Testing based on Procedures of Testing at Manufacturer's  
Premises (If such Testing is applied)
- 8) CB Test Certificate  
(if Test Data are to be accepted under the CB scheme)

(Separate sheet 1)

Receipt No.

(To be filled in by JET)

## List of the name(s) and address(es) of the Manufacturing Factory(Factories)

[Please be aware]

Please enter all factories covered by the application.

- If it is the first-time application for the factory, please submit [JET FACTORY INSPECTION REPORT (SECTION B)].
  - If the factory is registered at JET, please enter the Factory Reference Number.
  - If the factory is not in Japan, please make entries in English. Further, if it is in China or Taiwan, please make entries both in English and in Chinese.
  - If the manufacturing factories are more than 3, please attach an additional sheet.
- Remark: If particular models are manufactured at the particular factory/factories, please describe the detailed information on the distribution of the production.

Factory 1 (Factory Reference Number: \_\_\_\_\_ )  
 Name of the Manufacturer: \_\_\_\_\_  
 Name of the Factory: \_\_\_\_\_  
 Address of the Factory: [zip code(postcode): \_\_\_\_\_ ]  
 (In Chinese): \_\_\_\_\_

Factory 2 (Factory Reference Number: \_\_\_\_\_ )  
 Name of the Manufacturer: \_\_\_\_\_  
 Name of the Factory: \_\_\_\_\_  
 Address of the Factory: [zip code(postcode) \_\_\_\_\_ ]  
 (In Chinese): \_\_\_\_\_

Factory 3 (Factory Reference Number: \_\_\_\_\_ )  
 Name of the Manufacturer: \_\_\_\_\_  
 Name of the Factory: \_\_\_\_\_  
 Address of the Factory: [zip code(postcode) \_\_\_\_\_ ]  
 (In Chinese): \_\_\_\_\_

Remarks:

1. A Manufacturer is the organization that carries out the manufacturing, OK/NG judgment, handling, storage of the products, and supervises and controls all these activities, and, in doing so, bears responsibility to have the products always conforming to the technical standards and assumes the related obligation. (The Applicant may and may not be the Manufacturer.)
2. A Factory is the place at which the products are manufactured or assembled, and where the initial and follow-up factory inspections are carried out by JET.

(Attached document 1)

Receipt No.

(To be filled in by JET)

## **Declaration of Technical Specification**

1. Product name:
  
2. Model and its rating: (Rated voltage, rated frequency, rated power consumption, etc.)  
(If they are not one, please write all combinations. If necessary, please add a sheet / sheets.)
  
3. Technical information:  
(Please provide the product's photos, drawings, the description on the casing materials, component listings, circuit diagrams, markings, instruction manuals, and other information necessary to conduct the tests. If the space on this sheet is not sufficient, please attach the necessary materials.)

(Attached document 2)

## Power of Attorney

Date:(m) / (d) / (y)

To. Japan Electrical Safety &amp; Environment Technology Laboratories

[Applicant]

(Please enter "1. Applicant" of the Application for JET Certification)

Company name:

Address: [ zip code(postcode) ]

Section, Job title:

Person in charge: (Signature or seal)

I hereby entrust the following person as agent of the applicant with the application for JET Certification, and delegate full authority to him for making application, changing the entry/entries of the Certification, and doing the related other procedures.

[Agent]

Company name:

Address: [ zip code(postcode) ]

Section, Job title:

Person in charge:

Telephone:

Fax:

e-mail:

[Validity of this Power of Attorney] (Please tick the appropriate box below.)

 Till the change of the agent From / / to / / [(month)/(day)/(year)]

Remark: If it is a new Power of Attorney, please submit the original. Next time onwards, please submit its copy.

(Attached document 3 - 1/3)

Receipt No.

(To be filled in by JET)

## Supplement to the Application for Component Registration and Points to be confirmed

(Please tick the appropriate )

## 1. Issue of Test Report

- Yes (subject to fees) ( Simplified /  Detailed)  
( Japanese /  English) version

Remark: If English version is to be issued, please give us the name and address of the company in English.

Please be forewarned that the restricted Test Report may be issued depending on the content of the application.

- No

## 2. Request for quick issue of the Registration(subject to fees if the report is requested to be issued earlier than in a month after the application.)

- Yes (by        /        /        [month/day/year])  
 No

## 3. Information on test samples (Please show shipping schedule, the number of cartons and other necessary information below.)

Remark: Please note that JET is to inform the applicant how many samples are needed for the testing after the content of the submitted documents is checked at JET's section in charge.

If large samples are to be delivered to JET's laboratory, please consult beforehand with the laboratory

- Samples are to be shipped to JET on (        /        /        [month/day/year]).

The number of packages:

- Samples are to be delivered to JET directly on (        /        /        [month/day/year]).  
 Other information: (        )

(Attached document 3 - 2/3)

Receipt No.

(To be filled in by JET)

## 4. Confirmation of the Addressee and other points)

1. For inquiries, JET is to contact ;
  - Person in charge of this the application
  - Reference No. 1 below       Reference No. 2 below
2. The Certificate and Test Report are to be sent to ;
  - Person in charge of this the application
  - Reference No. 1 below       Reference No. 2 below
3. The bill for testing fees and other related charges is to be sent to ;
  - Person in charge of this the application
  - Reference No. 1 below       Reference No. 2 below
 (If the bill is to be addressed not to the applicant, please write the addressee.)
4. Return of the tested sample(s) ;
  - The tested samples are to be returned to (Carrying charges are to be collected on delivery):
    - Person in charge of this the application
    - Reference No. 1 below       Reference No. 2 below
  - The samples are to be picked up by the applicant.
  - The samples are to be discarded by JET (Small-sized sample(s) only. The discarding charges are to be borne by the applicant.)

## Reference No. 1

Company name:

Address:

Section, Job title:

Person in charge:

Telephone:

Fax:

E-mail:

## Reference No. 2

Company name:

Address:

Section, Job title:

Person in charge:

Telephone:

Fax:

E-mail:

## 6. Others (Messages if any)

(Attached document 3 - 3/3)

Receipt No.

(To be filled in by JET)

**【Points to be confirmed on the application for Certification】**

1. This Application will come into effect after JET's receipt of the Test samples, necessary documents and the estimated fees for Certification.
2. If the Test samples and necessary documents are not delivered to JET within six months after the date when JET verifies its receipt of this Application, this Application will be deemed to have been withdrawn at the Applicant's request.
3. The Test samples shall be delivered to and received by Japan Electrical Safety & Environment Technology Laboratories (Tokyo Lab., Yokohama Lab or Kansai Lab according to JET's assignment). The Applicant is responsible for the delivery.
4. If JET informs the Applicant of any defect or damage found in the Test samples delivered to JET, the Applicant shall immediately take countermeasures.
5. JET does not restore the original condition of the Test samples after the testing and does not bear responsibility for any disassembly or damage of the Test samples which may have arisen as a result of the testing.
6. If the Applicant is to pick up the Test samples with which the testing was conducted, they are to be picked up within 50 days after completion of the testing. If it is not done in time, the samples are at JET's disposal. In this case, the Applicant shall bear all expenses related to such disposal.
7. The Applicant agrees to allow JET's staff members to enter the Manufacturing factories and perform necessary investigations there if it is requested for the conduction of the Preliminary Factory Inspection.
8. The Applicant agrees to observe the provisions of "Rules for Operation of JET Certification" and to provide JET with all information necessary for evaluation of the product to be certified.

**The Applicant has confirmed the above points on the Application for Certification.**

- Hereby I, the person in charge of the Application, accept the contents of all the above points to be confirmed. (Please tick the box, if accepted)



(Attached document 4)

### **Descriptions on Quality control at the Factory (Factories)**

1. On receiving inspection and the storage of the inspection records
2. On the manufacturing and daily inspection of the products and the storage of the inspection records
3. On the check of functional operation of the measuring equipment and the carrying out of calibration, and on the storage of the records of checking and calibration
4. On the handling of the products
5. On the confirming inspection of the products and the storage of the inspection records
6. On the Quality system audit of the manufacturing factories
7. On the handling of nonconforming products
8. On complaints from customers and the storage of the records of the complaints
9. On the design control of the products to be certified

Remark: The above descriptions may be substituted by the explanation with diagrams, flowcharts or other documents showing these series of particular charge.

(Attached document 7)

Receipt No.

(To be filled in by JET)

## **Application for Testing based on Procedures of Testing at Manufacturers' Premises**

To Japan Electrical Safety and Environment Technology Laboratories

Hereby we apply for testing of the products stated hereunder at the manufacturer's premises.

1. Applicant for Registration

Company name::

Address : [ Zip code (postcode) ]

2. Product name :

3. Models of the Product:

(Please write all models. If necessary, please add an attached sheet.)

4. Reason for this Application:

5. Place for the Testing:

(Please give an approximate time required from the nearest station and attach a diagrammatic sketch showing directions.)