



## Application for ACMA Telecommunication Equipment Certificate

### Application Details:

<b>1- Type of Application</b>			
New Certificate	<input type="checkbox"/>	TTS CES 2018	Telecommunications (Customer Equipment Safety) Technical Standard 2018
	<input type="checkbox"/>	TTS MEAI 2022	Telecommunications (Mobile Equipment Air Interface) Technical Standard 2022
Modification of existing certificate	<input type="checkbox"/>		
Administrative Modification	<input type="checkbox"/>		
Change in Registered Applicant details	<input type="checkbox"/>		

<b>2- Applicant Details</b>		
Business Name:		
Address:	Street :	
	City:	
	State/Province:	
Country		
Postal Address (If different to above)		
ABN, CAN or IRDN: (If applicable)		
Contact Name: Title: Mr/ Ms/ Mrs/ Dr		
Contact Details: (Included country/ area code)	Phone :	Fax :
	Mobile :	
Email:		



## Application for ACMA Telecommunication Equipment Certificate

<b>3- Agent Details</b>		
Business Name:		
Postal Address:		
ABN, CAN or IRDN: (If applicable)		
Contact Name: Title: Mr/ Ms/ Mrs/ Dr		
Contact Details: (Included country/ area code)	Phone :	Fax :
	Mobile :	
Email:		

<b>4- Product Details</b>		(Must be Completed)
Name of the product to be certified		
Product description (Include Telecom Interface Type)		
Trade/ Brand Name (to appear on product)		
Main Model Number		
Electrical Rating		
Manufacturer's Name		
Address		



## Application for ACMA Telecommunication Equipment Certificate

<b>5- Test Report Details (1)</b>	
Test Report Number	
Date of Report	
Name of the Accredited Laboratory (If applicable)	
Test Standard (s)	
Additional Information (If required)	
<b>Test Report Details (2)</b>	
Test Report Number	
Date of Report	
Name of the Accredited Laboratory (If applicable)	
Test Standard (s)	
Additional Information (If required)	
<b>Test Report Details (3)</b>	
Test Report Number	
Date of Report	
Name of the Accredited Laboratory (If applicable)	
Test Standard (s)	
Additional Information (If required)	

<b>6- General Modifications</b>	
<b>Existing certificate Number</b>	
<b>General changes that affect one or more approved or to be approved models</b>	



## Application for ACMA Telecommunication Equipment Certificate

<b>7- Additional Models</b>	
<b>Model Number</b>	
<b>Difference between main model or other recorded model.</b>	

<b>8- Administrative Modification</b>	
<b>Existing certificate Number</b>	
<b>Difference between Certified model and modified model.</b>	

<b>9- Change in Applicant details</b>	
<b>Existing certificate Number</b>	
<b>Declaration Supplied</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Details of change</b>	



## Application for ACMA Telecommunication Equipment Certificate

**10- 1- Declaration by Applicant**

I have read and understood the Comtest Certification Body Terms, Conditions and Obligations (Form CCB-05) and agree to abide by them.

I agree to pay Comtest Certification Body the relevant application fees and understand that the payment is non-refundable regardless of the outcome of this application.

I acknowledge that any changes to the name and address of the certificate holder must be notified to Comtest Certification Body.

I acknowledge that any changes to a product approved under this application must be notified to Comtest Certification Body for assessment prior to the product reaching the market.

If applicable, I authorise the agent, as per details in Section 3, to act on my behalf for this approval certification.

**Authorised Signature:** ----- **Dated:** -----

**Name of Signatory and Title:** -----

**10- 2- Declaration by Agent**

I hereby make application to Comtest Certification Body for the certification of Telecommunications Equipment as described above in this application and declare that the statements and information provided in this application are true to the best of my knowledge.

I have provided the applicant with Form CCB-05 Comtest Certification Body Terms, Conditions and Obligations and attached is a copy of the signed declaration stating that they have read, understood and will abide by them.

I declare that the applicant has provided written authority for my company to act on their behalf. Attached is a copy of this authority.

**Authorised Signature:** ----- **Dated:** -----

**Name of Signatory and Title:** -----

<b>11- Payment Details</b>	
Credit Card	Please Call Comtest on 03 9645 5933
EFT	National Australia Bank BSB:083 091 Acc:676513869 Swift Code: NATAAU3303M Western Branch 460 Collins Street, Melbourne, 3000 Victoria, Australia
Fee Amount : \$	

- Attachment Requirements:**
- Design Details
  - Brochures / manuals
  - Equipment Photographs (Must be in colour) if not in test report.
  - Test Report (Must be in English)