

6. The Scheme requires that all BuildCert members have in place and continue to maintain a quality system that ensures that the manufactured product is of a consistent quality and that all subsequent operations have no detrimental effect.

Manufacturers of Thermostatic mixing valves can demonstrate compliance by supplying the Scheme with a copy of a valid ISO 9001 certificate and scope of accreditation or an approved quality system. Where this cannot be supplied a quality audit will be conducted by the scheme to verify compliance with the requirements of the Scheme.

A Primary factor is a company/individual who does not manufacture the valve but distributes a certified valve under his own trade name, the product having only cosmetic changes.

A Secondary factor is a company/individual who does not manufacture the valve but distributes an all ready certified valve under his own trade name, the valve having cosmetic changes and material changes that may affect the valves performance (e.g. the addition of isolation valves, etc. not present in the original application made by the manufacturer).

The factors must demonstrate compliance with only those aspects of ISO 9001 that affects the thermostatic mixing valve. Demonstration of compliance can be achieved by supplying the Scheme with a copy of a valid ISO 9001 certificate and scope of accreditation. Where this cannot be supplied a quality audit will be conducted by the scheme to verify compliance with the requirements of the Scheme.

This application is from: **(tick as appropriate)**

A Manufacturer

A Primary Factor Details of Original Certificate BC/.....

A Secondary Factor Details of Original Certificate BC/.....

Secondary approval - is a separate WRAS approval required for this application? YES / NO

7. DECLARATION - Factors only: Is the valve supplied by your company identical to the already approved and licensed Thermostatic mixing valve (excluding identification) including all inlet variations? YES / NO

Please supply details of all variants.

8. Is the sample a production valve? YES / NO

9. Please ensure the following documents are enclosed. If not possible, please give reasons why. Please tick box to state you have enclosed the documents. The documents should include any certificates for which the product has been previously tested.

- (a) Drawings
- (b) Brochures
- (c) Certificates
- (d) Installation Manual
- (e) ISO 9001 Certificate & Scope of accreditation

10. Please state the applications you wish to have the product tested to and any special tests you may wish to have conducted on the product. The quotation you receive from the Test House will only be based on the information you give in this section. Only tests that are stated in this section will be carried out on the product. If further tests are required after the quotation has been sent to the client, a further application form will be required:

Code	Operating Pressure Range	Application	*	Size	Economy 'E' Designation Required **
-HP-B	High Pressure	Bidet			
-HP-S	High Pressure	Shower			
-HP-W	High Pressure	Washbasin			
-HP-T44	High Pressure	Bath with fill temperature up to 44°C			
-HP-T46	High Pressure	Bath with fill temperature up to 46°C			
-HP-D44	High Pressure	Bath with fill up to 44°C & Shower up to 41°C			
-HP-D46	High Pressure	Bath with fill up to 46°C & Shower up to 41°C			
-LP-B	Low Pressure	Bidet			
-LP-S	Low Pressure	Shower			
-LP-W	Low Pressure	Washbasin			
-LP-T44	Low Pressure	Bath with fill temperature up to 44°C			
-LP-T46	Low Pressure	Bath with fill temperature up to 46°C			
-LP-D44	Low Pressure	Bath with fill up to 44°C & Shower up to 41°C			
-LP-D46	Low Pressure	Bath with fill up to 46°C & Shower up to 41°C			

* Please tick required the required applications of use

** If you require your valve to be tested to the Economy` designation, please tick the grey box

11. Marking:

(a) Marks of identification to be found on the valve.

(b) Unique model reference.

(b) Method of marking.

12. Please declare details of all the manufacturers of materials and components on the enclosed `Schedule of Materials` (see attached form). Include the following:
- (a) Component identification on drawing.
 - (b) Description of item.
 - (c) Trade name of material or product.
 - (d) General nature of material, e.g. rubber, EPDM, etc.
 - (e) Material or product identification (manufacturer).
 - (f) Name and address of material or product manufacturer.
13. Additional comments, where applicable:
14. Please state which Test House is undertaking the mechanical assessment.

Signed:..... Name:.....

(Signature)

(Block capitals)

Date:..... Status:.....

COMPONENTS IN CONTACT WITH POTABLE WATER AS SHOWN ON DRAWING No: _____		DETAILS OF ALL MATERIALS FROM WHICH COMPONENTS ARE MANUFACTURED			FOR OFFICE USE ONLY
					TAP: _____ LAB: _____
COMPONENTS IDENTIFICATION ON DRAWING (a)	DESCRIPTION OF ITEM (b)	TRADE NAME OF MATERIAL OR PRODUCT (c)	GENERAL NATURE OF MATERIAL (RUBBER, EPDM, etc) (d)	MANUFACTURER'S MATERIAL OR PRODUCT IDENTIFICATION CODE (E)	NAME AND ADDRESS OF MATERIAL OR PRODUCT MANUFACTURER (F)

NOTE: If this form does not have enough space, please photocopy