

**APPLICATION FORM**  
**for recertification of the**  
**international quality label for**  
**electrically driven heat pumps**



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## APPLICATION DATA

### 1. The applicant:

Company:

Contact person:

Street address:

Town / Country:

Tel.

Fax:

Member of:

### 2. Units to be recertified:

System type (B/W; W/W; A/W; DX/W)	Model / Model range originally certified	Date of original certificate

**We, the applicant, apply for recertification of the units/model ranges indicated above.**

#### Confirmation

We hereby confirm that no changes have been undertaken to the unit/model range since the original certification. We understand and acknowledge that we are obliged to inform the respective quality label commission voluntarily, without request, on all changes to test objects with a quality label.

We agree that - in case of a successful application - the content of the test report level 2 is as a whole or in parts made publicly available on the websites of the EHPA or the national heat pump associations.

Date/place      Applicant/stamp