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<b>APPLICATION DPW-C</b>		
FOR THE CERTIFICATION PROCESS		
FOR EXTENSION OF THE CERTIFICATE'S SCOPE NUMBER		
FOR EXTENSION OF VALIDITY CERTIFICATE NUMBER		
FOR THE RENEWAL OF THE CERTIFICATE NUMBER		
FOR RESTRICTING THE CERTIFICATE NUMBER		
<b>Supplier's name and address:</b>	REGON:	
	NIP:	
	E-mail:	
	Phone:	
	http://www	
Details of the person representing (person authorized to sign contracts):		
First name Last Name		
<b>Product name and production address:</b>		
	E-mail:	
	Phone:	
Contact details of the company (contact person authorized to service with OBRPPD)		
First name Surname	Phone	E-mail:
Description of product (s) (name, type, thickness range, type of resin, purpose):		
Number of production lines:		
Normative reference document for assessing product conformity:		
<b>Attachments:</b>		
<b>Manufacturer's questionnaire</b>		
<b>Product control control documentation (CARB / EPA)</b>		
<b>Research reports</b>		
<b>Other:</b>		

