



MCCAA

MALTA COMPETITION AND
CONSUMER AFFAIRS AUTHORITY

TECHNICAL REGULATIONS DIVISION

(as established by the Malta Competition and Consumer Affairs Authority Act (Cap.510))

APPLICATION FORM FOR AUTHORISED CONFORMITY ASSESSMENT BODIES

FOR LIFTS

TRD 301

Complete in typeface or block letters.

AUTHORITY USE ONLY

Reference Number

Date Received

This form is in accordance with the Method for Designating Conformity Assessment Bodies Regulations, LN 136 of 2003, and is to be filled in by bodies in Malta and in Member States of the European Union to apply for approval as an Authorised Conformity Assessment Body within the scope of the Inspection of Lifts Regulations, LN 231 of 2007.

Date of application:

Details of Applicant

Name of the organization:

Legal status of the organization:

First name and surname of the
authorised signatory:

Address of the organisation:

Telephone/Mobile Number:

Email:

Declaration

1. I am aware of the requirements of the Method for Designating Conformity Assessment Bodies Regulations, LN 136 of 2003.
2. I understand the manner in which the thorough examinations and preventive inspection function as per Inspection of Lifts Regulations, LN 231 of 2007.
3. I understand that the Technical Regulations Division will charge for all relevant work undertaken in processing this application (details on charges will be provided on request) and I understand that I will undertake to accept and pay incurred charges.
4. I understand that after that the applicant submit this application, the Technical Regulations Division may make an assessment visit to the applicant's head office or any other locations where the activities relevant to the procedure are performed and may also ask for further evidence.
5. I understand that after that the applicant submit this application, the Technical Regulations Division may ask for any other documentation that may be pertinent to the processing of this application.
6. I understand that the designation for the operation as an authorised conformity assessment body may be withdrawn by decision of the Technical Regulations Division.
7. I understand that this designation is to be renewed annually, by informing in writing the Technical Regulations Division and paying an annual subscription fee (details on charges will be provided on request).
8. I declare that I am authorised to act on behalf of the applicant organisation.
9. I declare that the information contained herein is correct and accurate to the best of my knowledge and belief.
10. I confirm that I have attached all relevant documents with this application form.

Signature:

Position in the organization of
the Authorised signatory:

Place:

Date:

Please note that this application form must be accompanied by the following documents:

- 1. A copy of the accreditation certificate issued by the National Accreditation Body, or by another National Accreditation body recognized by the Technical Regulations Division as per Schedule II(B) of the Method for Designating Conformity Assessment Bodies Regulations, LN 136 of 2003.**
- 2. A recent certificate of conduct issued by the Police or other competent authority not earlier than 6 months from the date of application of the managing director and/or authorised signatory.**
- 3. Copy of the insurance policy covering the local activities.**
- 4. Evidence of non-bankruptcy.**
- 5. A portrayal of the organisational structure complimented with a description of relations between individual organisational units and data on the activities that could affect the impartiality of work.**
- 6. Description of the technical and staff capacities.**
- 7. A copy of the academic certificates and training records of the managing director and the personnel involved in the preventive inspections and thorough examinations of lifts.**

For further information please contact the Technical Regulations Division on 23952000.

All personal information about the submitting entity in this form will be held by the Technical Regulations Division in accordance with the Data Protection Act, 2001.

The completed form should be addressed to:

*Director General,
Technical Regulations Division,
Malta Competition and Consumer Affairs Authority,
Second Floor, Evans Building,
Merchants Street,
Valletta, VLT 1179*

or via email to:

helpdesk.msa@msa.org.mt