Dear Customer,

We thank you for your interest in QPS services. In order to estimate the scope of work involved and the associated fee, we ask you to kindly complete this form as completely as possible and return it to QPS by fax or email, along with any relevant documentation. The accuracy of the quotation you will receive is based upon the completeness of the information provided in this form, and the information submitted along with it.

**Please note that the completion of this form in no way obligates you to use QPS services**

|  |
| --- |
| **For assistance in filling out this Form, please contact** [**customerservice@qps.ca**](mailto:customerservice@qps.ca)**.**  **After completing this RFQ, please forward it to: QPS Customer Service at** [**customerservice@qps.ca**](mailto:customerservice@qps.ca)**.** |

**1. GENERAL INFORMATION**

|  |  |
| --- | --- |
| **Applicant:** |  |
| Contact Name: |  |
| Contact Phone Number: |  |
| Contact e-mail Address: |  |
| Address: |  |
| City, Prov/St., Postal Code/Zip: |  |
| **Factory:** |  |
| Contact Name: |  |
| Contact Phone Number: |  |
| Contact e-mail Address: |  |
| Address: |  |
| City, Prov/St., Postal Code/Zip: |  |
| **Manufacturer:** |  |
| Contact Name: |  |
| Contact Phone Number: |  |
| Contact e-mail Address: |  |
| Address: |  |
| City, Prov/St., Postal Code/Zip: |  |

**DEFINITIONS:**

**Applicant**: A manufacturer or a person who applies for obtaining certification and will own the certification rights and files for the product in question.

**Factory:** The site where the required “Production Tests” outlined in the Certification Report, are conducted and the QPS label is applied on complying products. It is also the site where the final assembly of the labeled product takes place.

**Manufacturer**: An organization, situated at one or more stated locations, that carries out or is responsible for controlling the design, manufacture, production, and storage of the product; and whose name may appear on the product.

**Note:** If the product is manufactured at multiple facilities, please provide a listing of the additional facility locations.

**2. SERVICE REQUESTED**

**Please indicate each of the following service options you want QPS to provide a quote for:**

**North America:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Certification for Canada |  | Certification for the USA |
|  | MSHA Part 6 Test Report |

**IECEx:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | IECEx Test Report (ExTR) |  | IECEx Certificate of Conformity (IECEx CoC) |
|  | IECEx Quality Assessment Report (QAR) |  | IECEx Unit Verification Certificate of Conformity |

**ATEX:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | ATEX EU Type Examination Certificate |  | ATEX Type Certificate (Category 3) |
|  | ATEX Quality Assessment Notification (QAN) |  | ATEX Unit Verification Certificate |

**OTHER:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Custom Testing |  | Technical Information Service |

**3. Hazardous Location / Ex Markings**

**North America:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Class I |  | Division 1 |  | Division 2 | A B  C D | Groups |
|  | Class II |  | Division 1 |  | Division 2 | E F  G | Groups |
|  | Class III |  | Division 1 |  | Division 2 |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Class I |  | Zone 0 |  | Zone 1 |  | Zone 2 | IIC  IIB+H2  IIB  IIA | Groups |
|  | Zone 20 |  | Zone 21 |  | Zone 22 |  |  | IIIC  IIIB  IIIA | Groups |

Ex protection

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Ex i |  | Ex d |  | Ex t |  | Ex nA |  | Other |
|  | Ex e |  | Ex nC |  | Ex nR |  | Ex o |  |  |

Temperature Class/Code

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | T6 |  | T5 |  | T4 |  | Other |
|  | T3 |  | T2 |  | T1 |  |  |

Ambient Temperature

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Ta=-20°C to +40°C | Ta= | °C to       °C | Other |

**IECEx/ATEX:**

Ex protection

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Ex i |  | Ex d |  | Ex t |  | Ex nA |  | Other |
|  | Ex e |  | Ex nC |  | Ex nR |  | Ex o |  |  |

Equipment Protection Level (EPL)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Ga |  | Gb |  | Gc |
|  | Da |  | Db |  | Dc |
|  | Ma |  | Mb |

Groups

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| IIC  IIB+H2  IIB  IIA | Groups | IIIC  IIIB  IIIA | Groups | I | Groups |

Temperature Class/Code

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | T6 |  | T5 |  | T4 |  | Other |
|  | T3 |  | T2 |  | T1 |  |  |

Ambient Temperature

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Ta=-20°C to +40°C | Ta= | °C to       °C | Other |

Enclosure Type/IP

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Type 3 |  | Type 4X |  | Type 12 |  | Other |
|  | Type 4 |  | Type 6 |  |  |  | IP |

**4. PRODUCT INFORMATION**

| **Model Number** | **Brief Description** | **Electrical Ratings**  **(Voltage, Amps or watts or VA, HZ, Phases)** |
| --- | --- | --- |
|  |  |  |
|  |  |  |
|  |  |  |

**Instructions**:

**Model Numbers** - Include all models to be covered; it is permissible to use general nomenclature for models that are similar, but differ cosmetically or are in low voltage circuitry. (Example. Model 1996XXY, where X is any letter A-Z, and Y is any number 0 to 9.)

**Product Description** - Describe product briefly but completely, including function of product, intended end use/application, environment for use (outside, outside protected, inside), permanently connected vs. cord connected, etc. Include all options and all accessories available.

**Electrical Rating** - Ratings for each model. (Use additional pages if necessary.)

**5. CRITICAL COMPONENTS USED**

For your information, please note that critical components used in the construction of the product(s) should be certified by a Nationally accredited certification body, and also suitable for the application (i.e. the intended use of the product). If a component is not certified, additional testing may be required at the time of product evaluation to determine compliance and acceptability.

**6. QUALITY SYSTEM AT MANUFACTURING FACILITY/FACTORY**

Note: Applies to new applicants only

1. Is there a formal, documented and implemented quality system at the factory?

Yes  No

1. If yes, does the quality system meet the requirements of ISO 9001-2001?

Yes  No

1. If yes, is the quality system currently certified/registered?

Yes  No

1. If yes, provide copy of the Certificate, together with a description of the scope of certification.

**7. DOCUMENTS REQUIRED**

In order to expedite the quotation process, please provide the following documents/information:

1. A basic block diagram or general arrangement drawing
2. Sales literature
3. Copy of ISO9001 Certificate as per 7(d) above
4. Existing certificates or reports from other agencies