File Reference: _____(For Labour Department)

Application Form
for Submission of Equipment for Approval under the Factories and Industrial Undertakings Ordinance and its subsidiary regulations

Please refer to the "Information sheet for submission of equipment for approval under the Factories and Industrial Undertakings Ordinance and its subsidiary regulations"(IS-PPE) before completing this application form. The completed "Application Form" (AF-PPE) and Associated Documents should be submitted or mailed to:

Occupational Hygiene Division (Headquarters), Labour Department,
15/F., Harbour Building, 38 Pier Road, Central, Hong Kong

or emailed to ohd-hq@labour.gov.hk

(Use ONE application form for ONE equipment model)

(Please "√" one of the ☐ below for your application as appropriate)

☐ **Respiratory protective equipment under Factories and Industrial Undertakings (Asbestos) Regulation;**

☐ **Ear protector under Factories and Industrial Undertakings (Noise at Work) Regulation; or**

☐ **Breathing apparatus under Factories and Industrial Undertakings (Confined Spaces) Regulation.**

Name and Address of Manufacturer: _____

_____

Name and Address of Authorized Local Agent (if applicable): _____

_____

Contact of Applicant

Name of the Authorized Representative:_____ (**Position:** _____)

Tel.: _____ **Fax:** _____ **Email:** _____

Name of Technical Staff Member[1]: _____ (**Position:** _____)

Tel.: _____ **Fax:** _____ **Email:** _____

Signature: _____ **Full Name of Authorized Representative :** _____ **Date of Application:** _____	_____ **Company Chop of the Applicant** (with company name clearly shown)

[1] If Technical Staff Member is also the Authorized Representative of this application, please fill in "as above". P.T.O.

Applicants and their employees, agents and contractors must not offer an advantage as defined in the Prevention of Bribery Ordinance (Cap. 201) to any government officer in connection with their applications or while having dealings of any kind with government departments.

1. Unique Identification of the Product:	Product Trade Name : _____ _____ Product Model Number(s): _____ _____ Others, please specify: _____	
	Documents submitted to Labour Department	
2. Authorization Letter to appoint Authorized Local Agent:		Yes
3. Business Registration Certificate	Authorized Local Agent	No
4. Product Information:	➢ Manufacturer's specification ➢ Performance data sheet ➢ Operation and maintenance manual ➢ Assembly manual ➢ Catalogue ➢ User instructions ➢ Others, please specify:	No No No No No No No
5. Quality Assurance Documents of Manufacturing (e.g. ISO 9001)**:**	Please specify:	No
6. Certificate / Report / Declaration of the Product:	➢ EC-Type Examination Certificate ➢ EU-Type Examination Certificate ➢ EU Declaration of Conformity ➢ Certificate of Approval issued by NIOSH ➢ Test Report issued by an accredited testing body, where appropriate ➢ Others, please specify:	No No No No No No

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