



EMC & RF Testing Application form

Date: _____

Company: _____ VAT Number: _____
 Address line 1: _____ Product Name: _____
 Address line 2: _____ Description: _____
 Code: _____
 Contact person: _____ Telephone: _____ e-mail: _____

PRODUCT DETAILS

Power requirements? 2 Wire AC 3 Wire AC DC Batteries Test report? _____ Certificate? _____

Estimated dimensions and weight of equipment to be tested? _____

Number of people present during testing? _____

PRODUCT CLASSIFICATION

IT Control / Lab Telecommunications Industrial Mining Rail Other

If other please specify: _____

EMC TESTING Do you require EMC testing? _____

RF TESTING Do you require RF testing? _____

SIGFOX READY Do you require Sigfox Ready certification? _____

UPLINK: TX EIRP / Radiation pattern

DOWNLINK: RX Radiated sensitivity

Please indicate which RF services your device uses:

WiFi Zigbee Bluetooth GSM / GPRS 3G NFC (13.56MHz) GPS SRD <1GHz SRD >1GHz

Other If other please specify: _____

Do you want us to do an ICASA submission on your behalf? _____

Name:

Surname:

Signature:

I have read and agree to the stated [Terms & Conditions](#)

Please send us a product brochure or picture of the device to be tested along with the signed application form.