|  |  |
| --- | --- |
| Logo  Description automatically generated | **Request For Quotation (RFQ)** |
| **Name of Organisation** |       |
| **Address** |       |
| **Contact Name** |       | **Function**       |
| **Telephone number** |       | **Email**        |
| **Direct dial number** |       | **Web address**       |
| **STANDARD / SCHEME *(please indicate):*** |
| UKCA marking for Construction Products**[[1]](#footnote-1)** |[ ]  NAWIR and/or MIR**[[2]](#footnote-2)** |[ ]  OTHER: (please use standard number)      |
| **Please contact** **medical.devices@nsai.ie** **for request for quotation forms for the following:** |
| * ISO 13485 Medical Devices
* MDSAP
 | * 93/42/EEC Medical devices
* 90/385/EEC Active implantable medical devices
* 98/79/EC In vitro diagnostic medical devices
 |
| **Information for Quotation purposes. ALL FIELDS BELOW MUST BE ADDRESSED** |
| Transfer from other accredited Certification Body | Yes |[ ]  No |[ ]  If yes, we will require a copy of your current certificate of registration with this form |
| Reason for Transfer: |  |
| Last audit date (for transfer requests only): |  |
| Integrated Management System | Yes |[ ]  No |[ ]  Level of integration *(please specify %)*: |  |
| Nature of Business / Scope of Certification |       |
| If you outsource any process(s) please specify |       |
| Company products / services **excluded** from application if any |       |
| Confirmation that this application has **not** been lodged with any other approved body |       |
| Location(s) for Assessment: (an additional page may be used)***If more than one location a list of ALL locations, including staff numbers at each, is mandatory – PLEASE USE ADDITIONAL PAGE IF NECESSARY*** |       |
| Name of Consultant (if any) |       |
| Additional information:       | Date request submitted to NSAI Certification UK Ltd:       |
| ***Email completed forms to:*** ***r****obin.byrne@nsai.ie* |
| OFFICE USE ONLY | IAF:       |  |

1. ***Requests must be accompanied with a list of relevant standards*** [↑](#footnote-ref-1)
2. ***Requests must be accompanied with copies of the type approvals*** [↑](#footnote-ref-2)