



## Application

**Authorization for labelling with INSPECTED QUALITY  
for disinfectant-resistant upholstery fabrics**





## Applicant

Company	
Street No.	
ZIP Code	
City	
State	
Country	
Phone/Fax	
E-mail	
www	

## Responsible person

Name	
Phone/Fax	
E-mail	

By placing an order for certification, I agree to the storage and use of the personal and company-related data.

For the technical information that is disclosed to the OETI for verification and certification, the confidentiality agreement in accordance with our terms and conditions.

[https://www.oeti.biz/oeti-de-wAssets/docs/Downloads-fuer-Seiten/agb/EN/AGBs\\_EN\\_20210701-1.pdf](https://www.oeti.biz/oeti-de-wAssets/docs/Downloads-fuer-Seiten/agb/EN/AGBs_EN_20210701-1.pdf)



You are applying for the labelling authorization for	
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First authorization for labelling	
Re-registration authorization for labelling	

When applying for a re-authorization of the labelling, please indicate the existing number of the labelling authorization.

Number of the labelling authorization	
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### Applied disinfecting agent groups or disinfecting agents

Disinfecting agent groups	
Alcohols	
Aldehydes	
Quaternary ammonium compounds	
Oxygen disinfecting agents	
Alkylamines	
.....	



Disinfecting agent tradename

### Declaration of commitment

By signing this application with an authorised signature, the applicant is responsible for the data given and is obliged to inform the testing institute of any alterations immediately.

I agree that I will be named in the list of references on the OETI website once the labelling authorization has been granted. (The naming takes place with the company name and a link to their website)

yes  no

Date	
Sign	