



FIM RACING HOMOLOGATION PROGRAMME

FIM RACING HOMOLOGATION PROGRAMME FOR LIGHT PANELS (FRHPLP)

FRHPIp-01 Application Form - Update

June 2021



I. TESTING LABORATORY

Once the application is completed and if further testing is required, the FIM will request the Applicant to send free of charge new light panel sample to and limited to the following Testing Laboratory:

Federal Institute of Metrology METAS

Laboratory Optics

Lindenweg 50,

CH-3003 Bern-Wabern

Phone +41 58 387 04 90

Contact: fabio.rinderer@metas.ch

Website: www.metas.ch

II. APPLICATION FORM (UPDATE) / FRHPIp-01

To be filled in for each Light panel model and returned by e-mail to frhp@fim.ch

| (1) Applicant's information | |
|--|--|
| (1.1) Name | |
| (1.2) Address (road, city, ZIP code, country) | |
| (1.3) E-mail | |
| (1.4) Phone | |
| (1.5) Commercial trade mark(s) | |
| (1.6) Contact name | |
| (1.7) VAT number/Legal registration number | |
| (2) Manufacturer's information | |
| (2.1) Name | |
| (2.2) Address (road, city, ZIP code, country) | |
| (2.3) E-mail | |
| (2.4) Phone | |
| (2.5) Contact name | |
| (3) History (to be filled by FIM) | |
| (3.1) Application Form (homologation) of reference | |

| (4) Light panel Information | |
|---|--|
| (3.1) Commercial name(s) | |
| (3.2) Date of manufacture (mm, yyyy) | |
| (3.3) Wished amount of Homologation labels (per year) | |

| (5) Reason for update | |
|---|--|
| (5.1) Update <input type="radio"/> trademark(s) <input type="radio"/> commercial name(s) <input type="radio"/> guide lines <input type="radio"/> materials <input type="radio"/> others (please specify: _____ _____) | |

| (6) Tests requested (to be filled in by FIM) | |
|---|--|
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| (7) Documents to be mandatorily annexed (if they differ) | |
|---|------------------------------|
| | (7.1) Relevant communication |
| | (7.2) Relevant photos |

By signing this Application Form (update), the undersigned Applicant accepts all the conditions and clauses of this FIM Homologation Manual and attests to the accuracy of the information provided and that the Samples submitted are fully consistent with the indications set forth on the Application Form.

Applicant's representative

 Name Signature

On ___/___/___