



FIM RACING HOMOLOGATION PROGRAMME

FIM RACING HOMOLOGATION PROGRAMME FOR PAINTS (FRHPpa)

FRHPpa-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 and virgin Paint Samples to and limited to the following Testing Laboratory:

	GFC Chimica s.r.l Via Marconi, 73 44100 Ferrara Italy Tel. +39 0532.773742
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II. APPLICATION FORM (UPDATE) / FRHPpa-01

To be filled in for each Paint 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	

(Please indicate items for each Paint Type if they differ)

(4) Paint Model	
(4.1) Commercial name(s)	
(4.2) Date of manufacture (mm, yyyy)	
(4.3) Available colour (in addition to white)	
(4.4) Available batch size	
(4.5) 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)	
Rate of consumption	
Drying time (No-Pick-Up Time)	
Luminance coefficient (Qd)	
Colour chromaticity	
Skid resistance	

(7) Documents to be mandatorily annexed (for each Paint type if they differ)	
	(7.1) Relevant communication
	(7.2) Relevant photos (if applicable)

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

Applicant's representative

Name

Signature

On ___/___/___