



NO DOUBLE SELLING DECLARATION

Name:

Address as in MTT:

RA ID:

Product:

Tel./E-Mail/Fax:

I, _____, hereby declare that the product above is in compliance with the requirements of the Certification and Auditing Rules, Annex AR10 in regard to double selling.

We hereby understand that double selling is not permitted and therefore declare we are not double selling the certified volume of this product.

Signature of representative of the organization requesting certification:

By: _____

Date and place signed: