

Send Back to national CETOP Member Association

Programme for Approval (name)

Name of Organisation

Full Address

Contact Name

Position Tel No

E-mail

Web

I have thoroughly read the CETOP Guideline Documents & Recommendations and I am fully aware of the necessary organisational commitment and equipment base required for Centre Approval.

I am aware of the associated costs for centre visits and would like you to arrange a visit to our organisation to carry out a Centre Approval investigation.

We will forward to the national CETOP Member Association:

Purchase order

Date

Signed

For official use by CETOP Member Association staff

Date Application Received

Actioned by

Name of ET Member carrying out Centre Approval Visit

Visit Date Planned

Outcome of visit

Financial Transactions completed

Date completed

Any other info: