

SUPPLIER DECLARATION OF CONFORMITY (SDoC)

In accordance with ISO/IEC 17050-1:2004

SDoC Identification Number:

Issuer details

Name (of New Zealand manufacturer or importer): <input type="text" value="Transformer Specialties Ltd"/>	Contact Address: <input type="text" value="6 Grivelle Street
Kumeu, Auckland 0841
New Zealand"/>
Telephone: <input type="text" value="09 412 7280"/>	
New Zealand Company No. (if applicable): <input type="text" value="28311"/>	
Email Address: <input type="text" value="admin@tsltransformers.co.nz"/>	

Medium Risk Article – Details (Product name, type, rating, brand, model, batch numbers, and serial numbers, as applicable):

Product code	PN35
Description	Enclosed IP40, single phase, isolating transformer
Specification	400vac / 115vac or 230vac, 50~60Hz
Power rating	400V.A
Brand	TSLtransformers

The Medium Risk Article listed above, fully complies:

With cited standard(s), as listed:	
Standard number and issue year: <input type="text" value="ASNZS 61558.1:2008"/>	Standard number and issue year: <input type="text" value="ASNZS 61558.2.4:2009"/>
Edition / Amendment status: <input type="text" value="Ed 2.0"/>	Edition / Amendment status: <input type="text" value="Ed 2.0"/>
Standard title: <input type="text" value="Safety of power transformers, power supply units and similar.
Part 1. General requirements and tests"/>	Standard title: <input type="text" value="Part 2. Particular requirements for isolating transformers for general use."/>
AS/NZS ZZ modified Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	AS/NZS ZZ modified Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
OR Complies with the Conformity Cooperation Agreement ⁵ Yes <input type="checkbox"/> No <input type="checkbox"/>	

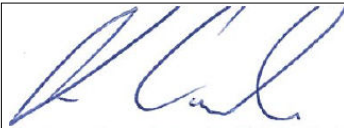

Names and addresses of any testing organisation or body

Name(s): <input type="text" value="Transformer Specialties Ltd"/>	Address(es): <input type="text" value="6 Grivelle Street
Kumeu, Auckland 0841
New Zealand"/>
Name(s): <input type="text"/>	Address(es): <input type="text"/>

Reference to relevant test reports/certification and the issue date that show how compliance is achieved

Standard(s) or document(s) used, to show how compliance with cited standard is achieved: <input type="text" value="ASNZS61558 (Part 1 & Part 2.4)"/>	Report Certification or Document reference N°(s): <input type="text" value="Redacted from ASNZS 3108
Redacted from ASNZS 61558.1
Redacted from ASNZS 61558.2
Last verified"/>	Issue dates(s): <input type="text" value="01/07/2005
01/07/2008
01/11/2012
01/07/2015"/>
Reference to any management quality system involved: <input type="text" value="Proprietary quality assurance system"/>		
Additional information: <input type="text" value="100% of batch routine tests performed"/>		

Declaration (signed for and on behalf of)

Name and position as authorized by the issuer: <input type="text" value="Karl Canham, Design Engineer"/>	Signature: 
Issuer Identification (as affixed to the article): 	Date: <input type="text" value="01.07.2015"/>