

**SUITABILITY OF NON METALLIC PRODUCTS FOR USE IN CONTACT WITH WATER INTENDED FOR HUMAN CONSUMPTION WITH REGARD TO THEIR EFFECT ON THE QUALITY OF THE WATER BS6920:2014**

**APPLICATION FORM**

You should complete this form and send it to the Materials Department, at the address above, together with the appropriate samples of each product that you want testing (see the accompanying leaflet for full details).

ITS Testing Services (UK) Ltd are hereby requested to test the product(s) detailed overleaf in accordance with the Water Regulations Advisory Scheme Tests of Effect on Water Quality based on the methods described in British Standards Institution BS6920: Parts 1 & 2: 2014 and Part 3: 2014.

<b>NAME</b>			
<b>NAME</b>		<b>POSITION</b>	
<b>COMPANY NAME</b>		<b>SIGNED</b>	
<b>PURCHASE ORDER NUMBER</b>		<b>DATE</b>	

**SECTION 1**

Please give your contact details below. The final REPORT will bear these details unless you instruct us to the contrary (see Section 8)

<b>ADDRESS</b>	
<b>TELEPHONE NO</b>	<b>EMAIL</b>
<b>FAX NO</b>	
<b>ADDRESS TO WHICH THE INVOICE SHOULD BE SENT IF DIFFERENT FROM ABOVE</b>	
<b>ADDRESS</b>	<b>EMAIL</b>

**FOR ADDRESS TO WHICH THE SAMPLES SHOULD BE SENT (SEE TOP RIGHT ABOVE)**



## SECTION 2 Product details

Please complete all columns in either Table A or B (as appropriate). Complete Table A for 'WRAS Approval of Material Only' OR complete Table B for 'WRAS Approval of Components'. This information is required for the final report (continue on separate sheets if necessary).

N.B. For coatings specify all relevant primers and undercoats.

### **A. For WRAS Approval of MATERIAL only** (For example - plastic/elastomeric materials, factory applied coatings, site applied coatings/sealants etc.)

GENERAL NATURE (e.g. PP, PPO etc)	MATERIAL FULL TRADE NAME (including grade &/or colour if appropriate)	MATERIAL MANUFACTURER name	MATERIAL MANUFACTURER address	BATCH (LOT) NUMBER	DATE OF MANUFACTURE (DD/MM/YY) (Must be less than 12 months old)

**B. For WRAS Approval of COMPONENTS (finished articles) only** (For example - Pipes, Hoses, O-rings, Seals, Gaskets, Washers etc.)

N.B. For multi-layered hoses, please include details for ALL layers of the hose

MATERIAL GENERAL NATURE (e.g. PP, PPO etc)	MATERIAL FULL TRADE NAME (including grade &/or colour if appropriate)	MATERIAL MANUFACTURER name & address	COMPONENT FULL TRADE NAME	COMPONENT MANUFACTURER name & address	BATCH (LOT) NUMBER	DATE OF MANUFACTURE (DD/MM/YY) (Must be less than 12 months old)

## SECTION 3: TESTS REQUIRED

Please tick (✓) below the test(s) you require

		<b>✓</b>
<b>A</b>	Full BS6920 Test for WRAS Approval (BS6920: Parts 1 & 2: 2014) <b>Complete test for use with cold water only</b>	
<b>B</b>	Full BS6920 Test for WRAS Approval (BS6920: Parts 1, 2 & 3: 2014) <b>Complete test for use with hot &amp; cold water only (30°C - 85°C)</b>  <i>Please provide exact test temperature.....</i>	
<b>C</b>	Factory applied coating	
<b>D</b>	Site Applied Products (see 5.10 of brochure)	
<b>E</b>	Audit Tests as per requirements of WRAS letter (see Section 7 of this form).	
<b>F</b>	Any individual tests e.g. Odour/Flavour only – please list below  (N.B. we must always carry out a cytotoxicity test <b>before</b> an Odour & Flavour)	

Notes.

1. In exceptional circumstances some of the above tests may be carried out under UKAS accreditation number 0677.

**Please give below any specific testing instructions**

E.g. if tests are to be conducted in any particular order

**SECTION 4: To be completed by ALL applicants (please delete as appropriate)**

<b>1</b>	Have any of the products, or any modification of them, been previously submitted to this, or any other laboratory, for Tests of Effect on Water Quality? If so, please give details.	<b>YES/NO</b>
<b>2</b>	Are any of the products submitted intended for end user application on site?  If “yes” please ensure that you send sufficient of each product plus full instructions and Data Sheets, including details of the curing conditions applicable.	<b>YES/NO</b>
<b>3</b>	Are any of the products submitted to be examined for use in contact with hot potable (drinking) water?  If “yes” please specify the maximum service temperature for the product(s) ..... <sup>o</sup> C	<b>YES/NO</b>
<b>4</b>	Toxicity Has the product or any ingredient used in it been submitted to any organisation for toxicological evaluation/extractability/biodeterioration tests?  If “yes” please submit details of the tests together with copies of the results obtained if possible	<b>YES/NO</b>
<b>5</b>	Biocides : Does the product contain a known biocide?  If “yes” you will need to submit further details – we will contact you for these	<b>YES/NO</b>
<b>6</b>	Does the product contain any recycled ingredients?	<b>YES/NO</b>
<b>7</b>	Does the product contain coal tar or the antioxidant Santonox?	<b>YES/NO</b>
<b>8</b>	What is the intended use of the product(s)	
<b>9</b>	Where is this product(s) intended to be used? Inside or outside the property boundary?	
<b>10</b>	What was the method of production of the test piece (e.g. injection moulding, extrusion etc)?	
<b>11</b>	Describe the sampling procedure used to obtain the test sample (E.g. taken from production, random etc.)	

## SECTION 5: for **Elastomeric** products only

1.	Please state the shore hardness of the rubber product(s)	
2.	Are the vulcanisation/curing conditions used in the preparation of this identical to those to be used in production samples?	<b>YES/NO</b>
3.	Has a mould release agent been used?  If "yes" please specify the agent used OR confirm that this release agent is the only release agent that will be used for production samples.	<b>YES/NO</b>
4.	Is the approval intended to cover a range of similar, but different sized items or hardnesses?  If YES, please give these details in the table in Section 2 (or separately)	<b>YES/NO</b>

## SECTION 6: Chemical composition

Unless this information is proprietary, please give details of the chemical composition of each material specified in Section 2:  
N.B. This information will help us to identify any potential problems in testing your product(s) and also in the interpretation of your results.

ALL INFORMATION PROVIDED WILL BE TREATED IN THE **STRICTEST CONFIDENCE** and can be supplied to us separately if necessary.

<b>INGREDIENT</b>	<b>%</b>

## SECTION 7: Audit tests only (for re-approval of the product after 5 years)

1. If possible, please specify which laboratory originally tested your product(s), give the report/laboratory reference and the date of the report – this information is required for the final report

TEST LABORATORY	REPORT REFERENCE	REPORT DATE

2. Please ensure you have enclosed a copy of the letter from WRAS specifying the tests required.

## SECTION 8: Reporting instructions

It is company policy to send reports in **electronic format**.

If you wish to receive an additional hard copy, regretfully we would have to make an additional administrative charge of £100

Would you like to receive an additional HARD copy of the report?	YES/NO
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## SECTION 9: WRAS Materials approval

If test results are satisfactory, you should forward a copy of the report to WRAS at [hannah.lewis@WRAS.co.uk](mailto:hannah.lewis@WRAS.co.uk)

WRAS would need ALL of the following to be able to give WRAS approval for your product(s) -

1. a satisfactory test report
2. a completed WRAS M2 form
3. payment of the WRAS proforma invoice (sent to you by WRAS when they receive 1. & 2.)

**How can we help you?**

Would you like us to send you a copy of the WRAS M2 form?	YES/NO
Would you like us to send a copy of the satisfactory report directly to WRAS on your behalf?	YES/NO
Would you like us to send the copy of your completed M2 form to WRAS at the same time as we send the satisfactory report?	YES/NO

NB. If you are in any doubt about sample requirements or completion of this Application Form please contact us BEFORE sending us your test sample(s). Contact us on (Tel) +44(0)1932 732100 or email [hannah.todd@intertek.com](mailto:hannah.todd@intertek.com) or [Samuel.clarke@intertek.com](mailto:Samuel.clarke@intertek.com)