

**Request to evaluate Personal Protective Equipment (PPE) against cut and stab in  
relation to the PPE-Regulation**

**DGUV Test  
Prüf- und Zertifizierungsstelle  
Nahrungsmittel und Verpackung  
Fachbereich Nahrungsmittel  
Lortzingstraße 2  
D-55127 Mainz**

1. Information on the applicant	
Company, address:	Separate billing address (if applicable):
Contact Person: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs Phone: E-Mail:	Legal representative (authorised signatory): <input type="checkbox"/> Mr <input type="checkbox"/> Mrs Phone: E-Mail:
Email address for the invoice: <input type="checkbox"/> contact person <span style="margin-left: 150px;"><input type="checkbox"/> Legal representative</span> <input type="checkbox"/> other email adress:	
VAT ID number (for invoice):	
Manufacturer (certificate holder as indicated on the nameplate):	
Production site, address (where and by whom the product is produced):	

<b>2. Information on the product to be tested</b>	
We intend to carry out the assessment of the following product (in the case of different assessment subjects, please use separate application forms):	
Name of the product:	
Name of the used ring mesh:	
The product to be tested is one (multiple nominations possible):	
<input type="checkbox"/> Glove without cuff <input type="checkbox"/> Glove with cuff in length: <input type="checkbox"/> Glove with arm protector	<input type="checkbox"/> The glove offers protection against stabs and cuts by hand knives (according to DIN EN 1082-1) <input type="checkbox"/> The glove offers additional protection against driven knives (according to DIN EN 14328).
<input type="checkbox"/> Apron <input type="checkbox"/> Apron with leg slit	<input type="checkbox"/> The apron offers protection against stabs and cuts in which the knife is guided against the body (performance level 2, according to DIN EN ISO 13998). <input type="checkbox"/> The apron offers protection against stabs and cuts, but not if the knife is guided against the body (performance level 1, according to DIN EN ISO 13998).
<input type="checkbox"/> Tunique <input type="checkbox"/> Single-sleeved <input type="checkbox"/> Two sleeves <input type="checkbox"/> with leg slit	<input type="checkbox"/> The apron offers protection against stabs and cuts in which the knife is guided against the body (performance level 2, according to DIN EN ISO 13998). <input type="checkbox"/> The apron offers protection against stabs and cuts, but not if the knife is guided against the body (performance level 1, according to DIN EN ISO 13998). <input type="checkbox"/> The sleeve is made of performance level 2 material <input type="checkbox"/> The sleeve is made of performance level 1 material
<input type="checkbox"/> no product, only ring mesh, which is to be tested for the requirements for protective clothing performance class 2, according to DIN EN ISO 13998 <input type="checkbox"/> no product, only ring mesh, which is to be tested for the requirements for protective clothing performance class 1, according to DIN EN ISO 13998. <input type="checkbox"/> no product, only ring mesh, which is to be tested for the requirements for gloves according to DIN EN 1082-1	
<input type="checkbox"/> Special Form:	

<b>3. Type(s), use additional sheet if necessary</b>		
	<b>type</b> (exact designation as shown on the nameplate)	<b>variant</b> (A short description of the item, e.g. "glove size brown, with 9 cm cuff" or "bolero with one sleeve size 100 x 60")
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<b>Other Remarks:</b>		

**4. Other information: Has the product already been tested by our office?**

No  Yes, number of the previous certificate:

If yes, are there any deviations or changes to the product compared to the previous certificate?

No  Yes, the following changes:

- 1.
- 2.
- 3.

Has the ring mesh already been used in another tested product?

No  Yes, certificate number:

Are there different fastening systems?

No  Yes, names of the systems:

Other remarks:

**5. Declaration by the applicant**

A brief description of the design is attached.

The assessment of the product or parts thereof has been carried out by/for other bodies (tick as appropriate).

not yet applied

already performed by:

Place, date

\_\_\_\_\_ This document is valid without signature.

Attachments: Brief description