

INTERNATIONAL MARINE CERTIFICATION INSTITUTE

Rue Abbé Cuypers 3, B-1040 BRUXELLES, BELGIQUE
 tel: +32-2-741-6836, fax: +32-2-741-2418, eMail: info@imci.org, Internet: http://www.imci.org



CERTIFICATION APPLICATION
SMALL CRAFT - ELECTRICALLY OPERATED BILGE PUMPS
Ref.: ISO 8849

FOR IMCI USE ONLY
Certificate No.: P

Manufacturer: _____
 Address: _____
 ZIP Code: _____
 City: _____
 Country: _____
 VAT #: _____
 Signatory, Name: _____
 Signatory, Title: _____
 Phone: _____
 Fax: _____
 Email: _____
 WWW: _____
 Model Name: _____
 Head of Engineering: _____

Selected test data	Clause	Requirements	Unit	As tested
1 Nominal voltage	3.3	6 / 12 / 24 DC	[V]	
2 Designed for continuous operation	4.1	[Yes ?]		Yes
3 Ignition protected in accordance with ISO 8846 (only for automatic operation)	4.2	[Yes / NA ?]		
4 Water flow at pump	4.3	at 0 kPa	[l / min.]	
		at 10 kPa	[l / min.]	
		at 20 kPa	[l / min.]	
5 Means for fastening to boat	4.4	[Yes ?]		Yes
6 Construction material suitable for contact with sea-water	4.5	[Yes ?]		Yes
7 Strainer means at inlet (only for submersible pumps)	4.6	[Yes / NA ?]		
8 Installation and operating instructions	4.7	[Yes ?]		Yes
9 Dry operation for more than 7 hours	4.8	[Yes ?]		Yes
10 Insulated two- or three-wire type (only for manual or automatic operation)	5.1	[Yes / NA ?]		
11 Stranded copper conductors, meeting ISO 10133	5.2	[Yes ?]		Yes
12 Watertight electrical connections (only for submersible pumps)	5.3	[Yes / NA ?]		
13 Provision for bonding conductor connections	5.4	[Yes / NA ?]		
14 Protection against continuously locked rotor	5.5	[Yes ?]		Yes
15 Withstand 500 V DC for 1 min. with leakage < 1 mA	5.6	[Yes ?]		Yes
16 Manual override switch (only for automatic pumps)	5.7	[Yes / NA ?]		
17 Marking as required	6	[Yes ?]		Yes
18 Name of test laboratory	_____			
19 Reference number of test report	_____			
18 Comments:	_____			

I declare under our sole responsibility that the above product(s) to which this declaration relates is in conformity with ISO 8849. This application has not been lodged with any other notified body.

Date and Signature: _____

I declare under our sole responsibility that the above product(s) has (have) been developed without my involvement. The content of this form has been checked.

Stamp, Date and Signature of Inspector: _____

Stamp, Date and Signature of Certification Manager: _____