## INTERNATIONAL MARINE CERTIFICATION INSTITUTE

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CERTIFICATION APPLICATION
SMALL CRAFT - CABLE AND PULLEY SYSTEMS
Ref.: ISO 8847

FOR IMCI USE ONLY				
Certificate No.:	WRPS			

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

Selected test data	Clause	Requirements	As tested
1 All components are of sufficient strength to transmit either the tangential force of 450 N on			
the rim of the wheel or the maximum torque necessary to steer the rudder	5.1	[Yes ?]	YES
2 Cable load less than 25 % of cable breaking load	5.2	[Yes ?]	YES
3 Groove radius at least 5 * wire rope diameter	5.2	[Yes ?]	YES
4 Cable of flexible construction	5.3	[Yes ?]	YES
5 Cable is suitable for its intended application	5.3	[Yes ?]	YES
6 Wire-rope characteristics meet ISO 2408	5.3	[Yes ?]	YES
7 Tension is adjustable	5.3	[Yes ?]	YES
8 Cable aligned with grooves when leaving steering arm	5.3	[Yes ?]	YES
9 Cable termination meets requirements	5.3	[Yes ?]	YES
10 Pulley sheave at least 16 * wire diameter	5.4	[Yes ?]	YES
11 Pulleys fitted properly	5.4	[Yes ?]	YES
12 Conduit fitted properly	5.5	[Yes ?]	YES
13 Steering-wheel installed on a fixed shaft	5.6	[Yes ?]	YES
14 System meets axial load test	5.6.1	[Yes ?]	YES
15 System meets tangential load test	5.6.2	[Yes ?]	YES
16 Gear properly marked	6	[Yes ?]	YES
17 Proper information is in Owner's manual provided	8	[Yes ?]	YES
18 Installer's manual is provided	9	[Yes ?]	YES
19 Name of test laboratory			
20 Reference number of test report			
21 Comments:			

As the manufacturer or his authorised representative, I declare under our sole responsibility that the above product(s) to which this declaration relates is in conformity with ISO 8847. This application has not been lodged with any other notified body.

Date	and	Signature
Duto	and	Oignature

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: