



12216_2020 Windows, Portlights, Hatches, Deadlights and Doors en240408

CERTIFICATION APPLICATION
WINDOWS, PORTLIGHTS, HATCHES, DEADLIGHTS AND DOORS
Ref.: ISO 12216:2020

FOR IMCI / IMCI (UK) USE ONLY
Certificate No.:

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

This application is valid for:		Indicate
Directive 2013/53/EU (RCD II) related to CE marking for EU.	[Yes, No]	
Recreational Craft Regulation (RCR) related to UKCA marking for United Kingdom	[Yes, No]	

Selected test data	Clause	Requirements	Unit	As tested
1 Used for boat type (Power / Sail / Sail Multi / All)		[P / S / SMu / A ?]		
2 Boat design category	3.92	[A / B / C / D ?]		
3 Plate location area on boat	3.5	[I / IIa / IIb / III / IV ?]		
4 If area III: location at the front or side	Table 8	[front / side / any?]		
5 Frame (Semi Fixed / Simply Supported)	3.3	[SF / SS ?]		
6 Plate material	5			
7 If laminated glass: thickness of interlayer(s)			[mm]	
8 If laminated glass: interlayer shear modulus at 25°C for 60 s duration.			G [N/mm ²]	
9 If laminated glass: type of interlayer (e.g. PVB, EVB, SGA etc.). Note: submit technical data sheet				
10 If laminate glass: thickness of each glass layers (without interlayer, e.g. 8+10, 12+12 etc.)				
11 Unsupported plate: long dimension (a)	Annex C		[mm]	
12 Unsupported plate: short dimension (b)	Annex C		[mm]	
13 If circular: unsupported plate diameter dimension (d)	Annex C		[mm]	
14 Particular (Front / Side / Any)	7	[F / S / A ?]		
15 Plate maximum height (c), if curved	7		[mm]	
16 Plate thickness (t)	7		[mm]	
17 Glass qualified as "High-impact-resistance". Note: submit technical data sheet and/or test report.	6.3.1.2 and Annex E	[Yes / NA ?]		
18 Test for pressure & watertightness passed and suitable for area?	Annex D.2	[I / II / III / NA ?]		
19 Test or calculation for mechanical links passed?	Annex D.3	[Yes / NA ?]		
20 Test for gluing passed?	Annex D.4	[Yes / NA ?]		
21 Appliance for area IIa: passed unintentional stepping test?	6.3.2.2.1	[Yes / NA ?]		
22 Appliance for area IIa: passed rope jamming test?	6.3.2.2.2	[Yes / NA ?]		
23 Appliance for area IIa: passed hatch and hinge strength test?	6.3.2.2.3	[Yes / NA ?]		

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Manufacturer: _____

Model Name: _____

30 Specify type of laboratory: in-house or/and external ? _____

31 Provide a calibration report for the following and/or other measuring instruments used, if applicable:

32 Pressure gauge _____

33 Other measurement device(s) _____

34 Name of test laboratory _____

35 Reference number of test report _____

36 Date of the test report _____

37 Test report: copy submitted with application? _____

[Yes]

38 Strength calculation submitted (see IMCI ISO 12216 calculation tool)? _____

[Yes]

39 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 12216. This application has not been lodged with any other notified body and/or conformity assessment body.

Date (yymmdd) and Signature: _____

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Manufacturer: _____

Model Name: _____

Model Year: _____

This page is only for IMCI / IMCI (UK) office use

IMCI / IMCI (UK) Inspector (if applicable)

I declare under our sole responsibility that I have not been active for the manufacturer in design, construction, marketing or other activities. The content of these forms have been checked.

Evaluation by Inspector: Stamp, Clear Name, Signature and Date: _____

Comments on Evaluation by Inspector: _____

IMCI / IMCI (UK) office

Application review

Application accepted for IMCI: clear name, date (yymmdd) [Yes, No] _____

Application accepted for IMCI (UK): clear name, date (yymmdd) [Yes, No] _____

Comments to application or reason(s) if refused: _____

Evaluation

Evaluation by office (if applicable): Clear Name, Signature and Date (yymmdd): _____

Comments on Evaluation by office: _____

Review

Review by office: Clear Name, Signature and Date (yymmdd): _____

Comments on Review by office: _____

The certification decision is made by signing and dating the corresponding IMCI certificate