

## Supplier Declaration of Compliance

(In accordance with electricity Act Cap 180)

THIS COMPLETED FORMS REMAIN THE SUPPLIER AS PART OF THE DOCUMENTATION REQUIRED FOR THE "COMPLIANCE FOLDER"

### Suppliers Details

Name (of manufacturer, importer or agent)

Address

Fiji Company Number(if applicable)	Telephone                      Fax

### Product Details

Product name, type, model and serial numbers (if applicable):


Documents used as the basis for compliance with Clause 45 of the Subsidiary Legislation of Electricity Act Cap .180.


### Declaration

I hereby declare that the above specified fitting electrical appliances/equipment comply with the requirements of the Clause 45 of the Subsidiary Legislation Act Cap.180

Signature of Authorised Person	
Print Name	
Position in Organisation	
Date	
Supplier Identification (as affixed to the product)	