

Commission Implementing Regulation (EU) 2019/779 of 16 May 2019 laying down detailed provisions on a system of certification of entities in charge of maintenance of vehicles pursuant to Directive (EU) 2016/798 of the European Parliament and of the Council and repealing Commission Regulation (EU) No 445/2011 (Text with EEA relevance)

**Status:** This is the original version as it was originally adopted in the EU. This legislation may since have been updated - see the latest available (revised) version

## ANNEX III

### Application forms



#### APPLICATION FOR A CERTIFICATE OF CONFORMITY OF AN ENTITY IN CHARGE OF MAINTENANCE

Application for a certificate confirming that the maintenance system of an entity in charge of maintenance (ECM) is deemed to be in conformity with Directive (EU) 2016/798 of the European Parliament and of the Council and Commission Implementing Regulation (EU) 2019/779

#### CERTIFICATION BODY CONTACT INFORMATION

- 1.1 Name of the certification body addressed for the application \_\_\_\_\_
- 1.2 Certification body reference number \_\_\_\_\_
- 1.3 Complete postal address (street, postal code, city, country) \_\_\_\_\_  
\_\_\_\_\_

#### APPLICANT INFORMATION

- 2.1 Legal title \_\_\_\_\_
- 2.2 Complete postal address (street, postal code, city, country) \_\_\_\_\_  
\_\_\_\_\_
- 2.3 Phone number \_\_\_\_\_ 2.4 Fax number \_\_\_\_\_
- 2.5 Email address \_\_\_\_\_ 2.6 Website \_\_\_\_\_
- 2.7 Registration business number \_\_\_\_\_ 2.8 VAT No \_\_\_\_\_
- 2.9 Other information \_\_\_\_\_

#### CONTACT PERSON INFORMATION

- 3.1 Family name and first name \_\_\_\_\_
- 3.2 Complete postal address (street, postal code, city, country) \_\_\_\_\_  
\_\_\_\_\_
- 3.3 Phone number \_\_\_\_\_ 3.4 Fax number \_\_\_\_\_
- 3.5 Email address \_\_\_\_\_

#### APPLICATION DETAILS

- 4.1 Application reference (given by the applicant)

**This application is for a**

- 4.2 new certificate  4.3 updated/amended certificate
- 4.4 renewed certificate

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**OPERATIONAL DETAILS**

**5.1 Type of company:**

5.11 RU  5.12 IM  5.13 Keeper  5.14 Maintenance supplier  5.15 Manufacturer  5.16 Other

**5.2 Scope of ECM activities** (category of vehicles: freight wagons, locomotives, multiple units, passenger carriages, high-speed vehicles, OTMs, other — specify):

**5.3 Covers wagons specialised in transport of dangerous goods:** YES/NO

<b>5.4 ECM Operational functions</b>		own	partially	fully outsourced
5.4	Maintenance development	5.4.1 <input type="checkbox"/>	5.4.2 <input type="checkbox"/>	5.4.3 <input type="checkbox"/>
5.5	Fleet maintenance management	5.5.1 <input type="checkbox"/>	5.5.2 <input type="checkbox"/>	5.5.3 <input type="checkbox"/>
5.6	Maintenance delivery	5.6.1 <input type="checkbox"/>	5.6.2 <input type="checkbox"/>	5.6.3 <input type="checkbox"/>

**SUBMITTED DOCUMENTS**

- 6.1 Maintenance system documentation
- 6.2 Other  specify: \_\_\_\_\_

**SIGNATURES**

**Applicant** \_\_\_\_\_  
(first name, family name)

Date \_\_\_\_\_ Signature \_\_\_\_\_

**Certification body** \_\_\_\_\_

Internal reference number \_\_\_\_\_  
Date application received \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_

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### APPLICATION FOR A CERTIFICATE OF CONFORMITY FOR MAINTENANCE FUNCTIONS

Application for a certificate confirming that the maintenance system within the European Union is deemed to be in conformity with Directive (EU) 2016/798 of the European Parliament and of the Council and Commission Implementing Regulation (EU) 2019/779

#### CERTIFICATION BODY CONTACT INFORMATION

- 1.1 Name of the certification body addressed for the application \_\_\_\_\_
- 1.2 Certification body reference number \_\_\_\_\_
- 1.3 Complete postal address (street, postal code, city, country) \_\_\_\_\_  
\_\_\_\_\_

#### APPLICANT INFORMATION

- 2.1 Legal title \_\_\_\_\_
- 2.2 Complete postal address (street, postal code, city, country) \_\_\_\_\_  
\_\_\_\_\_
- 2.3 Phone number \_\_\_\_\_ 2.4 Fax number \_\_\_\_\_
- 2.5 Email address \_\_\_\_\_ 2.6 Website \_\_\_\_\_
- 2.7 Registration business number \_\_\_\_\_ 2.8 VAT No \_\_\_\_\_
- 2.9 Other information \_\_\_\_\_

#### CONTACT PERSON INFORMATION

- 3.1 Family name and first name \_\_\_\_\_
- 3.2 Complete postal address (street, postal code, city, country) \_\_\_\_\_  
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- 3.3 Phone number \_\_\_\_\_ 3.4 Fax number \_\_\_\_\_
- 3.5 Email address \_\_\_\_\_

#### APPLICATION DETAILS

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- 4.2 new certificate  4.3 updated/amended certificate
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**OPERATIONAL DETAILS**

**5.1 Type of company:**

5.11 RU  5.12 IM  5.13 Keeper  5.14 Maintenance supplier  5.15 Manufacturer  5.16 Other

**5.2 Scope of ECM activities** (category of vehicles: freight wagons, locomotives, multiple units, passenger carriages, high-speed vehicles, OTMs, other — specify):

**5.3 Covers wagons specialised in transport of dangerous goods:** YES/NO

**5.4 Maintenance functions**

5.5	Maintenance development	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Partial	<input type="checkbox"/>
5.6	Fleet maintenance management	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Partial	<input type="checkbox"/>
5.7	Maintenance delivery	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Partial	<input type="checkbox"/>

For partial maintenance functions, the sub-functions for which this application is submitted (see list in Annex II to Implementing Regulation (EU) 2019/779):

**SUBMITTED DOCUMENTS**

6.1 Maintenance system documentation

6.2 Other  specify: \_\_\_\_\_

**SIGNATURES**

**Applicant** \_\_\_\_\_  
(first name, family name)

Date \_\_\_\_\_ Signature \_\_\_\_\_

**Certification body** \_\_\_\_\_

Internal reference number \_\_\_\_\_  
Date application received \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_

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