



**Transport Qualification System for Suppliers to
Transport Utilities in Scandinavia**

DECLARATION ISSUED BY MANAGING DIRECTOR

The below attestation concerns:

TransQ ID:

Company:

Address:

Postal Code / Location:

Country:

We hereby confirm that the information regarding the above mentioned company registered in the Internet-based questionnaire is correct and by the date of issue reflecting the present activity including our current scope of products / services.

We accept that the Utilities as users of TransQ, on request, will be allowed to audit and verify the information stated regarding Quality System(s) and / or regarding Health, Environment and Safety System.

Binding signature

Managing director

Date:

Signature:

Name in block letters:

The statement is valid only if registered with TransQ unit within 30 days after the date of issue.

Original signature required