## SUPPLIER DECLARATION OF CONFORMITY (SDoC) In accordance with ISO/IEC 17050-1:2004

| Name <sup>2</sup> (of  | New Zealand manufacti   | urer or importer):   |  | Contact Address:   |  |
|--|---|--|--|--|--|
| Electrolux NZ Ltd  |   |  |  | 3 Niall Burgess Rd   |  |
|  | 00 5722220  |  | Mt Wellington  |  |  |
| Telephone  |   | 2624   | )  | Auckland NZ  |  |
|  | ew Zealand Company No. (if applicable): 36212 mail Address: technical.advisor@electrolux.co.nz  |  | Telephone 09 5732220 Fax 09 5732221  |  |  |
| Email Address: Lechnical.advi  |   | sorwelectrolux.co.nz   |  |  |  |
| Medium F   | Risk Article – Details  | s³ (Product name   | e, type, rating, brand   | , model, batch numbers, and serial num   | ibers, as applicable):   |
| FE956B   | 6A  |  |  |  | And the state of t |
|  | c - Freestanding 90<br>0-240V a.c, 50Hz .   |  | lectric Oven with 6  | 6 zone Induction Hob   |  |
| The Medi   | um Risk Article liste   | ed above, fully  | complies:  |  |  |
| With cited   | standard(s), as listed <sup>4</sup>   |  |  | 1  |  |
| Standard n   | umber and issue year:   | AS/NZS 60335.2.6:2008  |  | Standard number and issue year:  | AS/NZS 60335.1:2011  |
| Edition / Amendment status:  |   | Including Amendments 1-3   |  | Edition / Amendment status:  |  |
| Standard title:  |   |  | 1 1  | Standard title:  |  |
| Safety of household and similar electrical appliances,<br>Part 2, Particular requirements for stationary cooking<br>ranges, hobs, ovens and similar appliances   |   |  | nary cooking   | Household and similar electrical appliances – Safety general requirements  |  |
| AS/NZS ZZ modified Yes \textstyle No   |   |  |  |  |  |
| OR Compli  | ies with the Conformity   |  | aa comonante de la Comonante d   | <b>-</b>   | No ☐ N/A 🏻   |
| OR Compli<br>Names an<br>Name(s):  |   | y Cooperation A<br>testing organ   | greement <sup>5</sup> Yes sisation or body  Address(es):   |  | No ☐ N/A ☑   |
| OR Compli<br>Names an<br>Name(s):<br>Name(s):  | ies with the Conformity and addresses of any Government of So Australia — Dept of Manufacturing   | y Cooperation A<br>testing organ<br>outh   | greement <sup>5</sup> Yes sisation or body  Address(es):  Address(es):   | No South Australia   |  |
| OR Complination  Names and  Name(s):  Name(s):   | ies with the Conformity and addresses of any Government of So Australia – Dept of Manufacturing  e to relevant test representation  | y Cooperation A<br>testing organ<br>outh<br>of   | greement <sup>5</sup> Yes sisation or body  Address(es):  Address(es):   | No South Australia  South Australia  date that show how compliance is  Report Certification or Document                  |  |
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