

# SUPPLIER DECLARATION OF CONFORMITY (SDoC)

In accordance with ISO/IEC 17050-1:2004

SDoC identification Number<sup>1</sup>:

## Issuer details

|  |   |
|--|---|
| Name <sup>2</sup> (of New Zealand manufacturer or importer):<br><input type="text" value="Electrolux NZ Ltd"/> | Contact Address:<br><input type="text" value="3 Niall Burgess Rd&lt;br/&gt;Mt Wellington&lt;br/&gt;Auckland NZ"/> |
| Telephone: <input type="text" value="09 5732220"/>   | Telephone 09 5732220 Fax 09 5732221   |
| New Zealand Company No. (if applicable): <input type="text" value="36212"/>                                    |   |
| Email Address: <input type="text" value="technical.advisor@electrolux.co.nz"/>                                 |   |

## Medium Risk Article – Details<sup>3</sup> (Product name, type, rating, brand, model, batch numbers, and serial numbers, as applicable):

EHI845BB Electrolux Induction Hob.  
Declared Class: Range - Hob  
230-240Va.c 50/60Hz, 7.4kW, Class 1

## The Medium Risk Article listed above, fully complies:

|  |   |
|--|---|
| With cited standard(s), as listed <sup>4</sup> :   |   |
| Standard number and issue year: <input type="text" value="AS/NZS 60335.2.6:2014"/>   | Standard number and issue year: <input type="text" value="AS/NZS 60335.1:2011"/>  |
| Edition / Amendment status: <input type="text"/>   | Edition / Amendment status: <input type="text"/>  |
| Standard title:<br><input type="text" value="Household and similar electrical appliances - Safety - Part 2.6: Particular requirements for stationary cooking ranges, hobs, ovens and similar appliances"/> | Standard title:<br><input type="text" value="Household and similar electrical appliances - Safety - Part 1: General requirements"/> |
| AS/NZS ZZ modified Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>  | AS/NZS ZZ modified Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>                            |
| OR Complies with the Conformity Cooperation Agreement <sup>5</sup> Yes <input type="checkbox"/> No <input type="checkbox"/>  |   |

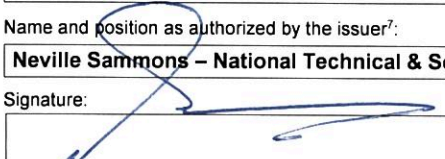
## Names and addresses of any testing organisation or body

|   |  |
|---|--|
| Name(s): <input type="text" value="Office Of the Technical Regulator"/> | Address(es): <input type="text" value="Level 8 ANZ Building&lt;br/&gt;11 Waymouth St&lt;br/&gt;Adelaide"/> |
| Name(s): <input type="text"/>   | Address(es): <input type="text"/>  |

## Reference to relevant test reports/certification and the issue date that show how compliance is achieved

|  |   |   |
|--|---|---|
| Standard(s) or document(s) used, to show how compliance with cited standard is achieved:<br><input type="text" value="Certificate of Approval"/> | Report Certification or Document reference N <sup>o</sup> (s):<br><input type="text" value="OTR160395/00"/> | Issue dates(s):<br><input type="text" value="14/7/2016"/> |
| Reference to any management quality system involved: <input type="text"/>  |   |   |
| Additional information <sup>6</sup> : <input type="text"/>   |   |   |

## Declaration

|   |   |
|---|---|
| I hereby declare that the above specified fittings or electrical appliances comply with the requirements of Regulation 83 of the Electricity (Safety) Regulations 2010. |   |
| Signed for and on behalf of:<br><input type="text" value="Electrolux NZ Ltd"/>  | Issuer Identification (as affixed to the article)<br><input type="text" value="RCM&lt;br/&gt;OTR160395"/> |
| Name and position as authorized by the issuer <sup>7</sup> :<br><input type="text" value="Neville Sammons – National Technical &amp; Service Manager"/>                 | Date:<br><input type="text" value="18/8/2016"/>   |
| Signature:<br>   |   |