



DoC Number:

DECLARATION OF CONFORMITY

Product description: Safety Gloves

Brand: Milwaukee

Model: _____

TTI part number: _____

UKCA Type-examination performed by: _____

UKCA Type-examination certificate number: _____

Approved Body (conformity assessment): _____

Conformity assessment procedure according to: _____

We declare as the manufacturer under our sole responsibility that the product described fulfills all the relevant regulations and directives listed below and that the following designated standards have been used.

Regulation: _____

Designated Standards: _____

SIGNED FOR AND ON BEHALF OF:

Company name: Techtronic Industries GmbH

Company address: Max-Eyth-Straße 10
71364 Winnenden

Name: Alexander Krug

Position: Vice President Operations

Signature: 

Place & date: Winnenden,

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