



Area of application: basic principles

Check list for the type-examination test procedure of machinery according to Annex VII / IX of EC Machinery Directive 2006/42/EC

Accredited Certification Body SCESp 0008
European notified body,
identification number 1246

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**Check list
for the type-examination test procedure of machinery
according to Annex VII / IX of EC Machinery Directive
2006/42/EC**

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**Check list
for the type-examination test procedure of machinery
according to Appendix VII / IX of
EC Machinery Directive 2006/42/EC**

In order to be able to begin a type-examination test procedure according to Machinery Directive 2006/42/EC

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must be supplied with the following information and documentations for the prototype to be tested together with any options.

1. INFORMATION

1.1 Product

.....

1.2 Make

.....

1.3 Type designation or series with a list of all machines that have an identical safety concept.

.....

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1.4 Applicant's address

Name :

Address :

Country, postcode, town:

1.5 Manufacturer's address (if different from 1.4)

Name :

Address :

Country, postcode, town :

1.6 Place where manufactured (if different from 1.4)

Name :

Address :

Country, postcode, town :

1.7 Name, telephone and fax number(s) of people, who can provide further information and who are responsible for the product.

Name : Department:

Tel. no. : Fax no:

e-mail :

Name : Department:

Tel. no. : Fax no:

e-mail :

Place, date :

Signature of applicant :

2. TECHNICAL FILE

The technical file with the corresponding document number according to Machinery Directive 2006/42/EC in line with Annex VII in the original language (we accept English, French, German, or Italian).

In order to reduce the amount of work done by the certification body for the type examination test, we would be grateful if you would complete the "Verification" and "Comments" lines.

Information in italics will be completed by the certification body.

Assessment:

- 2.1** List of all documentations sent with a clear designation and information on the version and/or date (e.g. according to the manufacturer's QM system).

Document no.: Date :

Verification:

Comments:

OK not OK

Initialed:

- 2.2** A list of directives, standards and other technical specifications that were taken into account when the machine was designed.

Verification:

Comments:

OK not OK

Initialed:

- 2.3** Description of the machinery with the defined area of application.

Verification:

Comments:

OK not OK

Initialed:

2.4 Risk assessment/risk reduction.

Verification:

Comments:

OK

not OK

Initialled:

2.5 Description of the existing safety devices and their functions.

Verification:

Comments:

OK

not OK

Initialled:

2.6 Plans or layout of any protective devices: Overall plan of the machine with protective devices for normal and special operating modes drawn in (e.g. a plan view of the machine with safety doors and their associated monitoring switchgear and manual programming unit with permission key all drawn in).

Verification:

Comments:

OK

not OK

Initialled:

2.7 Wherever relevant for safety: Detailed and complete plans with calculations and test results (e.g. energetic view, calculations and/or impact tests of protective enclosures if flying parts can be expected).

Verification:

Comments:

OK

not OK

Initialled:

2.8 Circuit diagrams: extract of the safety circuits or circuit diagram complete with a description of the safety circuits.

Verification:

Comments:

OK

not OK

Initialled:

2.9 Equipment list of the safety circuits with existing certificates of accredited bodies.

Verification:

Comments:

OK

not OK

Initialled:

2.10 Wherever relevant for safety: Test reports on electromagnetic compatibility (EMC) and on environmental influences of the safety system (climate, vibration, shock, etc.).

Verification:

Comments:

OK

not OK

Initialled:

2.11 Wherever relevant for safety: Hydraulic/pneumatic plans with a description of the safety circuits.

Verification:

Comments:

OK

not OK

Initialled:

2.12 Wherever relevant for safety: Considerations concerning health prophylaxis (e.g. skin compatibility of coolants, use of hazardous materials, etc.)

Verification:

Comments:

OK

not OK

Initialled:

2.13 Noise-measurement reports of the machine with information in the operating instructions.

Verification:

Comments:

OK

not OK

Initialled:

2.14 A copy of the original operating instructions, including the declaration of conformity, with the safety regulations, identical to the type to be tested (Machinery Directive, Annex I, section 1.7.4) in the original language of the technical documentations (English, French, German or Italian are accepted).

Verification:

Comments:

OK

not OK

Initialled:

2.15 Possibly installation explanations for incomplete machinery with the corresponding assembly instructions.

Verification:

Comments:

OK

not OK

Initialled:

2.16 In the case of mass production, a summary of the measures taken internally to guarantee compliance with the safety concept of all series machines with the prototype examined.

Verification:

Comments:

OK

not OK

Initialed:

2.17 Substantiation of the valid accreditation of the subcontractor (e.g. testing body).

Accreditation no.

Date

Verification:

Comments:

OK

not OK

Initialed:

Assessment:
(to be completed by the certification body)

Order number:

Technical file OK

Technical file not OK

Comments:

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.....

.....

Place: *Date:* *Signature:* *Initialed by:*

Safety expert:

Experts consulted :

.....

3. PROTOTYPE

A representative machine must be provided for the type examination test. This must comply with the technical file submitted.

Assessment: (to be completed by the certification body)

3.1 *Details of the prototype*

Machine :

Type :

Machine no. :

*Equipment/
options* :

3.2 *Does the construction of the prototype conform to the technical file?*

OK *not OK*

Verification:

Comments:

Initialed:

3.3 *Does the prototype comply with the relevant essential health and safety protection requirements:*

OK *not OK*

Verification:

Comments:

Initialed:

- Does the prototype comply with the applicable safety requirements of the directives and standards:

OK

not OK

Verification:

Comments:

Initialled:

3.4 Is safety guaranteed under the scheduled operating conditions:

OK

not OK

Verification:

Comments:

Initialled:

Assessment: (to be completed by the certification body)

Prototype OK

Prototype not OK

Comments:

.....
.....
.....

	<i>Place:</i>	<i>Date:</i>	<i>Signature:</i>	<i>Initialled by:</i>
<i>Safety expert:</i>
<i>Experts consulted:</i>
