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| --- | --- | --- | --- | --- | --- | --- | --- |
| Logo |  | Reference number: |  | / |  | / |  |
|  |  |  |  |  |  | v. 1.7 |
|  |  | Czech National Bank  Department 320  Na Příkopě 28  115 03 Prague 1 | | | | | |
|  |  |  |  |  |  |  |  |

**Equipment Registration Form (Printout) for Testing**

**in accordance with Act No. 136/2011 Coll.**

**When completing the registration form, please follow the instructions for completion of the registration form for testing**

(the instructions can be downloaded at www.cnb.cz)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **INFORMATION ABOUT THE EQUIPMENT (ASSEMBLY) BEING REGISTERED** | | | | | | |
| **1** | **Type designation of tested equipment (assembly):\*** | |  | | | |
| **2** | **Hardware version of detector:\*** | |  | | | |
| **3** | **SW version – template, currency f.:\*** | |  | | | |
| **4** | **Change to HW - SW – re-testing: (Template):\*** | |  | | | |
| **5** | **Equipment for processing:\*** | |  | |  | |
| **6** | **Equipment category:\*** |  | |  | |  |

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| --- | --- | --- | --- | --- | --- |
| **INFORMATION ABOUT SUPPLIER** | | | | | |
| **7** | **Name:\*** |  | | | |
| **8** | **Identifier (registered number):\*** |  | **9** | **Tax ID:** |  |

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| **SUPPLIER’S REGISTERED OFFICE** | | | | | | | | | | |
| **10** | **Street:\*** |  | | | | | | **11** | **Land-registry no.:\*** |  |
| **12** | **Postcode:\*** |  | **13** | **Municipality:\*** |  | | | | | |
| **14** | **District:** |  | | | | **15** | **State:** |  | | |

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| **SUPPLIER’S CORRESPONDENCE ADDRESS (if different to registered office)** | | | | | | | | | | |
| **16** | **Street:** |  | | | | | | **17** | **Land-registry no.:** |  |
| **18** | **Postcode:** |  | **19** | **Municipality:** |  | | | | | |
| **20** | **District:** |  | | | | **21** | **State:** |  | | |

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| **SUPPLIER’S CONTACT DETAILS** | | | | | | |
| **22** | **Name of contact person:\*** | |  | | | |
| **23** | **Telephone:\*** |  | | **24** | **Fax:** |  |
| **25** | **E-mail address:** | |  | | | |

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| **REPRESENTATIVES OF THE SUPPLIER PARTICIPATING IN EQUIPMENT TESTING** | | | | | |
| **26** | **Surname, first name and position:\*** |  | |  |  |
| **27** | **Surname, first name and position:\*** |  | |  |  |
| **DETAILED SPECIFICATIONS OF REGISTERED EQUIPMENT (ASSEMBLY)** | | | | | |
| **28** | **The equipment is able to process means of payment:\*** | |  | | |
| **29** | **The equipment is able to process bank notes:\*** | | **Orientation A   Orientation B**  **Orientation C   Orientation D** | | |
| **30** | **The equipment is able to recycle bank notes (if it is supported):\*** | | **CZK 100  CZK 200  CZK 500**  **CZK 1,000  CZK 2,000  CZK 5,000** | | |
| **31** | **In what way does the equipment (assembly) verify protective elements and parameters of domestic bank notes or coins and in what way does it perform backtracking:\*** | | | | |
|  |  | | | | |
| **32** | **A change to limit values (sorting parameters) can be made by:\*** | |  | | |
| **34** | **Recommended frequency of performance of preventative checks (clean-up):\*** | |  | | |

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| **LIST OF ANNEXES SUPPLIED** | | | |
| **35** |  |  | |
| **36** |  |  | |
| **\* Mandatory information**  Correspondence and contact address:  Czech National Bank, Department 320,  Na Příkopě 28, 115 03 Prague 1  tel: 224 414 501  e-mail: testovani.zarizeni@cnb.cz  Data box ID: 8tgaiej  www.cnb.cz | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **In** |  | **on** |  |

Stamp and signatures