

Certification of restoration plasters / restoration plaster systems
according to WTA – Data Sheet 2-9-04/D

Form for Applicants

Manufacturer/Applicant	Stamp	
	Date	Signature
Plant (Manufacturing facility)		
Products tested		
Test	<input type="checkbox"/> Initial test	<input type="checkbox"/> Follow-up test Date of initial test:
Sample taken by:	<input type="checkbox"/> External monitor <input type="checkbox"/> External representative	Date of sampling:
External monitoring carried out by:		
Inspection body: (if not the same as external monitor)		
Monitoring report:	Number:	Date:
Test certificate:	Number:	Date:

- Annexes:
- Form 1 for Inspection Bodies Spray Cast WTA and Test Certificate
 - Form 2 for Inspection Bodies Base Plaster WTA and Test Certificate
 - Form 3 for Inspection Bodies Restoration Plaster WTA and Test Certificate
 - External monitoring certificate, monitoring report
(with confirmation of a plant production control PPC)