

4.1.2 Application form for approval tests of milk recording devices

Manufacturer:

Address:

VAT number:

Product manager:

Signing authority:

Intro:

An application request concerns usually a combination of devices. For example: milk meter, sampler and control unit or an automatic sampler on an automatic milk system. This should be specified on the line below.

Below that, you can specify where the product is used for, for which animals and what type of parlor it was intended.

A complete test is a laboratory and field test, a modification test is a partial test based on the level of change, a website update means no changes to the device, but in (brand) name or documentation. ICAR SC Recording devices in association with the ICAR test centers will prepare a project plan based on this request.

Name(s) and if available product number of the device(s):

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Used for:

- Milk metering and sampling
- Milk sampling
- Data analysis (periodic of initial adjustment)
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Species:

- Dairy cattle
- Buffalo
- Sheep
- Goat
- Other

Used in (application):

- **Conventional parlors**
 - Low line
 - Mid/High line
- **Automatic systems**
- **Stanchion barns**

Test requested:

- **Full test**
- **Modification test**
(including software update, please give details in the text box below)
- **ICAR website update**

Technical characteristics and photo of the device:

The technical specifications of the device should be stated below. This applies to the milk meter, sampler, control unit and software (if applicable management and controller software). Also pictures of milk meter, sampler, control unit as of the combination of a sampler with an automatic milking system should be included


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 *Alternatively and preferable this information will be added to this request as attachments mentioned with document names in this request.*

Requested starting date of the test (MMYY)

The undersigned agrees to abide to the conditions set forth within ICAR's Guideline document in its Section 11 PART 4 "Tests for approval of milk recording devices"

Date:

Name:

Company/position:

Signature: