**Company Name of Applicant/Authorized Agent/ Testing Laboratory**

Innovation, Science and Economic Development Canada

3701 Carling Avenue (Building 94)

P.O. Box 11490, Station H

Ottawa, Ontario K2H 8S2

Attention: Certification and Engineering Bureau

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Reference: | Applicant: | | | Applicant Company Name | |
|  | Equipment: | | | | Prodcut Description |
|  | PMN: | |  | | |
|  | HVIN: | |  | | |
|  | IC: | CN-UPN | | | |

Dear Sir or Madam,

Enclosed please find the following application.

RSS-### Issue #

CS-03 Part # Issue #

Further details and supporting documents are attached.

Should you have any questions, please feel free to contact the undersigned.

Sincerely,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name

Title

Date