Appendix 3b Application Form - Semi-finished Product Manufacturer/Supplier

To apply to use the Antimicrobial Copper brand and Cu+ mark, this form should be completed after studying the Conditions of Use and talking to your local Copper Centre representative. Successful applicants will receive a Trademark License Agreement document for completion.

Company		
Legal name of entity:		
'Doing business as' or Trading Name:		
Form of organisation:		
Jurisdiction of organisation:		
Type of business:		
Parent Company/Group (if applicable):		
Registered address:		
Country:		
Website:		
Company Registration Number:		
Please confirm you have a project traceability system allowing you to verify your material sources		
Do you have a written Quality Management System?	○ Yes ○ No Details (ISO 9001, general)	
Do you have Public Liability Insurance?	○ Yes ○ No	
Contact for Brand Management		
Name:		
Job Title:		
Address (if different from above):		
Telephone:		
Email:		

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Contact for Admin (if different)		
Name:		
Job Title:		
Address:		
Email:		
Contact to appear on website director	y listing on www.antimicrobialcopper.org	
Name:		
Email:		
Website link for directory listing (preferably link to your Antimicrobial Copper section):		
Product description (max 100 words).		
On approval you will be contacted for more detailed information and images for your listing.		
Product forms - select those applicable and add any more if needed:	Rod Strip Tube Coil Plate Ingot Sheet Other (please specify)	
Alloys (List UNS/ISO Designations)		
EPA Registered Alloy(s) [or national equivalent - See Appendices 1 and 1a]:		

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Appendix 2 Listed Alloy(s):	
Other (Evidence of efficacy will be required - contact your local Copper Centre for more information):	
Surface Finish	
Please confirm that all high temperature oxides, other additives or polishing residues have been removed and that products are not waxed, lacquered or coated:	○ I confirm
Locations	
Please select all regions where products will be marketed/sold, noting that for marketing in US or Canada regulatory registration is a prerequisite.	☐ Africa and Middle East ☐ United States ☐ Asia and the Pacific ☐ Canada ☐ Europe ☐ South America
Please return this form electronically and I confirm that I have read the Conditions I confirm the information provided is accusional Signed:	
Position:	Date:
	Print to pdf to generate electronic copy.

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