

SOLAR KEYMARK Physical inspection report	Report No.:	Report date	SKN_N0444 Annex A2_R2
		YYYY-MM-DD	Page 1/4

Issued to:

Company name
Address
Postal Code Town
Country

Contact Person
Email
Tel.:

SOLAR KEYMARK PHYSICAL INSPECTION REPORT

Annex A2 of the Specific CEN Keymark Scheme Rules for Solar Thermal Products

1. List of Solar Keymark certificates covered by this report (incl. all OEM/OBL)

Certificate No	Manufacturer	Product trade name	First test results
XX	YY	ZZ	yyyy-mm-dd

2. List of all test reports containing information related with the listed certificates

Test report No	Test laboratory	Date of issue	Remarks
XX	YY	yyyy-mm-dd	

3. List of all inspections for the certificates covered by this report including the initial type testing.

No (0,1,2,..)	Report No	Date	Inspector	Inspection body
0 (initial type test)	YY	yyyy-mm-dd	ZZ	ZZ
1				
2				

4. Declarations of changes of the certified product(s)

Declaration of change	Handed in to inspection body	Declared in document	Accepted by inspection body	Change in force since
XX	yyyy-mm-dd	ZZ	yyyy-mm-dd	yyyy-mm-dd

Place for inspection body, name, address, tel etc or empty

SOLAR KEYMARK Physical inspection report	Report No.:	Report date	SKN_N0444 Annex A2_R2
		YYYY-MM-DD	Page 2/4

5. BOMs

Product/Certificate: XX		
No	BOM ID / Date	Description of changes
0	XX / yyyy-mm-dd	yyyy-mm-dd / Initial
1	XX / yyyy-mm-dd	yyyy-mm-dd / unchanged

Product/Certificate: XX		
No	BOM ID / Date	Description of changes
0	XX / yyyy-mm-dd	Initial

Product/Certificate: XX		
No	BOM ID / Date	Description of changes
0	XX / yyyy-mm-dd	Initial

For each BOM, start a new table

6. Technical drawings

Product / Component: XX		
No	Technical drawing ID / Date	Description of changes
0	XX / yyyy-mm-dd	initial

Component: XX		
No	Technical drawing ID / Date	Description of changes
0	XX / yyyy-mm-dd	initial

Component: XX

Place for inspection body, name, address, tel etc or empty

SOLAR KEYMARK Physical inspection report	Report No.:	Report date	SKN_N0444 Annex A2_R2
		YYYY-MM-DD	Page 3/4

No	Technical drawing ID / Date	Description of changes
0	XX / yyyy-mm-dd	initial

For each Technical drawing, start a new table

7. Specification files

Component: XX		
No	Specification ID / Date	Description of changes
0	XX / yyyy-mm-dd	initial

Component: XX		
No	Specification ID / Date	Description of changes
0	XX / yyyy-mm-dd	initial

Component: XX		
No	Specification ID / Date	Description of changes
0	XX / yyyy-mm-dd	initial

For each Specification, start a new table

8. Installer manual, logos and labels

Certificate No	Manufacturer	Product trade name	Inspectors assessment OK or remarks
XX	YY	ZZ	

Place for inspection body, name, address, tel etc or empty

SOLAR KEYMARK Physical inspection report	Report No.:	Report date	SKN_N0444 Annex A2_R2
		YYYY-MM-DD	Page 4/4

9. Visual assessment

Certificate No	Manufacturer	Product trade name	Inspectors assessment OK or remarks
XX	YY	ZZ	yyyy-mm-dd

Note: During the inspection not all certified products need to be assessed visually, however, during one certification period all certified products should be assessed at least once.

10.Recommendations of the inspector to the certification body

All above listed modifications of the BOM, technical drawings and specifications shall be assessed and recommendations for action (i.e. retesting, issue of new certificate, re-modification of drawings or specifications) shall be given to prove consistency with initial type testing. The inspector shall consult the Solar Keymark scheme rules, the applicable standards and the testing laboratories which issued the test reports for this certificate.

The final decision about required follow-up action is taken by the certification body.

	No	Minor	Major, Retesting necessary
Impact on thermal performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Impact on durability and/or safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recommendation of the inspector for action			

General remarks and comments

11.Signature

The factory representative accepts by signature the findings. The final decision concerning further action as recommended in this report is taken by the certification body. A copy of the signed report shall be made available to the inspector, the certification body and the factory representative.

Date: yyyy-mm-dd

Name of inspector

Name of factory representative

Name, Position

Name, Position

Place for inspection body, name, address, tel etc or empty