



4. Registrant Details

| | | | |
|---|--|---|---|
| Are there any changes to the registrant details? | <input type="checkbox"/> Yes (Please complete the details below) | <input type="checkbox"/> No (Please provide your business entity names or business idx no., if known) | Business Idx no.: |
| Legal name: | | | ¹ Company registration num: |
| Trading name: | | | ² Aust. Business num. (ABN): |
| Street address: | | | City: |
| Country: | | | Postal code: |
| Phone num.: | Website: | | Email: |
| Customer contact details (Details of the individual submitting the notification of product modification / variation) | | | |
| First Name: | | Last name: | |
| Middle name: | | Title / pronouns: | |
| Position: | | Email: | |
| Phone num.: | | Mobile num.: | |

5. Registrant Authorisation and Declaration

As the Registrant requesting withdrawal of a Certified Product from the CSIRO Verification Services – ActivFire® Scheme, I acknowledge and accept the following.

1. I hereby certify that the information provided is true and correct to the best of my knowledge.
2. I acknowledge that once a product has been withdrawn / deregistered from CSIRO’s Register of Fire Protection Equipment, a new product application will have to be submitted to re-list the product on CSIRO’s Register of Fire Protection Equipment.

| Signed | By (Print name) | Date |
|--------|-----------------|------|
| | | |

¹ Company registration number/code issued and verifiable by a statutory agency of the country designated in the company address.

² Australian Business Number (ABN) as applicable to Australian Business entities.