*Editorial Note: This version of the document adds in Level of Product Approval to the determination i.e., CLASS I (Full) or CLASS II (Interim)*

**STATEMENT OF PRODUCT COMPOSITION (DETERMINED VIA MASS % RAW MATERIALS IN WET MATERIAL).**

**Purpose**: 1. To ensure the integrity of paint and surface coating materials are not compromised, and that both Parent and Child products meet accreditation requirements.

**Instruction**: 1.   Use one application form per product.

2. Fill in the form by completing the highlighted sections, as applicable.

3. Ensure that the product name that appears on this (and PDS/TDS, SDS) documentation is the same as that which appears on the product label as it is this name &/or number that will be listed on the APAS List of Certified Products.

**NOTE: If there have been *no* significant formulation changes to the Parent Product (refer to APAS document AP-D183 for further information) since its most recent certification, *only* Sections A, D and E require completion.**

 **Section A: Background Information:**

|  |  |
| --- | --- |
| Manufacturer (RMU No.(s) and location(s) where manufacture occurs): |       |
| Reseller Product Name: |       |
| Reseller Product Code: |       |
| Parent Product Code and Description: |       |
| The data describing this product is derived from revision number (Parent Product Revision No.): |       |
| APAS Specification Number(s): |       |
| Parent Product APAS ID: |       |

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| **Section B: Composition of the Product by Mass:****NOTE:** Refer to the relevant APAS Specification(s) the submission is being made against to confirm information as it pertains to product composition, testing specifications etc., (refer to <https://vs.csiro.au/apas/specifications/>) |
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| --- | --- | --- |
| **Pigment(s) description by chemistry type** | **Composition of the wet paint by mass (%)** | **APAS USE ONLY**Comparison against PARENT AP-D139 for the formulation initially certified with date**/ /** |
| Type(Y/N) | Composition (± %) | Conf.1(Y/N) |
|       |       |  |  |  |
|       |       |  |  |  |
|       |       |  |  |  |
|       |       |  |  |  |
|       |       |  |  |  |
|       |       |  |  |  |
|       |       |  |  |  |
| **Binder solid(s) description by chemistry type(s)** |
|       |       |  |  |  |
|       |       |  |  |  |
| **Volatile(s) description by chemistry type(s)** |
|       |       |  |
| **Additive(s)description by function** |

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| --- | --- | --- |
|       |       |  |
| **Total (%):** |       | Conforms to AP-D183 1 |

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| **Section C: Q.C. Parameters3:**

|  |  |  |
| --- | --- | --- |
| Density: |       | Kg/L |
| Viscosity: |       |       | (indicate UoM) |
| Gloss: |       | units at |       | degrees |

 |
| 3 Record minimum to maximum values |  |
| **Section D: Reseller Declaration:** {to be completed by the APAS Contact of the Reseller [Child Product(s)]}**I hereby certify that:** |  |
| [ ]  The Child Product(s) have been filled and labelled on site at the RMU or |  |
| [ ]  The Child Product(s) have been filled and labelled from BULK at Reseller site and |  |
| [ ]  The information provided is true and correct to my best knowledge |  |
|

|  |  |
| --- | --- |
| Name of APAS contact (Reseller): |       |
| Signature (not required for an electronic submission): |       |
| Date: |       |

**Section E: RMU Compliance and Declaration:** {to be completed by an APAS Signatory of the RMU [Parent Product(s)}**I hereby certify that:** |  |
| [ ]  This is a genuine Child Product of Parent Product stated in Section A and |  |
| [ ]  The Child Product(s) have been filled and labelled on site at the RMU or |  |
| [ ]  The Child Product(s) have been filled and labelled from BULK at Reseller site and |  |
| [ ]  There have been **no** significant changes to the Parent Product formulation since its most recent certification, and the  formulation conforms with all the requirements of Clause 6 of APAS Document AP-D192 and |  |
| [ ]  The information provided is true and correct to my best knowledge

|  |  |
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| Name of APAS Signatory (RMU): |       |
| Signature (not required for an electronic submission): |       |
| Date: |       |

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| **FOR APAS USE ONLY:** |  |
| Determination:  | Approved | Not Approved |
| Level of Approval: | CLASS I | CLASS II |
| If ‘Not Approved’, note reason(s): |  |
| Name of APAS officer: |  |
| Signature: |  |
| Date: |  |
| APAS ID (for new approval): |  |