

## Request for the Development of an ASSE Product Standard

Name _	 	
Title _	 	
Company Name _	 	
Mailing Address	 	
City _		
State _	 	
Zip _	 	
Phone _	 	
Fax _	 	
Email _	 	
Product Name	 	
Product Description _	 	
Application / Use _	 	

Why do you require the development of a standard for this product? Cite any special attention to the public's safety, health and welfare.

To your knowledge are there any standards for the product which presently exist?	Yes 🗌	No 🗌
Is so, please advise of their number, designation and the name of the sponsoring o	rganization.	

Has a draft for the proposed standard been prepared?	Yes 🗌	No 🗌
List documents enclosed		

Please recommend contacts potential working group participants to assist with the development of this standard. Also include names of manufacturers who make the product identified in this application.

Name	Organization	email	Phone

By submitting this form to ASSE, the entity making this request agrees to recognize all changes to the standard once adopted in order to maintain the ASSE Product Seal.

Thank you for supporting the ASSE International Standards Development Program.

ASSE Staff use only	Date Received	ASSE Draft Standard Number
Draft Standard Name		