Class A External Power Supplies Other Than Switch-Product Type: Selectable Single-Voltage External Power Supplies -Design Family

Version 4.3

	Design Family	
	Status of This Certification Shee	No Data
	Overall Status of Template	No Data
Submitter Information		
I am a(n) (check one only): O Domestic Manufacturer		
🔿 Importer		Please enter required data
O Third-Party Representative		

The third-party representative includes industry organizations submitting on behalf of their members, foreign manufacturers who do not import and are submitting on behalf of their importers, private labelers submitting on behalf of an importer or domestic manufacturers, third-party testing organizations submitting on behalf of a manufacturer, etc.

Submitter Information (Required for all submissions):

Company Name:	Please enter required data
Company Address:	Please enter required data
Contact Name:	Please enter required data
Contact Telephone Number:	Please enter required data
Contact Fax Number:	Please enter required data
Contact email address:	Please enter required data
For importers, the U.S. Customs and Border Protection importer identification number (OPTIONAL):	

Third Party-Representatives (If Submitter is not a Third-Party Representative, skip to Certification

If the submitter is a third-party representative, provide the following information on <u>each</u> company on whose behalf you are certifying. Note: Please complete an additional template if you are certifying on behalf of more than five companies.

If you are a Third-Party Representative, for how many companies on whose behalf are you certifying? (Maximum of 5)	
1. Company Name:	
Company Address:	
Responsible Person at Company:	
Telephone Number:	
Fax Number:	
Email Address:	
	Domestic Manufacturer
Select all that apply (at least one):	Importer - OPTIONAL: Provide U.S. Customs and Border Protection importer identification number below
	Private Labeler - Provide all of the brand name(s) below
For Importer - U.S. Customs and Border Protection importer identification number (OPTIONAL):	
For Private Labeler - Provide all of the brand name(s):	

2. Company Name:	
Company Address:	
Responsible Person at Company:	
Telephone Number:	
Fax Number: Email Address:	
Select all that apply (at least one):	 Domestic Manufacturer Importer - OPTIONAL: Provide U.S. Customs and Border Protection importer identification number below Private Labeler - Provide all of the brand name(s) below
For Importer - U.S. Customs and Border Protection importer identification number (OPTIONAL):	
For Private Labeler - Provide all of the brand name(s):	
3. Company Name:	
Company Address:	
Responsible Person at Company:	
Telephone Number: Fax Number:	
Email Address:	
Select all that apply (at least one):	Domestic Manufacturer Importer - OPTIONAL: Provide U.S. Customs and Border Protection importer identification number below Private Labeler - Provide all of the brand name(s) below
For Importer - U.S. Customs and Border Protection importer identification number (OPTIONAL):	
For Private Labeler - Provide all of the brand name(s):	
4. Company Name:	1
Company Address:	
Responsible Person at Company:	
Telephone Number:	
Fax Number:	
Email Address:	
Select all that apply (at least one):	 Domestic Manufacturer Importer - OPTIONAL: Provide U.S. Customs and Border Protection importer identification number below Private Labeler - Provide all of the brand name(s) below
For Importer - U.S. Customs and Border Protection importer identification number (OPTIONAL):	
For Private Labeler - Provide all of the	
brand name(s):	

5.	Company Name:	
Co	ompany Address:	
Responsible Per	son at Company:	
Те	lephone Number:	
	Fax Number:	
	Email Address:	
Select all that apply	(at least one):	 Domestic Manufacturer Importer - OPTIONAL: Provide U.S. Customs and Border Protection importer identification number below Private Labeler - Provide all of the brand name(s) below
For Importer - U.S. Co Protection importer ide		
For Private Labeler	- Provide all of the brand name(s):	

Certification

Compliance Statement

SELECT SUBMITTER TYPE AT THE TOP OF THIS WOF	RKSHEET	
Type your full name to signify compliance (required): Enter your email address (required): Date (MM/DD/YYYY) (required):		Please enter required data Please enter required data Please enter required data

OMB Control Number: 1910-1400

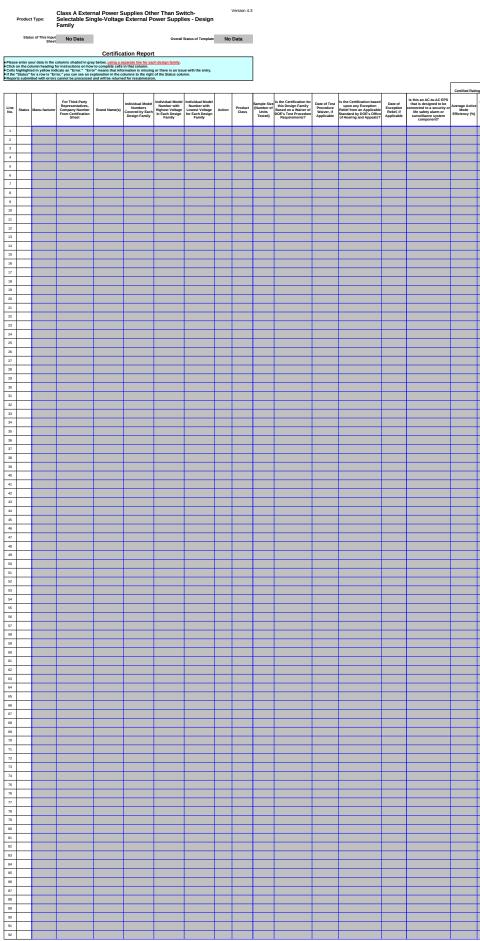
Paperwork Reduction Act Statement OMB Burden Disclosure Statement

This data is being collected for manufacturers to certify compliance to DOE's energy conservation, water conservation, or design standards. The data you supply will be used by the Department to monitor compliance with the energy conservation, water conservation, and design standards and testing requirements for the consumer products and commercial and industrial equipment mandated by the Energy Policy and Conservation Act, as amended.

Public reporting burden for this collection of information is estimated to average 20 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Office of the Chief Information Officer, Records Management Division, IM-23, Paperwork Reduction Project (1910-1400), U.S. Department of Energy, 1000 Independence Ave SW, Washington, DC, 20585-1290; and to the Office of Management and Budget (OMB), OIRA, Paperwork Reduction Project (1910-1400), Washington, DC 20503.

Notwithstanding any other provision of the law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a currently valid OMB control number.

Submission of this data is mandatory.



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Nameplate Output Power (watts)

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Nameplate Output Power (watts)

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No-Load Mode Power Consumption (watts) (if Applicable)

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Output Curren (amps) If Missing From Nameplate

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No-Load Mode Power Consumption (watts) (If Applicable)

Lin	e Status	Manu-facturer	For Third-Party Representatives, Company Number From Certification Sheet	Brand Name(s)	Individual Model Numbers Covered by Each Design Family	Individual Model Number with Highest Voltage in Each Design Family	Individual Model Number with Lowest Voltage for Each Design Family	Action	Product Class	Sample Size (Number of Units Tested)	Is the Certification for this Design Family Based on a Waiver of DOE's Test Procedure Requirements?	Date of Test Procedure Waiver, if Applicable	Is the Certification based upon any Exception Relief from an Applicable Standard by DOE's Office of Hearing and Appeals?	Is this an AC-to-AC EPS that is designed to be connected to a security or life safety alarm or surveillance system component?	Average Active Mode Efficiency (%)	No-Load Mode Power Consumption (watts) (If Applicable)	Nameplate Output Power (watts)	(amps) n	Average Active Mode Efficiency (%)	No-Load Mode Power Consumption (watts) (If Applicable)	Nameplate Output Power (watts)	Output Current (amps) If Missing From Nameplate
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The following is a description of each product class:

Product Class	Product Class Description						
1	Nameplate output less than 1 watt						
2	Nameplate output from 1 watt to not more than 51 watts						
3	Nameplate output greater than 51 watts but not more than 250 watts						

Instructions for CCMS Reporting Certification & Templates

	You are currently on the Instruction and Input sheets.	tions sheet. Please refer to these instructions when completing the Certification								
	IM I Netting Input Product Description Ready Ready									
have been co - If these inc - If these inc the far right	ompleted correctly, the "Status" inc dicators read "Error" in red on the C dicators read "Error" in red on the I of the sheet.	n your keyboard to navigate through the fillable fields in both the Certification and Input sheets. If all fields licators on the top of the Certification sheet and the top of the Input sheet will show "OK" in green. ertification sheet, look for an explanation in the column to the right of the entry field. nput sheet, look for explanations about incomplete/incorrect field entries by looking in the mirrored cells to contact-us if you have any questions about the regulations or need help with the template.								
<u>Certificati</u> the page:	ck on the tab for the on Sheet at the bottom of ON INSTRUCTIONS	I Input Product Description Instructions 1 Ready Ready								
	Step 1	Enter the Submitter Information - required for all submissions.								
	Submitter Information I am a(n) (check one only): ODomestic Manufacturer OImporter OThird-Party Representative									
	Submitter Information (Required f	or all submissions):								
	Company Name: Company Address: Contact Name:									
	Contact Telephone Number: Contact Fax Number:									
	Contact email Address: For importers, the U.S. Customs and Border Protection importer identification number (OPTIONAL):									
	If you are not a Third-Party Repre	sentative, skip to the Compliance Statement (Step 3)								
	Step 2	Enter the Third Party Representative Information								
	- Enter the number of companies one shown below. - On each copy of the template, y	Id enter data on the companies for which they are reporting. for which you are reporting on this copy of the template in the box on the Certification sheet similar to the ou may report for no more than five companies. han five companies, complete as many separate copies of the template as are necessary.								
	If you are a Third-Party Representative, for how many companies on whose behalf are you certifying? (Maximum of 5)									
	- For each of the Companies that	you are reporting on in this template, you will need to fill out a full section as shown below.								
1.										
	Company Address: Responsible Person at Company:									
	Telephone Number:									
	Fax Number: Email Address:									
	Select all that apply (at least one):	Domestic Manufacturer Importer - OPTIONAL: Provide U.S. Customs and Border Protection importer identification number below Private Labeler - Provide all of the brand name(S) below								
	For Importer - U.S. Customer and Border Protection importer identification number (OPTIONAL):									
	For Private Labeler - Provide all of the brand name(s):									

Step	3
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Compliance Statement

- The Compliance Statement will be different depending on whether you are a Domestic Manufacturer, Importer, or a Third-Party Representative - Review the statement carefully and then, in order to signify compliance, complete the information in the spaces provided below the statement.

Type your full name to signify compliance (required):	
Enter your email address (required):	
Date (MM/DD/YYYY) required:	

Please cl	ick on th	e tab for	the Input
Sheet at	the bott	om of th	e page:

	Certification	Input	>Product Description	1	Instructions / 🔁 /	
Ready		No. Contraction				

TEMPLATE INSTRUCTIONS

Step 2

|--|

Filling out the Template

- Starting on line No. 1, begin entering applicable data in each field.

- Enter a separate line of data for each individual model.
- Enter a separate line of data for each individual model.
- If you need more than the number of lines available in the template, complete as many additional copies of the template as are necessary.
- At any time you may click on a column heading for a complete explanation of what to enter in each cell.
- If the status at the beginning of the line reads "Error," review your data to verify entries and check the explanation table to the right of the data entry table for a description of the error. - Click on the Product Description tab to see a description of the product classes and to determine what number should be entered in the

Product Class field for each line.

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		Produc	t Type:					1	ersion -							
3			atus of This Input Sheet			Overall Statu	s of Template	E	rror							
5				Ce	rtification	Report										
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9	Line No.	Status	Manu- facturer	For Third-Party Representatives, Company Number From Certification Sheet	Brand Name(s)	Basic Model Number	Individual Model Number Covered by Basic Model	Action	Product Class		Manu- facturer Status	For Third-Party Representatives, Company Number From Certification Sheet Status	Brand Name(s) Status	Basic Model Number Status	Individual Model Number Covered by Basic Model Status	Action Status
5	1	Error	ABC	1	XYZ	123456		n	4		ok	ok	ok	ok	Empty cell	ok
1	2	ok	ABC	1	EFG	123456	987	D	5		ok	ok	ok	ok	ok	ok
2	3	ok	ABC	1	HIJ	123456	987	С	1	1	ok	ok	ok	ok	ok	ok
3	4															
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Completed template

- Lines with an "ok" status have been completed correctly. Be sure your "Overall Status of Template" and "Status of This Input Sheet" reflects "OK" status as expected. - Save the template to a local drive for safekeeping. You will upload this template later to DOE via the CCMS application.

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		Produc	t Type:					V	/ersion							
			atus of This Input Sheet		>	Overall Statu	s of Template	(ок	5						
l				Ce	rtification	Report										
	Click Cell ssue If the	c on the highlig with the Statu n.	column he hted in yell entry. s" for a row	in the columns shad ading for instruction low indicate an "Erro r is "Error," you can s errors cannot be pro	is on how to c or." "Error" mo see an explan	omplete cells in rans that informa ation in the colu	that column. ation is missing mns to the righ	or there t of the S	is an	The cell	s below provide an exp for "Errors".	planation	The cells	below provide an for "Errors".	ezplanation	The cells
r				For Third-Party Representatives,			Individual Model		Product	Manu-	For Third-Party Representatives,	Brand	Basic Model	Individual Model Number	Action	
	Line No.	Status	Manu- facturer	Company Number From Certification Sheet	Brand Name(s)	Basic Model Number	Number Covered by Basic Model	Action	Class	facturer Status	Company Number From Certification Sheet Status	Name(s) Status	Number Status	Covered by Basic Model Status	Status	Produc
		Status		Number From Certification			Covered by	Action			From Certification		Number	Basic Model		Produc
		\cap	facturer	Number From Certification	Name(s)	Number	Covered by Basic Model			Status	From Certification Sheet Status	Status	Number Status	Basic Model Status	Status	Produc
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	No. 1 2 3		facturer Man 1 Man 2	Number From Certification	Name(s) Brand 1 Brand 2	Number 200 300	Covered by Basic Model 201 301	n	Class	Status ok ok	From Certification Sheet Status ok ok	Status ok ok	Number Status ok ok	Basic Model Status ok ok	Status ok ok	Product
	No. 1 2 3 4		facturer Man 1 Man 2	Number From Certification	Name(s) Brand 1 Brand 2	Number 200 300	Covered by Basic Model 201 301	n	Class	Status ok ok	From Certification Sheet Status ok ok	Status ok ok	Number Status ok ok	Basic Model Status ok ok	Status ok ok	Product