

Product Type: Water Closets

[Click here for instructions for completing this form](#)

Each Importer and U.S. Manufacturer is legally required to **certify** the compliance of the products it imports, produce
This certification may be **submitted** by the Importer or U.S. manufacturer or by a Third Party Representative

Certifier - Party Legally Obligated to Certify Compliance

The party responsible for **certification** is (select one only):

| | |
|---|----------------------------|
| <input type="radio"/> a U.S. Manufacturer | Please enter required data |
| <input type="radio"/> an Importer | |

Certifier Contact Information

| | | |
|----------------------------------|--|----------------------------|
| Full Legal Name of Individual | | Please enter required data |
| Full Legal Name of Company | | Please enter required data |
| Complete Company Mailing Address | | Please enter required data |
| Phone Number | | Please enter required data |
| Email Address | | Please enter required data |

Submitter -

The party **submitting** this report is:

| | |
|---|--|
| <input type="radio"/> the Certifier (or its Third Party Representative) Contact Information | |
| <input type="radio"/> a Third Party Representative Authorization form | |

Third Party Representative

| | |
|---|--|
| Full Legal Name of Third Party Representative | |
| Full Legal Name of Third Party Representative | |
| Complete Company Mailing Address | |
| Phone Number | |
| Email Address | |

Compliance Statement

Select one of the options for 'Submitter - Party Submitting This Report' above

| | | |
|---|--|----------------------------|
| Submitter Signature (Type your Full Legal Name) | | Please enter required data |
|---|--|----------------------------|

Date (MM/DD/YYYY)

OMB Burden Disclosure Statement

This data is being collected for manufacturers to certify compliance to DOE's energy conservation, water conservation, and monitor compliance with the energy conservation, water conservation, and design standards and testing requirements for mandated by the Energy Policy and Conservation Act, as amended.

Public reporting burden for this collection of information is estimated to average 35 hours per response, including the time for reviewing 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, Energy, 1000 Independence Ave SW, Washington, DC, 20585-1290; and to the Office of Management and Budget (OMB), Paperwork Reduction Project (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, any collection of information that does not display a currently valid OMB control number.

Submission of this data is mandatory.

Status of This Certification Sheet

No Data

Overall Status of Template

No Data

s, assemblies or manufactures. This party is the "**Certifier**" on this form.
esentative. This party is the "**Submitter**" on this form.

Party Submitting This Report

ting this report is (select one only):

do not complete the Third Party Representative
nation below)

representative (you must have valid Third Party
forms on file with the Department of Energy)

Please enter
required data

Representative Contact Information, if Applicable

of Individual

Please enter
required data

of Company

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or design standards. The data you supply will be used by the Department to
or the consumer products and commercial and industrial equipment

ie for reviewing instructions, searching existing data sources, gathering and
s burden estimate or any other aspect of this collection of information,
IM-23, Paperwork Reduction Project (1910-1400), U.S. Department of
B), OIRA, Paperwork Reduction Project (1910-1400), Washington, DC

penalty for failure to comply with a collection of information subject to the
l number.

Water Closets

Version 5.2

Status of This Input Sheet **No Data**

Overall Status of Template **No Data**

- Please enter your data in the columns shaded in gray below, **using a separate line for each model.**
- Click on the column heading for instructions on how to complete cells in that column.
- Cells highlighted in yellow indicate an "Error." "Error" means that information is missing or there is an issue with the entry.
- If the "Status" for a row is "Error," you can see an explanation in the columns to the far right.

Certification Report

[Click here for instructions for completing this form](#)

| Line No. | Status | Manufacturer | Brand Name(s) | Basic Model Number | Individual Model Number Covered by Basic Model | Action | Product Group Code | Sample Size (Number of Units Tested) | Is the Certification for this Basic Model 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? | Date of Exception Relief, if Applicable | Maximum Water Use (Gallons per Flush) |
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| Line No. | Status | Manufacturer | Brand Name(s) | Basic Model Number | Individual Model Number Covered by Basic Model | Action | Product Group Code | Sample Size (Number of Units Tested) | Is the Certification for this Basic Model 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? | Date of Exception Relief, if Applicable | Maximum Water Use (Gallons per Flush) |
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The following is a description of each product group code:

| Product Group Code | Product Group Code Description |
|--------------------|--|
| 1 | Gravity tank-type toilets |
| 2 | Flushometer Tank Toilets |
| 3 | Electromechanical Hydraulic Toilets |
| 4 | Blowout Toilets |
| 5 | Flushometer Valve Toilets (Other than Blowout Toilets) |