OMB Control Number: 1910-1400 (Expiration Date: XXXXXX XX, XXXX) DOE F 220.56

Product Type: Commercial Pre-Rinse Spray Valves

Click here for instructions for completing this form

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

<u>Certifier - Party Leg</u>	Submitter -					
The party responsible for <u>ce</u>	ertification is (select one only):		The party <u>submi</u>			
🔿 a U.S. Manufacturer			O the Certifier (C Contact Inform			
🔾 an Importer	Please enter required data	O a Third Par Authorizati				
Certifier Contact Inf	formation		Third Party			
Full Legal Name of Individual		Please enter required data	Full Legal Name c			
Full Legal Name of Company		Please enter required data	Full Legal Name c			
Complete Company Mailing Address		Please enter required data	Complete Company Mail			
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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

OMB Control Number: 1910-1400 (Expiration Date: XXXXXX XX, XXXX)

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, c monitor compliance with the energy conservation, water conservation, and design standards and testing requirements fc 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 tim maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this 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 (OM 20503.

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

Submission of this data is mandatory.

Version 5.3

Status of This Certification Sheet	No Data
Overall Status of Template	No Data

s, assembles or manufactures. This party is the "<u>Certifier</u>" on this form. esentative. This party is the "<u>Submitter</u>" on this form.

Party Submitting This Report			
tting this report is (select one only):			
do not complete the Third Party Representative nation below)		Please enter	
epresentative (you must have valid Third Party forms on file with the Department of Energy)	required data		
Representative Contact Informatio	n, if A	pplicable	
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r design standards. The data you supply will be used by the Department to r the consumer products and commercial and industrial equipment

le for reviewing instructions, searching existing data sources, gathering and
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 $\ensuremath{\,\mid}$ number.

	Comm	nercial Pre-Ri	nse Spray Val	ves			Version 5.3	1	Diesse enter vour d	ata in the colum	ns shaded in gray below u	icina a conarat	a line for each mo	odel
	Statu	us of This Input Sheet	No Data	Overall Status of Template No Data			Please enter your data in the columns shaded in gray below, <u>using a separate line for each model</u> . 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 issue with the entry. If the "Status" for a row is "Error," you can see an explanation in the columns to the far right.					here is an		
	Certifi	ication Report	t	Click here for instructions for completing this form						s to the far right.				
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	Flow Rate (gallons per minute)	Spray Force (ounce-force)
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The following is a description of each product group code:

Product Group Code	Product Group Code Description
1	Commercial Prerinse Spray Valves with spray force less than or equal to 5.0 ozf
2	Commercial Prerinse Spray Valves with spray force greater than 5.0 ozf and less than or equal to 8.0 ozf
3	Commercial Prerinse Spray Valves with spray force greater than 8.0 ozf