**\*\*\* By signing this document you are representing that you are authorized to make claims on behalf of your company in regards to Asbestos, Mercury, and PFAS usage and such claims are correct and valid to the best of your knowledge \*\*\***

|  |
| --- |
| Insert Company Logo Here  Date  Company Name  Company Address |
|  |

**DECLARATION OF Asbestos and Mercury COMPLIANCE**

To Whom It May Concern,

We hereby provide information related to **Asbestos** and **Mercury** presence in our products.

**Products determined to contain one or more of the above substances:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Part Number** | **Asbestos** | **Mercury** | **CAS Number(s)** | **Concentration %** |
|  |  |  |  |  |
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|  |  |  |  |  |

**Products that *do not* contain Asbestos or Mercury substances:**

|  |
| --- |
| **Product(s) and Part Number(s)** |
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**Limitations**

[(Supplier) believes the information provided above is accurate, and is based upon data obtained from ongoing due diligence concerning goods and materials provided by third party suppliers. [Supplier] provides such information “AS IS”, without any express or implied warranty of any kind. [Supplier] reserves the right to update and modify this communication, as it believes necessary or appropriate.

|  |  |  |  |
| --- | --- | --- | --- |
| **Print Name:** |  |  |  |
| **Title:** |  |  | **Date:** |  |

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