

Appendix 4 User test form

This appendix must be filled in by the user.

Information about the product

Product name:	
Manufacturer:	
Product type and area of use:	
Product category (tick the box):	
Water-based products	<input type="checkbox"/>
CIP, component cleaning agents	<input type="checkbox"/>
Solvent-based products (ready-to-use)	<input type="checkbox"/>
Graffiti removers	<input type="checkbox"/>
Cleaners for solar modules	<input type="checkbox"/>

Information about the test

The product must be tested within its area of application over a period that reflects the product's usage frequency (i.e., the product must have been used repeatedly).

The product must be tested at the dosage recommended on the product label or accompanying product sheet.

Dosage (g/litre in-use-solution)	
Is the product tested at the dosage recommended on the product label or accompanying product sheet?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Test period	Start date: End date:
How many times has the product been tested in the stated test period?	

Performance of the product

The performance of the product must be visually assessed upon completion of the defined test period. Its performance is considered to be:

Not effective / not satisfactory	<input type="checkbox"/>
Sufficiently effective / sufficiently satisfactory	<input type="checkbox"/>
Very effective / very satisfactory	<input type="checkbox"/>

Other comments to the assessment of the product:

Information about the site of testing performance

Place and date	Company name
Responsible person	Signature of responsible person
Telephone	Email