## Appendix 2 - Conformance Evaluation Record

Date of evaluation: [date]

Requirement of interested party	Conformant	Name and Address of the Owner o	Interest to realize with 10
	(Yes/No)		

[job title]

[name]

[signature]

Appendix 2 - Conformance Evaluation Record

ver. [version] from [date]

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**Commented [9A3]:** Only necessary if document is in paper form.

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Commented [9A2]: Write in here

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