

EC DECLARATION OF CONFORMITY

The manufacturer or his authorised representative established in the Community (1)

| Manufacturer Name | TRIPLE POWER SPORTS PRODUCTS INC. |
|----------------------|---|
| Manufacturer Address | SHUNGMIAO INDUSTRIA ESTATE, HUAI TE VILLAGE, HUMEAN TOWN, DONGGUAN CITY, GUANGDONG, CHINA |

Declares that the new PPE described hereafter (2)

| INTERSPORT Model Number | 253657 |
|-------------------------|---|
| INTERSPORT Model Name | FORTRESS JR 1.0 (Supplier model name:NSO) |

Is in conformity with the provisions of Council Directive 89/686/EEC and, where such is the case, with the national standard transposing harmonized standard No.EN1621-2:2014 (For the PPE referred to in Article 8(3)) Is identical to the PPE which is the subject of EC certificate of conformity No. GB 14/92257 issued by (3) (4)

| Name of Approved Test Institute | SGS United Kingdom Limited. Notified Body 0120 |
|------------------------------------|---|
| Address of Approved Test Institute | Unit 202B Worle Parkway , Weston-Super- Mare,BS22 6 WA. United Kingdom |

is subject to the procedure set out in Article 11 point A or point B (4) of Directive 89/686/EEC under the supervision of the approved body (3)

SGS United Kingdom Limited, Notified Body 0120 Done

At Unit 202B Worle Parkway, Weston-Super- Mare, BS22 6 WA. United Kingdom

On 25 November 2014

(5)

| Name of authorized signatory | LUCY PAN |
|------------------------------|---|
| Position in company | Sales director |
| Signature | For and on behalf of TRIPLE POWER SPORTS PRODUCTS INC. Authorized Signature(s) |

⁽¹⁾ Business name and full address; authorised representatives must also give the business name and address of the manufacturer.



- (2) Description of the PPE (make, type, serial number, etc). (3) Name and address of the approved body.
- (4) Delete whichever is inapplicable.
- (5) Name and position of the person empowered to sign on behalf of the manufacturer or his authorised representative.