IAPMO
STANDARDS DEVELOPMENT SUBMITTAL FORM
(**NOT** an application for product listing)

Proponent Name_____

Representative Name (if different from proponent)_____

Company Name_____

Mailing Address_____

City_____ State or Province_____

Country_____ Zip/ Postal Code_____

Phone Number_____ Fax Number_____

Email Address/Proponent _____

Email Address/Representative _____

Type (circle one): PS TS SPS IS IGC

Action (circle one): new* minor revision* (One Section) major revision* (Two or more Sections)

Intent of standard (circle one): U.S. Only U.S./Canada*

* Note: An additional fee of $1995 will be incurred if a standard for U.S. and Canada is preferred.

Standard # (for existing ISs, PSs, TSs & IGCs):_____

Document Title:_____

_____

Desired SRC Agenda Month:_____

Fees (circle one): New IGC $3,995 Revisions to Existing Std $1,995

Expedited Service (ES) Requested (one week prior to mtg): (Initial Fee above + ES fee below)

ES fee (circle one): New IGC $3,995 Revisions to Existing Std $1,995

Total Due: $_____ (please enclose check or enter credit card information below)

Credit Card Info Name:_____Type:_____
Card no.:_____Expiration:_____

PLEASE SEND ALL CHECKS: Attention Standards Dept

Staff use only: Date Rcvd _____ Draft Attached _____ Fees Paid _____ Agenda Month/Year _____
Stds Tracking _____ Recvd Sample _____ Cust # 17-_____ Invoice # _____