

# UKCA DECLARATION OF CONFORMITY

**NO: Z-Link\_210316\_R1**

**MANUFACTURER:** RPB Safety LLC

**MAILING ADDRESS:** 2807 Samoset Road, Royal Oak, Michigan 48073, USA

Hereby declares that:

**PRODUCT NAME:** Z-Link® Respirator Head Top System

PX5: (TH3 Shoulder Cape/TH2 Face Seal/TH2 Chin Seal) PX4: (TH3 Shoulder Cape/TH3 Face Seal)

SAR: (3B)

**INCORPORATING:** PX5® PAPR Respiratory System

Particle Filter 03-892-P: P R SL, Combination Filter 03-893-A2: A2P R SL, 03-895-ABEK1: A2P R SL

PX4 PAPR Respiratory System

Particle Filter 03-985-P: P R SL, Combination Filter 03-995-A2: A2P R SL

is in conformity with the provisions of the UKCA Regulation, including all amendments, and with national legislation implementing this UKCA Regulation:

**Module B(Certificate#: 746517,746518 and 746521).**

and standards:

- BS EN 12941:1998+A2:2008 - Respiratory protective devices - Powered filtering devices incorporating a helmet or hood.
- BS EN 14594:2005 - Respiratory protection devices - Continuous flow compressed air line breathing apparatus.
- BS EN 166:2001-Personal eye protection.
- BS EN 352-3:2002 Hearing protectors - Ear-muffs attached to an Industrial Helmet.
- BS EN 397:2012+A1:2012 - Industrial safety helmets

and the product is in conformity with RPB Safety LLC's product specifications and acceptance criteria. With safety objective it is declared that all the critical components which are in themselves Respiratory Protective Devices comply with above Regulation and have CE marking affixed. Is identical to the PPE which is the subject of UKCA Type Examination Certificate of Conformance No. 746517, 746518 and 746521, issued by;

**APPROVAL BODY:**

BSI Group, (0086), Kitemark Court, Knowlhill, Milton Keynes, MK5 8PP United Kingdom.

The PPE is subject to the conformity assessment procedure Module D conformity to type based on quality assurance of production control under surveillance of the notified body:

**APPROVAL BODY:**

BSI Group, (0086), Kitemark Court, Knowlhill, Milton Keynes, MK5 8PP United Kingdom.

**PLACE:** Royal Oak, Michigan

**NAME:** Christopher Hughes

**POSITION:** Products and Certifications Manager



**SIGNATURE**

(Full name and identification of the person who is empowered to sign on behalf of the manufacturer).

03/25/2021

**DATE**

*This Declaration of Conformity is issued under the sole responsibility of the Manufacturer.*

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