

## EC Declaration of Conformity

### Manufacturer:

Alrick Manufacturing  
104 Loughnan Street  
Lake Cargelligo NSW 2672  
Australia

### European Representative:

Care-Med Healthcare Equipment  
Bericote Park  
Bericote Road, Blackdown  
Leamington Spa  
CV32 6QP

### Products:

ENDLESS EN 9000 Series, Electric Hospital Beds

Models: EN9000, EN 9000KS, EN9000EW, EN9000D, EN9000Q and EN9000K

We, Alrick Manufacturing, declare that the above mentioned products are recognised as Medical devices (Class I, non-sterile) and are in accordance with the applicable provisions defined by the European Medical Device Directive 93/42/EEC of the 14<sup>th</sup> June 1993, Annex 1 and Annex VII.

### Standards applied:

ISO 22884:2004. Castors And Wheels - Requirements For Applications Over 1.1 M/s (4 Km/h) And Up To 4.4 M/s (16 Km/h)

ISO 22877: 2004. Castors and wheels - Vocabulary, symbols and multilingual terminology

AS 4506:2005. Metal finishing - Thermoset powder coatings

**BS 5852:2006. Methods of test for assessment of the ignitability of upholstered seating by smouldering and flaming ignition sources**

**BS 7176:2007. Specification for resistance to ignition of upholstered furniture for non-domestic seating by testing composites**

**BS EN 1021-1:2006. Furniture. Assessment of the ignitability of upholstered furniture. Ignition source smouldering cigarette**

**EN 60601-1-2:2007. Medical Electrical Equipment - Part 1-2: General Requirements For Basic Safety And Essential Performance - Collateral Standard: Electromagnetic Compatibility - Requirements And Tests**


**EN 1970:2006. Adjustable Beds For Disabled Persons - Requirements And Test Methods**

**AS 1530.3. Methods for fire tests on building materials, components and structures - Simultaneous determination of ignitability, flame propagation, heat release and smoke release**

**AS 1192:2004. Electroplated coatings - Nickel and chromium**

**AS/NZS3200.2.38:2007, Medical electrical equipment - Particular requirements for safety - Electrically and manually operated medical beds for adult use**

**Authorised Signatory**

  
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**Name**

31/03/16  
\_\_\_\_\_  
**Date**

Director  
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**Position**