**DesignLights Consortium® Private Label Test Report Authorization Form**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [NAME OF ORIGINAL EQUIPMENT MANUFACTURER (OEM)], hereby represents and authorizes \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [NAME OF PRIVATE LABELER] to list our product(s) under their private label brand. Additionally, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [NAME OF OEM] grants \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [NAME OF PRIVATE LABELER] the permission to use the following test report(s) to represent the multiple-listing products.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [NAME OF PRIVATE LABELER] declares that the product(s) is identical in design and performance. Branding and packaging of the product are the only authorized changes.

Please list the OEM model numbers as they appear on the test report(s) and the corresponding Private Labeler’s model numbers below:

|  |  |  |
| --- | --- | --- |
| **TEST REPORT NO.** | **OEM MODEL NUMBERS** | **PRIVATE LABELER’S MODEL NUMBERS** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

\*Add rows to table as needed

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OEM Organization

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OEM Representative's Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OEM Representative's Title

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OEM Representative’s Phone

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OEM Representative’s Email

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Private Labeler Organization

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Private Labeler Representative's Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Private Labeler Representative's Title

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Private Labeler Representative’s Phone

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Private Labeler Representative’s Email

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date