**APPENDIX 13**

**Product Compliance/Safety Contact Form**

Please provide as much information as possible as this will enable the Primary Authority Officer and Amazon to deal with the matter expeditiously.

## SECTION A: PRODUCT /SELLER DETAILS

**Please note:**

* Officers are NOT required to complete this form twice. Any follow up test report notifications should be submitted via the PA register quoting the original unique PA register reference number along with any additional actions that you recommend Amazon take.
* Imports teams: where you are unable to provide an ASIN number/URL link, please locate and provide the following in the INFORMATION section below: (i) the “X” code or FBA number; (ii) destination address; and/or (iii) any seller details, if known.

|  |  |
| --- | --- |
| **ISSUE**  Please summarise your concern. |  |
| **RELEVANT LEGISLATION** |  |
| **INFORMATION**  To assist Amazon’s investigations please provide the following:   * Product Name * Product [ASIN number](https://www.amazon.co.uk/gp/help/customer/display.html/ref=help_search_1-1?ie=UTF8&nodeId=201889580&qid=1484668266&sr=1-1) or URL link * Customer Order Number * Customer email address * Seller email address   Please attach photos to the referral where available. |  |
| **RISK ASSESSMENT** | [ ] We believe that the risk is (high / medium / low).  [ ] We (have / have not) carried out a risk assessment.  [ ] We (have / have not) completed a screen test of this product.  [ ] We (have / have not) had independent testing of this product completed. If yes, please attach copies of any test reports, etc.  [ ] Test reports / results to follow |
| **RECOMMENDATIONS FOR AMAZON** | We would (strongly recommend/recommend) the following: |

## SECTION B: YOUR CONTACT DETAILS

Name:

Job Title/Position:

Authority:

Email:

Telephone:

SIGNED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE OF REQUEST: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_