



TESTING APPLICATION FORM

v.15.1.02

Revised July 12, 2018

Introduction -

This form is used to officially request that a product be tested by at the BACnet Testing Laborites (BTL) Lab. In addition to providing general information about the product, you **must** fill out the BTL Functionality Checklist included in the appropriate BTL Test Package available on the BTL website. The checklist describes the BACnet functionality of the product and will determine the testing required.

If you have any questions about the application form or the BTL Functionality Checklist, please contact the BTL Coordinator (btl-coordinator@bacnetinternational.org).

Your company must also sign and return the BTL Lab Standard Product Testing Agreement, a legal agreement that contains the terms and conditions for the BTL Lab's Product Testing program. The BTL Lab will not be able to process any product testing applications from your company until the agreement is in force.

The **non-refundable application fee of \$750.00 USD is required**. There is no BACnet International Member discount available on the application fee. **Payment is due with the submission of this application for non-members and BACnet International corporate members payment is due within net 30 days.**

Testing will not begin until the BTL Lab receives the application fee payment (in U.S. dollars drawn on a U.S. bank) or a company purchase order. **Payment should be made to BACnet International.** After the application and supporting documents are received and processed, a BTL Lab staff member will contact you to discuss arrangements for the testing.

This application and application fee are valid for one year after the date of Application. If BTL Testing has not begun within one year's time, the application fee (\$750.00 USD) is forfeited and a new BTL Testing Application must be submitted.

Please send **one completed application form for each product** and supporting documents to:

Attention: BTL Coordinator
BACnet International
PMB 321
2900 Delk Road Suite 700
Marietta, GA 30067-5350
Tel: +1 (770) 971-6003
Fax: +1 (404) 393-9506

Or by email to: btl-coordinator@bacnetinternational.org

IMPORTANT: Do not send any products to this mailing address—they will be returned! A mailing address for products will be provided to you at a later date.

Applicant Information -

Name: _____

Job Title: _____

Company and Division: _____

Address: _____

City & State/Province: _____

Zip/Postal Code: _____

Country: _____

Telephone Number: _____

Fax Number: _____

E-mail Address: _____

Product Information -

Product Manufacturer: _____

Product Name: _____

Product Model Number: _____

Firmware Revision to be Tested: _____

BACnet Protocol Revision Value:* _____

BACnet Vendor Identifier: _____

*Protocol Revision

The product must be at the current minimum Protocol Revision or higher. (See BTL Testing Policies)

Testing Information -

Is this New Testing or is this a Re-Test of a previously tested product? _____

Information from Previously Tested Product:

RBTO where Testing Occurred: _____

Test Case Number: _____

Note - For Previously Tested Products - Please indicate what function is new by highlighting your "x"

Has SoftDEL Systems participated in the development of this BACnet product? (Select Yes or No):

Yes No

If 'yes,' this creates a conflict of interest, and you must choose a different RBTO for BTL Testing. Contact information of the other RBTO's may be found on the BTL website.

BACnet Device Profile Supported -

(select as many as applicable by marking with an “x”)

<input type="checkbox"/> B-XAWS	[BACnet Cross-Domain Advanced Operator Workstation]
<input type="checkbox"/> B-AWS	[BACnet Advanced Operator Workstation]
<input type="checkbox"/> B-OWS	[BACnet Operator Workstation]
<input type="checkbox"/> B-OD	[BACnet Operator Display]
<input type="checkbox"/> B-ALSWS	[BACnet Advanced Life Safety Workstation]
<input type="checkbox"/> B-LSWS	[BACnet Life Safety Workstation]
<input type="checkbox"/> B-LSAP	[BACnet Life Safety Annunciator Panel]
<input type="checkbox"/> B-AACWS	[BACnet Advanced Access Control Workstation]
<input type="checkbox"/> B-ACWS	[BACnet Access Control Workstation]
<input type="checkbox"/> B-ACSD	[BACnet Access Control Security Display]
<input type="checkbox"/> B-BC	[BACnet Building Controller]
<input type="checkbox"/> B-AAC	[BACnet Advanced Application Controller]
<input type="checkbox"/> B-ASC	[BACnet Application Specific Controller]
<input type="checkbox"/> B-SA	[BACnet Smart Actuator]
<input type="checkbox"/> B-SS	[BACnet Smart Sensor]
<input type="checkbox"/> B-ALSC	[BACnet Advanced Life Safety Controller]
<input type="checkbox"/> B-LSC	[BACnet Life Safety Controller]
<input type="checkbox"/> B-AACC	[BACnet Advanced Access Control Controller]
<input type="checkbox"/> B-ACC	[BACnet Access Control Controller]
<input type="checkbox"/> B-RTR	[BACnet Router]
<input type="checkbox"/> B-GW	[BACnet Gateway]
<input type="checkbox"/> B-BBMD	[BACnet Broadcast Management Device]
<input type="checkbox"/> B-ACDC	[BACnet Access Control Door Controller]
<input type="checkbox"/> B-ACCR	[BACnet Access Control Credential Reader]
<input type="checkbox"/> B-General	[BACnet General]

Technical Contact Person -

Name: _____
Job Title: _____
Company & Division: _____
Address: _____
City & State/Province: _____
Zip/Postal Code: _____
Country: _____
Telephone Number: _____
Fax Number: _____
E-mail Address: _____

Payment of the Application Fee (check one) -

We will be sending a company purchase order separately.

If known, Testing Application PO #: _____

Final Testing PO #: _____

We will be sending a company check separately.

We pay by credit card, if so, please contact info@bacnetinternational.org

We will make an Electronic Funds Transfer.
(Transfer information will be sent upon receipt of this application)

A company check or a purchase order is enclosed.
Make checks payable to **BACnet International**.

Product Testing Fees - Hourly Billing Rate (check one) -

Currently a BACnet International Member and testing will be billed at the rate of \$75/hour.

I am applying for membership. Please bill me for membership and I will receive testing at \$75/hour.

Not a BACnet International Member. I understand that testing will be billed at \$150/hour, not the discounted member rate of \$75/hour. I also understand that 50% of the estimated testing fees and expenses must be pre-paid before testing will commence.

Please include the following with the BTL Testing Application –

- BTL Lab Functionality Checklist completed for device to be tested.
- BTL Lab Standard Testing Agreement, signed and dated.

BTL Lab - Testing Application Form 15.06

Applicant Signature:		Date:	
----------------------	--	-------	--

Version	Date	Author	Change
15.01	8-Sept-2017	E Hayes	<ul style="list-style-type: none"> • First Version for BTL Lab • Includes all BACnet BIBBS and Objects
15.02	11-Sept-2017	E Hayes	<ul style="list-style-type: none"> • Corrections
15.03	12-Sept-2017	E Hayes	<ul style="list-style-type: none"> • Added Network Port Object • Added new vs re-test
15.04	6-Oct-2017	K.Battle	<ul style="list-style-type: none"> • Added SoftDEL Systems Question • Corrections • Formatting
15.05	4-Dec-2017	N. Nardone	<ul style="list-style-type: none"> • Updated payment terminology • Language and instruction updates • Logo change
15.06	27-Mar-2018	K.Battle	<ul style="list-style-type: none"> • Optimized File • Formatting
15.1.01	12-Jul-2018	K.Battle	<ul style="list-style-type: none"> • Eliminate Duplicate Information from BTL Checklist