

## DECLARATION OF CONFORMITY

Manufacturer

Hoffrichter GmbH

Mettenheimer Straße 12-14

19061 Schwerin GERMANY

Medical Device Type

Ventilator

Medical Device Name (Name of Medical Device or Medical Device Family)

CARAT II pro

Type Number(s)

9LV203

Classification

Ilb

(according Annex IX of Directive 93/42/EEC considering the Directive 2007/47/EC)

Conformity Assessment Procedure

Annex II (without 4)

**Notified Body** 

(only if NB involved in conformity

assessment procedure)

TÜV SÜD Product Service GmbH

Ridlerstraße 65

80339 München

**GERMANY** 

NB Identification Number (only if NB involved in conformity assessment procedure)

0123

We, Hoffrichter GmbH, herewith declare under our sole responsibility that the aforementioned medical device meets all the provisions of the Directive 93/42/EEC considering the Directive 2007/47/EC which apply to it.

We further declare that the aforementioned medical device meets all the provisions of Directive 2011/65/EU (RoHS) which apply to it.

This Declaration of Conformity is valid until 31.10.2023 and is furthermore limited by the issuing of a revised declaration of conformity after any change of the product and/or by the expiration date of the certificate(s) issued by the notified body.

Schwerin, 05.11.2018

Dr. Michael Gregor, General Manager

Place, Date

Name, Function