



# Test Application Form

Fax-No. (+49 7930) 600-212 [Tel. -210]

Ordering Party	
RB <input type="checkbox"/> company	Client No.
Street	Telephone No.
Post Code, City	Fax No.
Department	Costing dept.(RB)
Name, First name	Order No.
Email @	Job /Project No.

Test Module Reservation		
	Exclusive usage upon request	
	Date from-to	Time from-to
High-speed oval		
Driving-dynamics area		
Brake-measurement tracks		
Handling course		
Fording and splash-water basin		
Uphill tracks		
Rough-road tracks		

Test Participants	
Name	Company
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	

Test Equipment Reservation		
	Date from-to	Time from-to
Brake Test Stand		
Trailer Dynamometer		<input type="checkbox"/> up to 2 p.m. <input type="checkbox"/> from 2 p.m.

Premises Reservation		
	Date from-to	
Car workshop + office	-	Number
Truck workshop + office	-	Number
Office container	-	Number
Conference room		<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3

Test Data	
No. of vehicles	Cars _____ Trucks _____ Buses _____ Bikes _____
<input type="checkbox"/> Prototype	
<input type="checkbox"/> Film/photographs	Management approval necessary
<input type="checkbox"/> Hazardous Tests	Monitored by Proving Ground personnel

With my signature below I confirm that my application is in accordance with the above-mentioned details. The Robert Bosch GmbH Utilisation Regulations and Utilisation Conditions for its Boxberg Proving Ground were handed over to me along with the price list. I accept these without reservation.

Date

Stamp/Signature

