**This Form To be completed by the supplier:**

|  |  |
| --- | --- |
| Date: | Click here to enter date. |
| Supplier Company Name: | Click here to enter supplier name. |
| Supplier Contact Name: | Click here to enter contact name. |
| Supplier Address (Street and Number): | Click here to enter street. |
| Supplier Address (Line 2): | Click here to enter address. |
| Supplier Address (Line 3): | Click here to enter address. |
| Supplier Address (City, State, Post Code / ZIP): | Click here to enter post code / ZIP. |
| E-Mail Address: | Click here to enter email. |

**Supplier Declaration:**

I have read the current version of the Tenneco Restricted Substance Management Standard and hereby certify the following for parts supplied to Tenneco (*please check the only one box that applies)*

[ ]  All parts supplied to Tenneco during the period covered by this certification do not contain substances designated as “prohibited” or “declarable” with respect to the current Tenneco Restricted Substances Management Standard.

[ ]  All parts supplied to Tenneco during the period covered by this certification do not contain substances designated as “prohibited” or “declarable” with respect to the current Tenneco Restricted Substances Management Standard, except as listed below:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Part Number | Substance | CAS Number | Weight |  Application Affected |  Declarable/Prohibited |
| Click to enter text. | Click to enter text. | Click to enter text. | Click here. | Click to enter text. | Click to enter text. |
| Click to enter text. | Click to enter text. | Click to enter text. | Click here. | Click to enter text. | Click to enter text. |
| Click to enter text. | Click to enter text. | Click to enter text. | Click here. | Click to enter text. | Click to enter text. |

**Supplier Certification:** (To be signed by Authorized Representative of the Supplier)

I hereby certify that I have authority to sign this certification on behalf of (Click to enter supplier’s name). I further certify that all the representations made in this certification are true and valid for parts supplied to Tenneco for duration of the Supply Agreement contract dated (Enter start date) to (Enter end date).

|  |  |  |
| --- | --- | --- |
| Click or tap here to enter name |  | Click or tap here to enter date |

 (Name of the responsible person) (Date)

|  |  |  |
| --- | --- | --- |
| Click or tap here to enter job title |  |  |

 (Job Title of the responsible person)