

CIRS Free Registration

Proposal

Welcome to the CIRS **Free Proposal** service!

When you choose to use this service, you choose the great value!

Please take 5 minutes to fill the following application form and send it to our online office: Edwin.wen@cirs-group.com. You will receive an electronic proposal within two business days with our professional knowledge.

To access your free proposal, please enter your e-mail address below.

 Email Address:

Confirm Email Address:

We have a strict [privacy policy](http://www.fda.gov/AboutFDA/AboutThisWebsite/WebsitePolicies/default.htm). CIRS does not collect personally identifiable information other than your e-mail address which is needed in order to provide the service. CIRS will not use or share your e-mail address for any other purpose.

**Statement of Confidentiality & Non-Disclosure**

This document contains proprietary and confidential information. All info submitted to **you** is provided in reliance upon its consent not to use or disclose any information contained herein except in the context of its business dealings with CIRS. The recipient of this document agrees to inform present and future employees of CIRS who view or have access to its content of its confidential nature.

The recipient agrees to instruct each employee that they must not disclose any information concerning this document to others except to the extent those matters are generally known to, and are available for use by, the public. The recipient also agrees not duplicate or distribute or permit others to duplicate or distribute any material contained herein without CIRS's express written consent.

CIRS retains all title, ownership and intellectual property rights to the material and trademarks contained herein, including all supporting documentation, files, marketing material, and multimedia.

BY ACCEPTANCE OF THIS DOCUMENT, THE RECIPIENT AGREES TO BE BOUND BY THE AFOREMENTIONED STATEMENT.

**Application Form for Your Free Registration Proposal**

|  |
| --- |
| **Basic Info of Your Establishment** |
| Establishment Name **Required.gif?3.21** |  |
| Country **Required.gif?3.21** |  |
| Official Website |  |
| Name of Contact Person **Required.gif?3.21** |  |
| Job Title |  |
| E-mail Address **Required.gif?3.21** |  |
| Phone |  |
| **Basic Info of Your Product** |
| **Items** | **Description** |
| Common Name In English **Required.gif?3.21** |  |
| Common Name In Chinese |  |
| Device Classification |  |
| Product Type **Required.gif?3.21** |  |
| Is This The First Time to Apply for Product Registration? Required.gif?3.21 |    |
| Clinical Trial Exemption |  |
| Have Your Product been Approved to Sale in Your Country? **Required.gif?3.21** |  |
| Intended Use **Required.gif?3.21** | (please state briefly the function, applicable scope, contraindication, etc. of your product.) |
| Structural Characteristics Required.gif?3.21 |  |
| Operation Principle or Mechanism Required.gif?3.21 |  |
| Intended for Use, Use Status, Use Part, Use Term and Use Method Required.gif?3.21 |  |
| Material Characteristics Required.gif?3.21 | (please list compositions and characteristics) |
| Similar Products in China or Abroad  | (please provide the name, manufacturer, or other supporting documents of the similar product. Or click no below) |
| Critical Risk of The Product Required.gif?3.21 |  |
| Other Comments |  |
| Attachments | Instruction Manual Required.gif?3.21 |
| Photos and/or Structural Diagram of The ProductRequired.gif?3.21 |
| Other Attachment |

**Note:**

1. Items marked with “****” are required to be filled.
2. You will receive our proposal within two business days after this questionnaire is submitted. We suggest you to provide the details in above questionnaire as much as you can in order to access our best service. And we really appreciate your kind cooperation!