UN 38.3 Lithium Battery Test Summary

Cell, Battery or Product Model Number						
Item Number:						
Item Name:						
	_					
Cell, battery, or product manufacturer's contact information						
Name						
Address:						
City: State:				ZIP: Country:		
Telephone: E-n			mail:		Webs	site:
Test Laboratory						
Name:						
Address:						
City: State:					ZIP: Country:	
Telep	Telephone: E-r		mail:		Website:	
	_		_			
Cell or Battery Description						
Cell or Battery:					Physical Description (dimensions, appearance):	
Cell or Battery Type:						
Watt-hour rating or Lithium Content:						
Completed Cell or Battery Weight:						
Unique Test Report ID Number:					Date of test report:	
List of Tests Completed: Additional Comments (or indicate compliance with other standards, e.g.,						
Yes	No		Pass	Fail	Underwriters Laboratory):	e compliance with outer standards, e.g.,
		Test T.1: Altitude simulation				
		Test T.2: Thermal test			Reference to assembled battery	testing requirements, if applicable (i.e., 38.3.3 (f)
		Test T.4: Classic			and 38.3.3 (g)).	
		Test T.4: Shock Test T.5: External short circuit				
					Reference to the revised edition	of the Manual of Tests and Criteria used and to
		Test T.6: Impact/Crush Test T.7: Overcharge			amendments thereto, if any:	
		Test T.8: Forced discharge				
Signatu	ıre witk	n name and title of signatory as a	n indicat	ion of	the validity of information n	provided: Date:
Signature with name and title of signatory as an indication of the validity of information provided: Date:						

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