

Request for HART Host Registration

DIRECTIONS: Please type or print. Submit only one product per form.

Contact Information

Company Name: _____

Street Address: _____

City, State, Zip: _____

Country: _____

Contact Name: _____

Contact's Internet Email Address: _____

Contact's Voice Phone: _____

Contact's Fax: _____

Master/Host/DD Application Information

Host System Model Name: _____

Host Profile(s): _____

Host Revision: _____ Protocol Revision: _____

File Format Revision: _____ Software Revision: _____

Location of test (FCG Lab/Client Address): _____

Requested Test Date*: _____

* Specify **Exact Date** for testing. If you need to change the date after the campaign is scheduled, please notify FieldComm Group **At least 6 weeks** prior to the scheduled date or cancellation fees will apply.

The manufacturer certifies that product being registered has met all requirements outlined in the HART Protocol specification and has passed the appropriate tests for the type of device being submitted. All test documentation must accompany the device being registered, this form and copy of the purchase order covering registration costs. Failure to provide appropriate documentation/files will result in registration delay.

- | | |
|-----------------------------|---------------------------|
| ✓ Physical Layer | ✓ DD Host: User Interface |
| ✓ Master Data Link Layer | ✓ DD Host: Data Modeling |
| ✓ DD Host: Basic Operations | ✓ DD Host: Methods |

Should FieldComm Group determine that this product is not in conformance with the HART Protocol Specification, the Manufacturer agrees not to represent the product as HART-Conformant until the product demonstrates compliance.