**APPENDIX B –Conformance Confirmation Pro Forma**

The following section is provided as a checklist of the key information that a Vendor must complete/submit in order to qualify for Certification.

## Type of Certification

*Section to identify what type of certification is being sought*

**\*Mark as appropriate**

|  |  |
| --- | --- |
| **Fully Verified** |  |
| **Self-Certification** | **X** |

## Device Information

*Required information for submission on the WITS website*

|  |  |
| --- | --- |
| Device Name | Talus T4e MKII |
| Hardware Version | 100 |
| Software Version | A19.07 |
| WITS Protocol Version Supported | 1.3 |
| Device Description  (max 140 characters) | Expandible highly connected RTU |
| Device Information URL  (for publication on WITS website) | https://www.se.com/uk/en/product-range-presentation/7765-talus-t4e/ |
| Device Information Link Text  (for hover over) |  |

## Validation of XML Device Profile to XML Schema

*Reference to the vendors profile that is attached in the submission and the version of the standard WITS schema it is designed against*

|  |  |
| --- | --- |
| Vendor’s WITS Device Profile Reference | WITSdeviceProfile T4e MK II A19\_07 (for WITS 1.3).xml |
| WITS Device Schema Used For Comparison | WITSdeviceProfileMay2013 |

## 

## Confirmation of Consistency of Test

*Section used to confirm the versions used for testing and certification matches all the documentation submitted.*

Enter the version numbers for the Software, Hardware and WITS Version and tick each box to confirm consistency across all areas of the submission.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Application Form** | **Device Profile** | **Test Results** |
| **Hardware Version** | 100 | 100 | 100 |
| **Software Version** | A19.07 | A19.07 | A19.07 |
| **WITS DNP3 Protocol** | 1.3 | 1.3 | 1.3 |

## Confirmation of Consistency of Tests with the Device Profile

*Section to confirm that all functionality in the device profile has been tested*

The table should show the sections that are supported and the test sections that have been completed against the standard checklist.

|  |  |  |
| --- | --- | --- |
| Capability  e.g. Communications, Health-check) | Supported in Device profile  (Tick as appropriate) | Function Test Reference  (Reference to tests carried out) |
| Identification / Device Profile | Yes | 2.1 |
| Object Group 0 | Yes | 2.2 |
| Clock Synchronisation | Yes | 2.3 |
| Configuration Management | Yes | 2.4 |
| Analogue, Binary and Counter data | Yes | 2.5 |
| Data Logging | Yes | 2.6 |
| Derived Data | Yes | 2.7 |
| Communications | Yes | 2.8 |
| Health Check Data Set | Yes | 2.9 |
| Applications Management | Yes | 2.10 |
| Download of Firmware | Yes | 2.11 |
| Secure Authentication | Yes | 2.12 |
| Backward Compatibility | Yes | 2.13 |

## Statement of Conformance

All required checks have been carried out satisfactorily and I confirm that the device is suitable for certification.

I understand that, as per the compliance document, the records of testing may be subject to scrutiny by the selected members of the WITS Protocol Standards Association Committee at any time.

**Print Name:** Matthew J Fletcher \_\_\_\_\_\_

**Signed:** 

**Date:** 04/04/2023 \_\_\_\_\_\_\_\_\_\_\_\_

## WITS Plugfest Testing (Optional)

This section is used to include any additional testing that may have been carried out on the device during a WITS Plugfest event.

|  |  |
| --- | --- |
| Event Location |  |
| Event Date |  |
| Device Tested |  |
| Master Station Details |  |
| Capabilities Tested |  |