WITS
Worldwide Industrial Telemetry Standards

Application for Self Certification of a WITS compliant Field Device

Please enter details in the text boxes shown; those coloured **red** are mandatory. This information will also be used to create an entry for the device in the WITS compliance matrix on the WITS website www.witsprotocol.org.

Device Details

Device Name	ATU/GCU MK2				
Hardware Version	1.1	Software Version	10.0 B11	WITS-DNP3 Protocol Version Supported	1.3
Device Description (max 140 characters)	Flygt's ATU/GCU MK2 Series is a robust low power Telemetry Outstation configurable to fit a wide range of applications within the utility, environmental and industrial markets.				
Device Information URL					
Device Information Link Text (for hover over)					

Company Details

Name	Xylem Water Solutions		
Address	Private Road No. 1 Colwick Nottingham, NG4 2AN United Kingdom		
Telephone	0115 940 0111	Fax	
Main Company Website URL			
Company Website Link Text (for hover over)			

Test Details

The Field Device has been tested with the following communications bearers (mark **X** for all that apply)

RS232		GPRS	X
PSTN		ADSL	
GSM		Radio	
Ethernet	X		

Network Protocols

IPv4 (TCP)	X	IPv4 (UDP)	
IPv6 (TCP)		IPv6 (UDP)	

Device has been tested to PSA test specification: yes (please confirm yes / no)

Certification Requirements

You are a fully paid up member of the PSA	yes	(please confirm yes / no)
You have signed a copy of the license and disclaimer documents	yes	(please confirm yes / no **)

*** If "no" then please return signed copies with this application.*

Supporting Documents

Please confirm that:

A WITS Device Profile (XML file) is attached with this application (if relevant, attach profiles for all communications bearers)	yes	(yes)
Test results and other files are archived and available for inspection if required (these are expected to include configuration files, applications files, comms logs etc)	yes	(yes)
Test results are attached with this application (recorded in a copy of the PSA test specification – as instructed in section 1.5 of the test specification)	yes	(yes)
A company logo image (JPEG, PNG etc.) is attached with this application		(yes / no)

Representative Details

Name	Tom Scholey		
Position (held in company)	ICA Business Development Manager		
Telephone	+44 7799628273	Mobile	
Email	tom.scholey@xylem.com		

Representative Declaration

The information provided with this application is correct to the best of my knowledge

Signed 

Date 06/24/2026

Please sign, scan and return completed form to Ed Oborn (WITS Secretary) at enquiries@witsprotocol.org

Independent Testing

Self certified Field Device may (optionally) be tested with WITS Verified Master Stations. Give details if any such testing has been done:

Master Station Vendor		**Device Name**	
		Software Version	
Name			
Address			
Representative's Name		**Position Held**	
Contact Details			
Telephone		**Mobile**	
Email			
Signature			**Confirming that tests have been carried out to a satisfactory level.**
Date			

Master Station Vendor		**Device Name**	
		Software Version	
Name			
Address			
Representative's Name		**Position Held**	
Contact Details			
Telephone		**Mobile**	
Email			
Signature			**Confirming that tests have been carried out to a satisfactory level.**
Date			