NON-CHILDREN'S PRODUCT

Ross Procurement, Inc.

Last Amended: October 2024

This packet includes required Ross forms for Non-Children's Product. All form fields highlighted in yellow are required.

The following must be completed and submitted:

- 1B. Non-Children's Product Cover Form
- 2B. General Conformity Certificate
- 3C. Reasonable Testing Program Form (if applicable)
- Applicable test reports







ROSS PROCUREMENT, INC.

1B. NON-CHILDREN'S PRODUCT COVER FORM

(This form is required for each product style)

ALL FORM FIELDS HIGHLIGHTED YELLOW ARE REQUIRED

SECTION I					
Vendor Name ("Vendor"	"):				
Factory Name ("Factory"	"):				
Product Name ("Product	t"):				
Vendor Style #:		Ross Pu	ırchase Order #:		
Lot/Batch # provided to			cch # provided to		
Testing Lab:		Ross:			
SECTION II					
1. Is the Product a Non-Children's product?	Yes	No			
2. What test method was used for the Product? (Select One)	Test of Actual Production No test program forms	•		Periodic Testing Program C. Reasonable Testing Program	
3. Is the Product continuously produced?	☐ Yes	□ No			
4. Is component part testing used?	☐ Yes	□ No			
SECTION III: RELIANCE CERTIFICATION FOR ALL PRODUCTS					
Vendor certifies that while Product was in its custody, Vendor exercised due care to comply with CPSIA.					
SIGNED:		DATE:			
NAME:		TITLE:			



ROSS PROCUREMENT, INC.

2B. GENERAL CONFORMITY CERTIFICATE (GCC)

(This form is required for each Non-Children's product)
ALL FORM FIELDS HIGHLIGHTED YELLOW ARE REQUIRED

PRODUCT IDENTIFICATION INFO	DRMATION					
Description of Product:						
Vendor Style #:		Ros	s Purchase Orde	er #:		
Actual factory location (City/County/Country):						
Date (Month/Year) of Manufacture of the Product:						
Lot/Batch # provided to Testing Lab:			/Batch # provide Ross:	ed		
TESTING INFORMATION		·		·		
Date (Month/Year) of Compliance Test:			Test Report Nu	umber:		
Compliance Test Location (City/County/Country):						
Name of 3 rd Party Testing Lab:						
Full Address:						
Telephone Number:						
IMPORTER INFORMATION						
Name of Importer:	Ross Procurement, Inc.					
Full Address:	5130 Hacienda Drive, Dublin, California, USA 94568					
Telephone Number: 925-965-4231						
RECORDKEEPING INFORMATION						
Custodian of Tost Bonout.	Ross Procurement, Inc./Ross Stores, Inc. Senior Director, Compliance					
Custodian of Test Report:	Full Address:	1000 Retai	Drive, Fort Mill, S	outh Carolina,	USA 29715	
	Telephone Number:	803-396-2	2467 E	mail Address:		CPSIA.RTP@ros.com

APPLICABLE RULES, BANS, REGULATIONS, AND STANDARDS

Ross Procurement, Inc. certifies that the above product complies with applicable rules, bans, regulations, and standards under applicable Acts enforced by the U. S. Consumer Product Safety Commission indicated below. The certification as the importer is based on information provided by the supplier and a test of the individual product or a reasonable testing program of testing by a laboratory(ies) obtained or conducted by the supplier.

THE RULES, BANS, REGULATIONS, AND STANDARDS APPLICABLE TO THIS PRODUCT ARE INDICATED ON THE NEXT PAGE.



APPLICABLE RULES, BANS, REGULATIONS, AND STANDARDS

HOME PRODUCTS

Check off all applicable	Rule, Ban, Standard or Regulation	Law/Act	Regulation Citation
	Furniture (Non-Children's)	CPSIA	16 CFR 1303

OTHER APPLICABLE STANDARDS

Check off all applicable	Rule, Ban, Standard or Regulation	Law/Act	Regulation Citation
	Products using Button Cell or Coin Batteries	CPSIA	16 CFR 1263
	Individual Button Cell or Coin Batteries	PPPA	16 CFR 1700
	Bicycle helmets	CPSA	16 CFR 1203
	Lawnmowers	CPSA	16 CFR 1205
	Swimming pool slides	CPSA	16 CFR 1207
	Lighters	CPSA	16 CFR 1210, 1212
	Automated residential garage door openings	CPSA	16 CFR 1211
	Candles with metal core wicks	EUCA	16 CFR 1500.12,
	Candles with metal core wicks	FHSA	16 CFR 1500.17(a)(13)
	Adult apparel	FFA	16 CFR 1610
	Adult PVC products	FFA	16 CFR 1611
	Adult carpets and rugs	FFA	16 CFR 1630/1631
	Other		



ROSS PROCUREMENT, INC.

3C. NON-CHILDREN'S PRODUCT REASONABLE TESTING PROGRAM FORM

(Required for Each Non-Children's Product Style Subject to Reasonable Testing Program)

ALL FORM FIELDS HIGHLIGHTED YELLOW ARE REQUIRED

SEC	SECTION I					
Ve	ndor Name ("Vendor"):					
Pro	oduct Name ("Product"):					
Ve	ndor Style #:		Ross Purchase Order #:			
SEC	SECTION II: DESCRIPTION OF REASONABLE TESTING PROGRAM					
For Product, please describe your Reasonable Testing Program by answering the following questions. If you have questions regarding these issues, please consult with your CPSC-approved, third-party testing lab.						
	QUI	ESTION	ANSWER			
1.	How often are samples te (Please provide a time fra					
	a. How is it determined	when to test the samples?				
2.	Are samples tested by a ti	hird-party testing lab?	Yes	No		
	a. If no, is in-house testi	ng performed?	Yes	No		
3.	How is the quantity of sar	mples tested determined?				