



Self-Certification Documentation

Company name: STF Friction GmbH
Company address (line 1): Am Schuermannshuett 26a
Company address (line 2): _____
City: Moers State/Province: NRW
Postal Code: D-47441 Country: Germany
Contact name: Bernhard Winzen Contact Title: _____
Contact Phone: +49 2841 998898 23 Email address: b.winzen@sts-friction.de

List of edge codes certified by the Company above and required compliance data:

| # | Compliance Level | Edge Code | Compliance Dates | |
|---|------------------|-----------|------------------|----------------|
| | | | From | Through |
| 1 | N | STS806 | April 10, 2019 | April 10, 2022 |
| 2 | N | STS807 | April 10, 2019 | April 10, 2022 |



Affidavit

I, the undersigned, on behalf of the above named Company, approve, assert, and certify as true and accurate all information shown in this document. I hereby assert that, under penalty of perjury under the laws of the states specified in the addendum below, the friction materials bearing the edge codes as set forth above are substantially identical to the products submitted for testing and meet the requirements of all applicable codes, regulations, rules and laws including those specified in the addendum below. I hereby authorize NSF ("NSF") to publicly post all information required to be made public by any United States laws in accordance with the law and any written contracts between NSF and the Company specified above. I hereby assert that all test results used to issue this self-certification comply with all requirements of the law and any contracts between NSF and the Company specified above. Company agrees that NSF shall have no liability to Company or any third party with respect to release of the above referenced Company data to any government agency with the legal authority to receive such data. I hereby assert that I have the authority to make this authorization and assertion on behalf of the Company specified above. Any written modifications of this Affidavit section are not acceptable and invalidate this self-certification. This document shall serve as proof of self-certification as required by the Better Brakes Rules WAC 173-901.

Addendum

The undersigned hereby attests to compliance with the following state laws:
Washington: Chapter 70.285 Revised Code of Washington, Chapter 173-901 Washington
Administrative Code

Signature:  _____

Printed name and title: Michael Spuckti, MD _____

Date and place signed: Moers, Oct. 23rd, 2019 _____

Contact email and phone number (if different from above): m.spuckti@sts-friction.de _____