

APPLICATION FOR REGISTRATION **Date:- \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please complete and return this questionnaire to enable International Community & Management Certifications. to accurately prepare a quotation for your organization. If additional information is required, then ICMC will contact you before sending a quote.

|  |  |
| --- | --- |
| Name of organization | |
| Physical address | Postal Address |
| Contact person :  Designation :  Telephone no. : Extn.:  Mobile no. :  E-mail address : | |
| Certification Standard(s): ISO 9001:2008 ISO14001:2004 ISO18001:2007  ISO 27001:2005 ISO 13485:2003 ISO22000:2005 HACCP  GMP ISO/TS16494 TQM CE Marking  Six sigma Other Standard | |
| Do you design the product: | |
| No. of sites: | |
| Effective No. of Employee | To calculate the effective no of employees, subtract duplication due to shift work. |
| Scope of Certification: | |
| Significant aspect in processes/Pollutant | List of Process |
| Specific Statutory and legal requirement(s) | Layout of Plant/Office |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Yes | No |  |  |  |
|  |  | Are the systems integrated |  |  |
|  |  | Do you want a preliminary audit | When |  |
|  |  | Are you ready for audit | When |  |
|  |  | Are the systems implemented | How long |  |
|  |  | Did consultants help you in develop your system | Who |  |
|  |  | Are you certified by some one else | Who |  |

I have read, understood and agree on the terms and conditions written on the back of this form.

Applicant Signature

Seal of company

|  |  |  |  |
| --- | --- | --- | --- |
| For ICMC Office use only | | Sample procedure | Comments |
|  | Resources reviewed |  |  |
|  | Resources adequate |
|  | Man days required |
|  | Quotation sent |

IC001.01