**Application Form**

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| --- | --- | --- | --- |
| **Company Name (English):** |  | | |
| **Company Name (Chinese):** |  | | |
| **Contact Person/Title:** |  | **Tel:** |  |
| **E-mail:** |  | **Fax:** |  |
| **Branch/Division (English):** |  | | |
| **Branch/Division (Chinese):** |  | | |
| **Corresponding Address** |  | | |
| (English): |  | | |
| (Chinese): |  | | |
| Certification Applied: | **ISO 9001:2015 ( ) ISO 14001:2015 ( )**  **ISO 45001:2018 ( )**  **ISO 50001:2018 ( ) ISO 22000:2018 ( ) ISO 27000:2013 ( )Others ( ):** | | |
| Scope of Cert. (English): |  | | |
| Scope of Cert. (Chinese): |  | | |
| Boundaries of the management system: |  | | |
| Number of staff: |  | | |
| Number of shift: |  | | |
| **Number of shift work employees** |  | | |
| Number of employees partially in scope |  | | |
| **Repetitive process within scope** |  | | |
| **Number of part time personnel** |  | | |
| **Number of temporary unskilled personnel** |  | | |

**For OHSMS Certification application only**

|  |  |
| --- | --- |
| **Number of accidents happened in your organization in the past 3 years:** |  |
| **Number of fatal accidents happened in your organization in the past 3 years:** |  |
| **Number of occupational diseases happened in your organization in the past 3 years:** |  |
| **Key Hazards and OH&S risks associated with processes, the main hazardous materials used in the processes, and any relevant legal obligations coming from the applicable OH&S legislation:** | |

**Personnel working on and working away from the organization’s premises:**

**For ISO 50001 Certification application only**

|  |  |
| --- | --- |
| Number of EnMS **effective personnel[[1]](#footnote-1):** |  |
| **Annual energy Consumption (TJ):** |  |
| **Number of energy sources:** |  |
| **Number of significant energy uses (SEUs):** |  |

We enclose herewith the following documentation to complete our application:

Copy of legal entity documentation (e.g. Business Registration or Certification of incorporation)/ Organization Chart/ Questionnaire – Contact, All Certification Sites, Project List (e.g. Construction Project)

For and on behalf of

(Authorized Signature and Company Chop)

|  |  |
| --- | --- |
| Signature with Co. Chop: |  |
| Name: |  |
| Title: |  |
| Date: |  |

**ACI Regulations**: We, the applicant specified above, recognize that Accredited Certification International Limited (ACI) operates the schemes of certifying business management system that are in accordance with the certification standards specified above and in accordance with Regulations which we have been provided with this application form. We also agree that if our application for certification is successful, and in consideration of ACI agreeing to proceed with our application an auditing our business, that we will comply with and be bound by the Regulations of the scheme. We further undertake to pay all cost required in relation to our application and any future certification. We understand and accept the condition that as holder of an accredited certificate, we are obliged to provide, on request, access to the assessment team of the accreditation body to witness of ACI’s auditing team performing an audit at our site.

**Questionnaire**

|  |  |  |  |
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| **Managing Director:** |  | | |
| **Tel:** |  | **Fax:** |  |
| **E-mail:** |  | | |

|  |  |
| --- | --- |
| **Industrial Sector:** |  |
| **Main Products/Services:** |  |
| **Main Raw Materials and purchased Parts used or processed:** | |
|  |  |
| **Manufacturing:** |  |
| **Turnover last Year:** |  |
| **Percentage Exports last Year:** |  |
| **Memberships in:** |  |
| **Industrial Associations:** |  |

**Which of the documents listed below are already on hand?**

|  |  |
| --- | --- |
| **Document Type** | **Remarks**  **(e.g. document title, revision etc..)** |
| **Management review report** |  |
| **Internal audit report** |  |
| **Quality policy** |  |
| **Quality objectives** |  |
| **Quality programs** |  |
| **Quality manual** |  |
| **Organizational manual** |  |

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|  | |
| Target date of Certification: |  | |

# Current certificate granted by other certification body for the standard and scope of

|  |  |
| --- | --- |
| Certification applied: |  |
| Consultant Involvement: |  |
| Learn about ACI from: |  |

# Any other information?

\*Please write in the box

|  |
| --- |
|  |

1. EnMS effective personnel should include a) top management; b) management representative(s); c) energy management team; d) person(s) responsible for major changes affecting energy performance; e) person(s) responsible for the effectiveness of the EnMS; f) person(s) responsible for developing, implementing or maintaining energy performance improvements including objectives, targets and action plans; g) person(s) responsible for significant energy uses. [↑](#footnote-ref-1)