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| --- |
| **Completion Guidance Notes**1. On receipt of this Questionnaire, Reliable Certification will prepare and submit a No Obligation proposal detailing the assessment, certification and other costs.
2. If you are an existing client applying for an Extension to Scope, please indicate additions only i.e. additional sites, activities, etc. in the relevant sections.
 |
|  |
| **Please return in electronic form or hard copy to the Reliable Certification office:** |

|  |  |
| --- | --- |
| **Name of Company:** |  |
| **Address:** |  |
|  |
| **Billing Address:** (If different from above) |  |
| **Contact Person:** |  | **Designation:** |  |
| **Phone:** |  | **Mobile:** |  |
| **Fax:** |  | **e-mail:** |  |
| **NTN/SECP:** |  | **e-mail (CE):** |  |
|  |
| **Standard *(Please Tick)*:** | [ ]  **ISO 9001:2015** | [ ]  **ISO 14001:2015** | [ ]  **ISO 45001:2018** |
| [ ]  **Other (please specify) ISO 21001:2018 or any other** |
| **Activity Type:** | [ ]  **Initial Certification** | [ ]  **Re-certification**  | [ ]  **Transfer / ETS**  |
| **Total Number of Employees in the activities to be Certified:** |  | **No. of Shifts:** |  |
| **No. of Employees at Main Site (if different from above)** |  |
| **Total No. of Sites (address mention above + additional sites):** |  |
| **Location 2 Address:** |  | **Employees at Site 2:** |  |
| **Location 3 Address:** |  | **Employees at Site 3:** |  |
| ***Continue Separate Sheet if Necessary***  |
| **Language of the Documents:** |  |
| **Name of Consultant (If any):** |  |
|  |
|

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Shifts** | **Top Management** | **Design / Research & Development** | **Production** | **Quality Control / Assurance** | **Stores / Warehouse** | **Purchase / Admin / HR / Accounts** | **Marketing** | **Loading / Unloading** | **Maintenance person** |
| **General** |  |  |  |  |  |  |  |  |  |
| **Shift 1** |  |  |  |  |  |  |  |  |  |
| **Shift 2** |  |  |  |  |  |  |  |  |  |

 |
| **Scope of Certification:** |  |
|  |
| **Core Processes or Activities on site(s) related to certification scope:** |  |
| **Outsource Processes or Activities (If any):** |  |
|  |
| **Please give details of Extension to Scope – Geographical / Technical: (for existing client)** |
|  |
|  |

**For ISO 14001:2015 Standard**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Has an Initial Review been Performed?** | [ ]  | Yes | [ ]  | No |
| **If yes, please indicate below how the expertise was provided:** |
| **In-House:** | [ ]  | **Consultancy:** | [ ]  | **Other (please describe):** |  |
| **Describe your site as appropriate *(industrial / urban / commercial / residential):*** |  |
| **Has an Environmental Policy been Issued?** | [ ]  | Yes | [ ]  | No |
|  |
| **List Significant Aspects / Effects and Applicable Legislation in order of Priority / Importance Below:**  |
| **Significant Aspects / Effects** | **Most Applicable Legislation** |
|  |  |
|  |  |
|  |  |
| **List any Licences and Authorisations Applicable to EMS, i.e. Process Authorisation, Discharge, etc.** |
|  |

**For ISO 45001:2018 Standard**

|  |  |
| --- | --- |
| **How Large is your Site in square meter / square foot?** |  |
| **Have Formal Risk Assessments been conducted?** | [ ]  | Yes | [ ]  | No |
| **Do you have / use / perform any of the following items / activities or have any of these hazards:** |
| **Manual Handling Steam Boiler / Receivers** | [ ]  | **Liquefied Petroleum Gas LPG** | [ ]  |
| **Woodwork** | [ ]  | **Railways** | [ ]  |
| **Abrasive Wheels** | [ ]  | **Machine Tools** | [ ]  |
| **Noise** | [ ]  | **Maritime Operations** | [ ]  |
| **Manual Handling** | [ ]  | **Road Haulage** | [ ]  |
| **Offshore Operations** | [ ]  | **Gas / Safety Appliances** | [ ]  |
| **Food Preparation / Processing** | [ ]  | **Compressed Air** | [ ]  |
| **Docks** | [ ]  | **Construction / Building** | [ ]  |
| **Transport of Dangerous Material** | [ ]  | **Pressurised Systems** | [ ]  |
| **Electrical Plant / Equipment** | [ ]  | **Pesticides / Herbicides** | [ ]  |
| **Working at Heights / Depths** | [ ]  | **Diving** | [ ]  |
| **Lifting Equipment** | [ ]  | **Armaments / Weapons** | [ ]  |
| **Ionising Radiation** | [ ]  | **Agriculture** | [ ]  |
| **Lead / other Material** | [ ]  | **Explosives** | [ ]  |
| **Toxic Waste Treatment / Disposal** | [ ]  | **Asbestos Removal** | [ ]  |
| **GM Organisms** | [ ]  | **Others** | [ ]  |
| **List any Licences and Authorisations Applicable to OH&S MS, i.e. Storage Licence, Boiler Certificate, etc.** |
|  |

**Client Authorization:**

|  |  |
| --- | --- |
| Name:  |  |
| Designation: |  |
| Date:  |  |
| Sign & Stamp:  |  |

**---------------------------For Reliable Use Only---------------------------**

|  |  |
| --- | --- |
| Application Reviewer:  |  |
| Application Status  | Accepted [ ]  | Rejected [ ]  |
| Reason for Rejection |  |

**Authorized By:**

|  |  |
| --- | --- |
| Name:  |  |
| Designation: |  |
| Date:  |  |
| Sign & Stamp:  |  |

**Note**: Please fill out this form and submit it to: info@reliablecert.com