



Global Assessment Services

{Certification Body}

Application for Certification of Management Systems

In order for us to provide an accurate quote, we need to determine the processes and activities that are involved within your organization. We also need to know about the state of readiness of your Management System prior to certification.

Basic Contact Information

Company Name			
Contact Name		Position	
Address			
Please Specify the details of Consultants, if used			

Organizational Details

2.1 Please describe fully the scope or services of your organization.

Examples:

1. A typical scope for a manufacturing company - Design, manufacture, installation and repair of butterfly valves for the oil industry.
2. A typical scope for the service sector
- Provision of contract and temporary personnel to industry, local authorities and hospitals

2.2 Multi site (Please describe your locations of Sites, other offices, offshore, etc within the framework – if applicable)

Total Number of Employees:		
Comprising of:		
Managerial		
Sales		
Purchasing		
Design		
Servicing		
Production		
Quality		
Stores & Shipping		
Installation		
Others		
2.4 Do any staff work shifts?	☐ YES	☐ NO



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Your Requirements

ISO 9001 (Quality Management System)	☐	
ISO 14001 (Environmental Management System)	☐	
OHSAS 18001 (Safety Management System)	☐	
ISO 20000 (IT- Service Management)	☐	
ISO 27001 (IT- Security Management)	☐	
ISO 13485 (QMS – Medical Devices)	☐	
HACCP (Food Safety)	☐	
ISO 22000 (Food Safety Management)	☐	
ISO 10002 (Complaints Management)	☐	
ISO 29001 (Petroleum, Petrochemical and Natural Gas)	☐	
Others (Indicate on next column)	☐	

The information supplied above will be used to provide you with a quotation for our certification services.
This quotation is totally dependent upon the information given above. We must therefore reserve the right to amend our quote should the information be found to be inaccurate or incomplete.

Name	
Position	
Date	

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