

Organization name:																							
Head Office	Address																						
	Total number of employees																						
Branch/ Additional site information	<p>Is your company have branch or additional sites under the HQ to be accredited? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>Please attached list of Branch/Site (Branch Name, Address, Num of employees) if any.</i></p>																						
Please select your industry	<table border="0"> <tr> <td><input type="checkbox"/> Agriculture, Forestry & Fishing</td> <td><input type="checkbox"/> Mining and Quarrying</td> </tr> <tr> <td><input type="checkbox"/> Accommodation & Food Services</td> <td><input type="checkbox"/> Oil, Gas & Petroleum</td> </tr> <tr> <td><input type="checkbox"/> Chemicals</td> <td><input type="checkbox"/> Engineering Services</td> </tr> <tr> <td><input type="checkbox"/> Industrial & Manufacturing</td> <td><input type="checkbox"/> Mobility & Automotive</td> </tr> <tr> <td><input type="checkbox"/> Medical & Life Sciences</td> <td><input type="checkbox"/> Energy & Power</td> </tr> <tr> <td><input type="checkbox"/> Construction</td> <td><input type="checkbox"/> Consumer goods & Retail</td> </tr> <tr> <td><input type="checkbox"/> Supply Chain, Logistic</td> <td><input type="checkbox"/> IT & Telecommunication</td> </tr> <tr> <td><input type="checkbox"/> Public Administration</td> <td><input type="checkbox"/> Information & Communication</td> </tr> <tr> <td><input type="checkbox"/> Education</td> <td><input type="checkbox"/> Social Activities</td> </tr> <tr> <td><input type="checkbox"/> Financial Intermediation, Real Estate, Renting</td> <td><input type="checkbox"/> Services (Professional, Technical, Administrative & Support services)</td> </tr> </table>			<input type="checkbox"/> Agriculture, Forestry & Fishing	<input type="checkbox"/> Mining and Quarrying	<input type="checkbox"/> Accommodation & Food Services	<input type="checkbox"/> Oil, Gas & Petroleum	<input type="checkbox"/> Chemicals	<input type="checkbox"/> Engineering Services	<input type="checkbox"/> Industrial & Manufacturing	<input type="checkbox"/> Mobility & Automotive	<input type="checkbox"/> Medical & Life Sciences	<input type="checkbox"/> Energy & Power	<input type="checkbox"/> Construction	<input type="checkbox"/> Consumer goods & Retail	<input type="checkbox"/> Supply Chain, Logistic	<input type="checkbox"/> IT & Telecommunication	<input type="checkbox"/> Public Administration	<input type="checkbox"/> Information & Communication	<input type="checkbox"/> Education	<input type="checkbox"/> Social Activities	<input type="checkbox"/> Financial Intermediation, Real Estate, Renting	<input type="checkbox"/> Services (Professional, Technical, Administrative & Support services)
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Operations & Functions	<input type="checkbox"/> 1. Design, production/services and distribution of the finished product <input type="checkbox"/> 2. Control over the design, production/services is elsewhere <input type="checkbox"/> 3. Production of the finish product only. Design/Services is controlled elsewhere If 2 or 3 is ticked, do you sell and distribute the finish product? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> 4. Trade Agent/ Other services <i>Please state service:</i>																						
Please indicate below the applicable scheme that the organization wish to be assessed:																							
<input type="checkbox"/> ISO 37001 <input type="checkbox"/> ISO 9001 <input type="checkbox"/> ISO 14001 <input type="checkbox"/> ISO 45001																							
Please indicate below the type of certification that the organization wish to be assessed:																							
<input type="checkbox"/> Initial <input type="checkbox"/> Recertification <input type="checkbox"/> Transfer of Certification Body																							
Reference Contact																							
Name		Position																					
Email		Phone Number																					

FOR OFFICE USE ONLY:

Information received by	:	_____
Designation	:	_____
Date	:	_____
Authorised officer that provide the details information	:	_____
Remarks/Comments	:	_____