*Thank you for your interest in our services. Please provide us with the following information, which we will use to prepare an individual and binding quotation*.

**Return by Fax to 021-78837336; by email to tety@tuv-nord.com**

Terima kasih atas ketertarikan Anda pada layanan kami. Mohon dilengkapi daftar pertanyaan dibawah ini, yang akan kami gunakan untuk menyiapkan penawaran yang mengikat.

***General information*** *(Only main location / Company headquarters)*

Informasi umum (Hanya lokasi utama / kantor pusat Perusahaan)

|  |  |
| --- | --- |
| *Company:with legal form* Perusahaan:Berbentuk hukum |  |
| *Address:*Alamat : |  |
| *Postcode, Town:*Kodepos, Kota |  | *Country:*Negara |
| *Contact:*Kontrak: | *Mr/Mrs (First name/Second name)* Bapak/Ibu (nama depan/nama kedua) |
| *Function:*Fungsi | [ ]  *Quality Representative*; [ ]  *Other:*  Wakil Manajemen (MR) Lain-lain |
| *Telephone:*Nomor Telepon |  | *Internet:*Internet | www. |
| *Telefax:*Nomor Fax |  | *E-Mail:*Email |  |
| *Sector:*Sektor |  |

1. ***No. of employees at the location*** *(if appropriate, total employees in companies employed in companies for combined audit)*

Jumlah karyawan di lokasi (jika sesuai, jumlah karyawan di perusahaan yang dipekerjakan di perusahaan untuk gabungan audit)

|  |  |  |  |
| --- | --- | --- | --- |
| *Total no. of employees (full time/part time worker):*Total karyawan (pekerja penuh waktu / paruh waktu) |  | *In terms of full-time employees* karyawan penuh waktu |  |
| *of which no. of employees in shift working*:karyawan shift kerja |  | *3no. of sub-contractor employees:*karyawan sub-kontraktor |  |
| *[[1]](#footnote-1)no. of temporary employees*:karyawan kontrak |  |  |  |
| *Number of Shifts:*Jumlah Shifts |  |  |  |
| *Distance of location:*Jarak tempuh ke lokasi  |  | Hours /Jam |  |

1. **Which certification do you require?**

Sertifikasi apa yang anda butuhkan?

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| [ ]  | ISO 9001:2015 | [ ]  | ISO 14001:2015 | [ ]  | ISO 45001:2018 | [ ]  | OHSAS | [ ]  | ISO 37001:2016 |
|  |  |  | (Please fill in annex I) |  | (Please fill in annex III) |  |  |  | (Please fill in annex II) |
| [ ]  | *Further standards and services are shown Point 7* Standar dan layanan ditunjukkan pada Poin 7 | [ ]  | Your own request:  |
|  |
|  |  | [ ]  | Others\_\_\_\_ |  |
|  |

1. ***Factors which can influence the time needed for the audit and the cost***

Faktor yang dapat mempengaruhi waktu yang dibutuhkan untuk audit dan biaya

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| [ ]  | *No in-house development*Tidak ada pengembangan in-house | [ ]  | *Low process risk*Proses rendah risiko | [ ]  | *Mature Management System* Sistem Manajemen Matang | [ ]  | *Family-owned company or simple processes*Perusahaan milik keluarga atau proses sederhana |
| [ ]  | *High-degree of regulation (e.g. aerospace, refinery and chemical industry, fishing vessels, mining, food, drugs, etc)*Regulasi tingkat tinggi | [ ]  | *High process risk*Proses tinggi risiko | [ ]  | *Large location with small no. of employees* Lokasi yang besar dengan sedikit karyawan | [ ]  | *Small location with large no. of employees* Lokasi kecil dengan banyak karyawan |
| [ ]  | *Staff speaking in more than one language (requiring interpreter(s)*Staf berbicara dalam lebih dari satu bahasa (membutuhkan penerjemah) | [ ]  | *Client preparedness for OH&SMS certification (e.g. already subject to periodical audits by the National Authority for a mandatory governmental OH&SMS scheme (for 45001 only)*Kesiapsiagaan klien untuk sertifikasi OH & SMS (mis. Sudah menjalani audit berkala oleh Otoritas Nasional untuk skema OH & SMS pemerintah yang diwajibkan (untuk 45001) | [ ]  | *Prior knowledge of the client organisation’s management system (e.g already certified in another voluntary OH&SMS Scheme by same CAB (for 45001 only)*Pengetahuan sebelumnya tentang sistem manajemen organisasi klien (mis. sudah disertifikasi dalam skema OH & SMS sukarela lainnya oleh badan sertifikasi yang sama (untuk 45001) |  |  |
| *Is combined certification required?* Gabungan sertifikasi yang dibutuhkan? | [ ]  | No | [ ]  | Yes: Please fill in Page 3  |
| *Does an integrated management system already exist in the company?* Apakah sistem manajemen terpadu sudah ada di perusahaan? | [ ]  | No | [ ]  | Yes, according to:  |  |
| *Is an integrated certification audit (IMS Audit) required?* Audit terpadu (IMS Audit) diperlukan? | [ ]  | No | [ ]  | Yes, according to the standards: |
|  |  | [ ]  | ISO 9001 | [ ]  | ISO 14001 |
|  |  |  | [ ]  |  | [ ]  |  |
| *Were you supported by a consultant?* Apakah Anda didukung oleh konsultan? | [ ]  | No | [ ]  | Yes; by: |  |
|  |  |  |

1. ***Scope / Business operation to be certified***

Lingkup / operasi bisnis yang akan disertifikasi

*(for example: "Product Design, Product Development, manufacture and sale of...", "Trade with..." etc.;
Special feature with ISO TS 16949: activities adding value and product development, if applicable)*

(contoh: "Desain Produk , Pengembangan Produk, pembuatan dan penjualan dari ...", "Perdagangan dengan ..." dll; Fitur khusus dengan ISO TS 16949: aktivitas menambahkan nilai dan pengembangan produk, jika berlaku)

|  |
| --- |
|  |

1. ***Is your company already certified? (existing certifications?)***

Apakah perusahaan Anda sudah memiliki sertifikasi? (sertifikasi yang ada?)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Certificate No.*No. Sertifikat | *Standard /* *Directive etc.*Standar | *Certification Company*Perusahaan Sertifikasi | *Date of certification audit* Tanggal Audit Sertifikasi | *Certificate valid until*Sertifikat berlaku sampai |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| [ ]  | No | [ ]  | Yes  |

1. ***Is this a transfer audit?***

*If yes, for which standard and Please fill in FMLF-TNI-082 Annex 6 Rev.00 Transfer Audit*

|  |  |  |  |
| --- | --- | --- | --- |
| *Certificate No.*No. Sertifikat | *Standard /* *Directive etc.*Standar | *Certification Company*Perusahaan Sertifikasi | *Transfer in which audit cycle (SA1/SA2/RC)*Transfer di cycle audit (SA1/SA2/RC) |
|  |  |  |  |
|  |  |  |  |

1. ***Further required certifications and possible annexes***

Sertifikasi yang diperlukan lebih lanjut dan kemungkinan lampiran

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| [ ]  | ISO 14001 |  | [ ]  | HACCP (Codex Alimentarius) |  |
| [ ]  | ISO 27001 |  | [ ]  | ISO 22000 |  |
| [ ]  | OHSAS |  | [ ]  | GMP \_\_\_ |  |
| [ ]  | TS16949 |  | [ ]  | ISO 37001  |  |

1. ***Are you a member of an industry, professional or trade association/federation?
(Please name)***

Apakah anda anggota asosiasi industri, profesi atau perdagangan / federasi?(Mohon nama)

|  |
| --- |
|  |

1. ***Any further information you think may be important for us?***

Informasi lebih lanjut yang menurut Anda penting bagi kami

*Example: language differences, safety conditions issue at your site, threats to impartiality, etc.*

Contoh: perbedaan bahasa, kondisi keamanan yang terjadi di situs Anda, ancaman terhadap ketidakberpihakan, dll.

|  |
| --- |
|  |

1. ***Applicable for General Contractor Company***

Berlaku untuk Perusahaan Konstruksi

**List of Project:**

|  |  |  |
| --- | --- | --- |
| **No.** | **On Going Project**Project berjalan | ***Project done within last 1 year***Project yang telah dilakukan dalam 1 tahun terakhir |
| **Project name** | **Location** | **Project name** | **Location**  |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| .... |  |  |  |  |

1. **Requested information / documents:**

The following documents must be sent to TUV NORD Indonesia after the contract is approved.

Dokumen-dokumen berikut harus dikirim ke TUV NORD Indonesia setelah kontrak disetujui.

Please thick (x) your availability documents below:

Harap tik (x) dokumen ketersediaan Anda di bawah ini:

| **Availability** | **Information / record** |
| --- | --- |
| yes | No |
|  |  | Quality Management Manual with Revision including scope, details of justification for any exclusions, policy, targets |
|  |  | Legal documents (SIUP/SBU/TDP/NPWP, etc.) |
|  |  | Current organisation chart of the company |
|  |  | Business Process Map |
|  |  | Results / summary of internal audits within the last 12 months  |
|  |  | Results of the management review since the last external audit  |
|  |  | Audit report and Nonconformity Management of the last certification body (additionally for transfer audits only) |
|  |  | Evidence of the last certification body that nonconformities are “closed” (additionally for transfer audits only) |
|  |  | Certificates of the last certification body (additionally for transfer audits only)  |

*We agree that this information may be stored for the purposes of drafting an offer and processing any resulting order or transactions.*

Kami setuju bahwa informasi ini dapat disimpan untuk tujuan merancang penawaran dan memproses pesanan atau transaksi.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| Place/Date |  | Name |  | Signature\*) |

\*)*If sending by email, the sender's address will be accepted*

\*)Jika dikirim melalui email, cukup membubuhkan alamat email pengirim pada bagian “*signature*

***Locations multisites, temporary locations and outsourced processes***

***Please add other location in seperate sheet (if any)***

Lokasi multisites, lokasi sementara dan proses alih daya

Mohon tambahkan lokasi lain dalam lembaran terpisah (jika ada)

***Location No.***

**Nomor Lokasi \_\_\_\_**

|  |  |
| --- | --- |
| *Company:with legal form*Perusahaan:Berbentuk hukum |  |
| *Address:*Alamat : |  |
| *Postcode, Town:*Kodepos, Kota |  | *Country:*Negara: |
| Contact:Kontrak | Mr./Mrs. (First name / Second name) Bapak/Ibu (nama depan / nama kedua) |
| Function:Fungsi | [ ]  Quality Representative; [ ]  Other:  Wakil Manajemen (MR) Lain-lain |
| Telephone: |  | E-Mail: |  |
| *No. of employees:*Karyawan  |  | *In terms of full-time employees (not for TS16949)*Karyawan penuh waktu ( bukan untuk TS 16949) |  |
| *No. of employees in shift working:*Karyawan Shift |  |  |  |
| *No. of temporary employees\*:*Karyawan Kontrak |  |   |  |
| Outsourced process | [ ]  Store |  [ ]  Other: |  |
| *Temporary location*Lokasi Sementara | [ ]  Constr.site  |  [ ]  Project: |  |

\*) *temporary employees from employment agencies*

 Pegawai sementara dari agen tenaga kerja

|  |  |  |
| --- | --- | --- |
| *Disctance to site location from HO / Airport*Jarak tempuh lokasi site dari HO / Bandara |  | Hours/Jam |

***Scope / Business operation to be certified***

Lingkup / operasi bisnis yang akan disertifikasi untuk sites

*(for example: "Development, manufacture and sale of...", "Trade with..." etc.;*

(contoh: "Pengembangan, pembuatan dan penjualan ...", "Perdagangan dengan ..." dll;

|  |
| --- |
|  |

***Evaluation by the Certification Body***

Evaluasi oleh Lembaga Sertifikasi

1. ***Company details complete (Questionnaire filled complete)?***

Rincian perusahaan lengkap (Questionnaire diisi lengkap)?

 *yes* *no* *Remarks / additionally required information:*

 ya tidak keterangan / tambahan informasi yang di butuhkan

1. ***Implementation and application of the management system sufficient (see availability documents poin 11) ?***

Implementasi dan penerapan sistem manajemen yang memadai (lihat kelengkapan dokumen poin 11)?

 *yes* *no* *Remarks / additionally required information:*

 ya tidak keterangan / tambahan informasi yang di butuhkan

1. ***In case of multisite certification (FMLF-TNI-082 Annex 7 Rev.00 Multi Site Eligibility Check, not applicable for ISO 37001,)***

Dalam hal sertifikasi multisite (cek FMLF-TNI-082 Annex 7 Rev.00 Multi Site Eligibility, tidak berlaku untuk ISO 37001)

*Number of sample site need to be audited: sites*

Jumlah situs sampel yang perlu diaudit:­­­ \_\_\_\_\_situs

1. ***Is the scope of certificate and mandays audit appropriate?***

Apakah ruang lingkup audit sertifikat dan manday sesuai?

 *yes* *no* *Remarks / additionally required information:*

 ya tidak keterangan / informasi yang dibutuhkan

1. ***If any, is the traveling mandays audit has enough?***

 Jika ada, Apakah traveling mandays sudah mencukupi?

 *yes* *no* *Remarks / additionally required information:*

 ya tidak keterangan / informasi yang dibutuhkan

1. ***CB has the competence personal (auditor or expert) to perform the audit activity?***

CB memiliki kompetensi pribadi (auditor atau ahli) untuk melakukan kegiatan audit?

 *yes* *no* *Remarks / additionally required information:*

 ya tidak keterangan / informasi yang di butuhkan

1. ***Any other points influencing the certification activity are taken into account? (language, safety conditions, threats to impartiality, etc. – See Poin 9)***

Poin lain yang mempengaruhi kegiatan sertifikasi diperhitungkan? (bahasa, kondisi keamanan, ancaman terhadap ketidakberpihakan, dll. – lihat poin 9)

 *yes* *no* *Remarks / additionally required information:*

 ya tidak keterangan / informasi yang di butuhkan

Jakarta,

 *Place / Date Head of CB / Auditor Signature* Tempat / Tanggal Tanda Tangan Kepala Badan Sertifikasi/ Auditor

1. *Inaccuracy the number of employees can affect the number of mandays in contract and the value of offer/* Ketidaktepatan jumlah karyawan dapat mempengaruhi perubahan jumlah mandays dalam kontrak dan nilai penawaran

2 *Temporary employees including temporary unskilled personnel may be employed in considerable numbers to replace automated processes caused a low level of technology* / karyawan kontrak termasuk personil kontrak yang tidak terampil dapat digunakan dalam jumlah besar untuk menggantikan proses otomatis

3 *For 45001 it shall also include personnel from contractors and sub-contractors performning work or work related activities that are under the control or influence of the organization.* [↑](#footnote-ref-1)