Client Profile

Energy Management Systems Certification

(in legally correct form as this will appear on the certificate)

Main Address



Invoice Address (If different to main address)

Client Profile Completion Guidance Notes

Information provided will be used for the evaluation of the audit time in our quotation and assignment of competent verifiers. Please complete all boxes if possible. Insert N/A if the answer is not applicable.

Company

Website

A. Company / Organisation Details

Company Name

Address Line 2
Town / City

County									
Post Code									
Telephone	()								
Main Contact									
(inc. position)									
Telephone	()								
Mobile									
E-mail									
Total number of full time Staff									
Total number of sites									
Type of Industry	Type of Industry								
Main technology and / or processes used, and products manufactured									
Annual turnover (ESOS requirement)									
Total energy consump	tion / usage		_						
Are any of the process If yes please specify:					g. Design, manufacturing, installation etc?) Yes/No				
Please indicate how yo	ou are organised	and managed							
Breakdown of job fund	etion (e.g. 3 Manage	ement, 5 admin, 3 des	sign, 10 wor	kshop, 4 archit	ects, 2 own installers ect.)				
Main Activities / Locat	ion(s)								
Address	ses	Postal / Area Code	No. of People	No. of Shifts	Processes / Activities at this location				
Head Office:									
Site 2:									
Site 3:									
(If there are more addre	sses, please provi	de on a separate s	sheet to th	is table)					
Please give us an id	ea of the readir	ness of your Ma	nageme	nt Systems	s for Certifications				
Implementation date of the system: DD/MM/YYYY			С	Certification required on / before: DD/MM/YYYY					

Client Profile





Have management reviewed the system? Yes/N	lo	Have internal audits been done? Yes/No							
				Г					
Energy data availability	Centr	alized at head o	ffice	De-d	centralized				
What processes are used for collecting, proce consolidating and reporting energy data (e.g. applied software etc.)?	essing,			·					
What type of documentation and in which for the energy data available (e.g. Excel sheets)?	nat is								
What is (are) the main objective(s) of the certification?									
What type of organisation shall be certified (e companies, department, NGO, university, etc.									
How many sites have been considered for the calculation and certification?									
Are there any differences between the sites (e production sites, administrative offices, mark offices etc.)?									
Are there any particularly large or important o How many? Where are those?	ffices?								
	(1004.4004	\	44						
D. Environmental Management System Significant Environmental Aspects / Impacts:	ns (15014001	Informatio	n (if applica	able)					
(eg. Waste, Energy usage, Chemicals)									
Most applicable Environmental Legislation:									
Licences and Authorisations, that you have: (i.e. IPPC Permits, Discharge Consents, etc.)									
EMS contact, if different from the one shown in Section A									
Name:	Tel. / mob:								
Position:	E-mail:								
E. Additional Information									
Have consultants been involved in the calcula	Yes		No						
If yes, please provide name of consultancy:				1					
Are there results available for recent assessm	Yes		No						
Are any special safety requirements or securit	Yes		No						
If yes please specify:									
How did you hear of TÜV UK?									
Would like more information of the following:			14064 bon	ISO14 EMS	001 🗆	ISO 18001 OHSAS			
(please tick box)	Sustain	ability Report As	ssurance: G	RI – G4		ISO 9001			
	AA1000	AS(2008)				QMS			

F. Contact

Please fill out the questionnaire and send it to:

Bhooshan Garge

TÜV UK LTD

TÜV NORD GROUP

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