**1. General information on company / location**

(for companies with multiple locations, please complete the form for each individual location)

|  |
| --- |
| **Location no. \_\_\_\_\_\_ of \_\_\_\_\_\_** |
| 1. **General Information:**
 |
| Name and company type \* |  |
| H.O Address  |  |
| Site Address(If site & H.O are the same write N.A) |  |
| Street/house number \* |  |
| Postcode/city/country \* |  |
| Contact person/position \* |  |
| Tel-no.\* |  |
| Email-adress\* |  |
| Homepage |  |
| Official company registration no.\* |  |
| FSSAI Licence No \* |  |
| GST no. \* |  |
| 1. **Site Specific Information:**
 |
| Description of the product groups \* |  |
| Scope of certification  |  |
| Brief description of the production process / activity including the key process steps \* **(site)** |  |
| Scope/brief description of the production process / activity including the key process steps \* **(H.O)** |  |
| Are there seasonal activities?\* |  |
| If yes, please indicate the period of seasonal activities |  |
| Any specific black out days (specify number of days). *Shall not exceed more than 15 days per year* |  |
| Weekly shut down days |  |
| No of HACCP studies |  |
| Number of processes included in HACCP studies |  |
| No of assured sources (for FAMI-QS) |  |
| No of non-assured sources (for FAMI-QS) |  |
| Accreditation required | [ ]  DAKKS [ ]  NABCB [ ]  ANSI [ ]  Others |
| Type of audit \* | [ ]  Initial certification [ ]  Re-certification [ ]  Scope Extension [ ]  Site Addition [ ]  Upgrade [ ]  Transfer  |
| Language used in the company \* |  |
| Documentation available in thefollowing languages (e.g. managementreview, internal audit, risk analysis, analysis manual) \* |  |
| Preferred audit language \* |  |
| Preferred report language \* |  |
| Total number of employees \* |  |
| Employees calculated as full-time equivalents (FTE)\* |  |
| Number of shifts \* |  |
| Number of employees per shift calculated as full-time equivalents (FTE)\* | Shift 1 |  | Shift 2 |  | Shift 3 |  |
| Administrative employees calculated as full-time equivalents (FTE) \* |  |
| Typical raw materials used in production\* |  |
| Please indicate specific activities covered in each shift\* |  |
| Size of production area including storage spaces \* |  |
| Are there outsourced processes (e.g. banding, packaging, warehousing) and/or subcontractors? \* |  |
| Is there another location under the same legal entity where manufacturing processes and/or logistical activities are carried out (off-site activities) ? | [ ]  yes [ ]  noIf yes, is the location certified against a GFSI recognized scheme?[ ]  yes [ ]  noIf not, please provide the following information:1. Name and Address of the location
2. Product specific activities on the location
3. Number of employees calculated as full-time equivalents (FTE)
 |
| Number of suppliers? (information necessary for a Broker certification).\* |  |
| Are there centralised processes (processes organised by head office for multiple locations, e.g. purchasing, sales, product development)? | [ ]  yes [ ]  noIf yes, in case of unannounced audits (only applies to IFS Food and FSSC 22000), is a separate audit of the head office desired?[ ]  yes [ ]  no |
| Existing certifications(please enclose certificates) \* |  |
| Is a pre-audit desired? |  |
| Desired audit date (month, calendar weeks or specific appointment |  |
| Were you supported by a consultant?*(If yes, please indicate name of consultant.)* |  |
| Has your company received in-house training from a TÜV NORD / TUV India? |  | If yes, please indicate training providers and trainers: |  |
| **Special features / remarks** |  |

|  |
| --- |
| 1. **Site Specific Information: (for multi site cases only)**
 |
| **Sr. No**  | **Site details** | **No of employees** | **Activities / Products on site** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |
| --- |
| 1. **Factors that may have an influence on the audit effort.**
 |
| If multiple standards are to be certified, is combined auditing desired? | [ ]  Yes | [ ]  No |
| Would you like a remote audit? | [ ]  Yes | [ ]  No |
| Do you have the necessary infrastructure for the remote audit? | [ ]  Yes | [ ]  No |
| Desired audit date  |  |

*\*compulsory fields*

I hereby confirm that our data may be stored within the framework of quotation generation, and for process and order handling.

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
| Place, Date |  | Name |  |

|  |
| --- |
| **2. Desired Certifications** |
|  |  |
|  | [ ] **BRC GS – Food** [ ] **HACCP**[ ] **ISO 22000**[ ] **FSSC 22000 – Food**[ ] **BRC GS – Packaging**[ ] Glass manufacture & Shaping[ ] Paper manufacture and processing[ ] Metal forming[ ] Forming solid plastics[ ] Manufacture of flexible plastic containers[ ] Other products[ ] Printing processes[ ] **FSSC 22000 – Packaging** [ ] Plastics[ ] Paper & Board[ ] Metal[ ] Glass & Ceramics[ ] Wood [ ] Others[ ] **FAMI-QS**[ ] Production[ ] Trading |
|  |  |
|  |  |
|  |

|  |  |
| --- | --- |
|  |  |
|  |  |

 |
|  |  |