Asia Certification Bodies

Services applied for	Check which is applicable	System Documented?		IA & MRM held?	
ISO 9001:2015	☐	☐ Yes	☐ No	☐ Yes	☐ No
ISO 14001:2015	☐ Yes	☐ Yes	☐ No	☐ Yes	☐ No
OHSAS 18001:2007/ ISO 45001: 2018	☐ Yes	☐ Yes	☐ No	☐ Yes	☐ No
ISO 50001	☐ Yes	☐ Yes	☐ No	☐ Yes	☐ No
ISO 27001	☐ Yes	☐ Yes	☐ No	☐ Yes	☐ No
ISO 22000	☐ Yes	☐ Yes	☐ No	☐ Yes	☐ No
13845	☐ Yes	☐ Yes	☐ No	☐ Yes	☐ No

Name of Company:			
Postal Address			
Audit Location / Factory			
Scope			
Contact Person Name:		Position:	
Phone		Fax	
Email:		Website	
Mobile No		Legal Status	
Please define key processes at your facility?			
*Statutory & Regulatory Requirements: (Related to the Nature Work & Management System Certification)			
*Outsourced Process: if any; which effects the conformity of the product/service		N/A	

Quality Management System ISO 9001:2015	**☐ Yes ☐ No**
Is the category "design and development" included in the activities to be certified?	N/A
Is there any process that affects product conformity outsourced?	N/A
Exclusions if any?	N/A

Environmental Management System ISO 14001:2015	**☐ Yes ☐ No**
Is there any process that affects product conformity outsourced?	N/A
Details of the sites; your company managing at the same time?	N/A
A Register of Significant Environment aspect?	N/A
An Environmental Management Manual?	N/A
An Internal Environmental Audit Programme?	N/A
Has the Internal Environmental Audit Programme been implemented?	N/A
Kindly provide list of significant aspects & license required?	N/A

OHSAS Certification 18001 : 2007 / ISO 45001 : 2018	**☐ Yes ☐ No**
Details of the sites; your company managing at the same time	1
Applicable Legal & Statutory Requirements?	Yes
Hazard's Identified?	Yes
Please detail any critical occupational health & safety risks identified?	Yes

Asia Certification Bodies

CERTIFICATION PROGRAMME REQUESTED						
Initial certification	**Yes**	Recertification		Not Available		
Combination audit	Not Available		Transfer Cum Surveillance		Not Available	
In the case of several certification programmes, would you like the audits to be combined or carried out separately?						
If the answer is yes, please specify which combination					Not Available	
EMPLOYEES (For multi-site, indicate all sites to be covered under certification)						
Total No. of Employee:	Full Time	0	Part Time	0	Shift	0
Additional Site (if to be covered under certification: ***mandatory for EMS & OHSAS***)	Full Time	N/A	Part Time	N/A	Shift	N/A

ADDITIONAL INFORMATION	
Have You A Specific Programme/Timescale For Achieving Registration?	No
Have you called on the services of a consultant?	Yes
If yes, please specify which one :	Mr. Eko
Name of Representative:-	No
Is any way Business Associate/Promoting Firm involved other than marketing?	No

Declaration: The information provide above is true to the best of our knowledge and Belief.

Name	Itje Tunandi	Seal & Signature	
Designation	Director		
Date	27 November 2025		

FOR Asia Certification USE ONLY:-			
REVIEWED BY:		DATE:	
Can the application be further processed?		Yes	
Comment: (if Any)			

Note:

1. Please strike off whichever is not applicable.