

Royal Impact Certification Ltd.

Application Form for Management Systems Certification

1. Client Reference Number:
2. Organization Name:
3. Legal Status:
4. Authorized Representative:
5. Contact Information (Mobile: / Phone No: / Email: / Website Address:
6. Proposed Scope of Certification:
7. Complete Correspondence Address with Pin Code:
8. Total No. of Sites (If more than 1 site then all addresses of all sites to be covered by this certification):
9. No. of Shifts at each site:
10. No. of Employees – Full Time / Part Time 0 / Temporary at each site in each shift:
11. Standard Required:
12. Type of audit (single or integrated):
13. Do you have an internal environmental audit programme and a register of significant environmental aspects?
14. Does your organization require noc from state pollution control board? If yes, status of registration?
15. For ISO 45001:2018, kindly provide name and contact details of personnel legally responsible for occupational health and safety and for monitoring employees' health and the employees:
16. Significant Business Processes & Products / Services (For ISO 45001:2018, also mention key hazards and OH&S risks associated with processes, the main hazardous materials used in the processes):
17. Legal / Statutory Requirements (For ISO 45001:2018, also mention any relevant legal obligations coming from the applicable OH&S legislation):
18. Have you had a major accident / death due to safety failure or occupational health issue occurred since system implementation?
19. Have you designated an assembly point in case of any emergency & First Aid Post?
20. Language Spoken:
21. Outsourced Processes:
22. Is your organization design responsible?
23. Site Specific Information related to weather, timings & protective gear:
24. Have you hired Services of Consultant? Give Details.
25. Details of Registration already held: Nil
Signed By (with Company Stamp / Seal):
Date:

For Office Use	Initials of receiving authority
Application received and forwarded for review	