



Application /Request for Quotation

Please complete this questionnaire and forward it to Staunchly Management & System Services Pvt. Ltd. who will then provide you with a written proposal. Any information will be treated as confidential and will not be disclosed or discussed with any third party.

Company Name			
Address			
City	Code	Country	
Tel Number		Contact Name	
Fax Number		Position	
Web Site		E-mail	

Standard(s) to be assessed	9001 exclusions
Accreditation Required	Other Information

Scope: Please describe what activities your organisation carries out.

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Please list any additional sites to be included in the scope of registration

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Please list the number of employees in each area/site <small>(please use additional sheets if required)</small>	Full Time	Part Time	Shifts	Full Time <small>(Site 2)</small>	Part Time <small>(Site 2)</small>	Shifts <small>(Site 2)</small>
Manufacturing/Service area						
Quality Control/Technical						
Administration						
Storage/Warehouse						
Other						
Management						
Total Employees <small>(Full time equivalent)</small>						

Approx number of sub contractors used on average if applicable.		Describe the type of work subcontracted if applicable.
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Quality Management System ISO 9001:2015

Number of Sites to be Audited? Single Multiple

Is the Clause " Design & Development" included in the Scope of Organization? Yes No

Is there any process that affects the product conformity and is outsourced? Yes No

* Attach Statement of Non Applicability (SONA) as per **Annexure A** of ISO 9001:2015 Yes No

Legal Obligations if any _____

Environmental Management System ISO 14001:2015

Number of Sites to be Audited? Single Multiple

Whether Initial Environmental Review (IER) available? Yes No

Whether Register of Significant Aspects / Impacts available? Yes No

Whether Legal Register available? Yes No

Whether Environmental Management Program (EMP) available? Yes No

Has EMP been implemented? Yes No Attach List of Compliance Obligations Yes No



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<u>Occupational Health & Safety System OHSAS 18001:2007</u>			
Number of Sites to be Audited? <input type="checkbox"/> Single <input type="checkbox"/> Multiple		Have you identified Hazards? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Detail all <u>identified Critical</u> occupational health and safety risks			
Whether Incident/ Accident Register available? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Imp: Please furnish Table-1 and attach with Quotation request Form		Attached as above <input type="checkbox"/> Yes <input type="checkbox"/> No	
<u>Food Safety Management System ISO 22000:2005</u>			
Number of Sites to be Audited?		<input type="checkbox"/> Single <input type="checkbox"/> Multiple	
Have you implemented HACCP Principles?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Any seasonality issues?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Total No of HACCP Studies (As per ISO/TS 22003:2013) _____			
How many process lines are there in production ____ Single ____			
Any Prior Audits Conducted		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes , attach audit findings			
<u>Information Security Management System ISO 27001:2013 / Information Technology Service Management System ISO 20000-1:2011</u>			
Number of Sites to be Audited?		<input type="checkbox"/> Single <input type="checkbox"/> Multiple	
Has a Statement of Applicability been compiled? <input type="checkbox"/> Yes <input type="checkbox"/> No			
No. of user =		No. of sites =	
No. of servers =		No. of Workstations (PC + Laptops) =	
Any Prior Audits Conducted		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes , attach audit findings:.....			
<u>Energy Management System ISO 50001:2011</u>			
Number of Sites to be Audited? <input type="checkbox"/> Single <input type="checkbox"/> Multiple			
Annual Energy Consumption=			
Number of energy Sources=			
Number of significant energy uses (SEUs) =			
<u>Medical Device Quality Management System ISO 13485:2016</u>			
Number of Sites to be Audited?		<input type="checkbox"/> Single <input type="checkbox"/> Multiple	
Outsourced process:			
Critical activity:			
Signature		Date	
<i>Please return this form to :</i>			
Staunchly Management & System Services Pvt. Ltd.			
Regd. Off. : TF 14-15, Aarohi Arcade, Munbshi Puliya, Lucknow-226016			
Corporate Office: U-60 (3rd Floor), Sakar Pur, Luxmi Nagar, Delhi-110092, India			
Call: +91-11-30010201; E Mail: info@staunchlyservices.com ; www.staunchlyservices.com			