

IQMS CERTIFICATION Application / Request for Certification

Please complete this questionnaire and forward it to IQMS Certification who will then provide you ISO certificate. Any information will be treated as confidential and will not be disclosed or discussed with any third party except Certification Body.								
Company Name					•			
Address								
Tel Number					Contact Person			
Mobile					Position			
Web Site					E-mail			
Company Status		[]Proprietorship,		nip,	[]Partnership, []Private Ltd., []Public Ltd.	
Standard(s) to be assessed								
Nature of Business								
Scope of the certification: Please describe what activities your organization carries out.								
Are there any outsourced processes?								
Number of Sites								
Total No. of Employees								
Accreditation Board & Certification Body			,	AC		JAS-ANZ		OTHER
Do you currently hold any other third party					& Date of			
registrations? How did you hear of to IQMS Certification?				egist	ration			
How did you near of to IQINS Certi			on?					
Signature &							Date:	
Seal:								
Please send this form to IQMS Certification at:								
Address: Plot – 36								. +91-9778877000
E-mail: infoiso@iqmsodisha.com, Website: www.iqmsodisha.com, www.tmodisha.com								
We are associated with POHS ACC LMS OFC ACM and more								