|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Date of Application** | | | |  | | | | | | | | | | | | | | | |
| **Name of the Company** | | | |  | | | | | | | | | | | | | | | |
| **Address** | | | |  | | | | | | | | | | | | | | | |
| **Website, Email and Phone number** | | | |  | | | | | | | | | | | | | | | |
| **No of Sites** | | | |  | | | | | | | | | | | | | | | |
| **Site Address** | | | |  | | | | | | | | | | | | | | | |
| **Contact Person Name and Designation** | | | |  | | | | | | | | | | | | | | | |
| **Legal Status** | | | | Company: Private Public Proprietorship Partnership  Govt Undertaken  PSU  NGO Other | | | | | | | | | | | | | | | |
| **Statutory and Regulatory Requirement** | | | |  | | | | | | | | | | | | | | | |
| **Accreditation Required** | | | | IAS | | | | | | | | | | | | | | | |
| **Certification Scheme** | | | | ISO 9001:2015  ISO 14001:2015  ISO 45001:2018  ISO 22000:2018  ISO 27001:2022 | | | | | | | | | | | | | | | |
| **Scope of Certification** | | | |  | | | | | | | | | | | | | | | |
| **Exclusion if any** | | | | **Clause** | | **Justification** | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | |
| **Outsourced Process, If any** | | | |  | | | | | | | | | | | | | | | |
| **No. of Employees** | | | **Location** | | **Shifts** | | **Full Time** | | **Part time** | | | **Performing Same type of Job** | | | **Temporary Unskilled workers** | | | | **Effective No. of Employees** |
| **Site 1** | |  | |  | |  | | |  | | |  | | | |  |
| **Site 2 (Temporary)** | |  | |  | |  | | |  | | |  | | | |  |
| **TOTAL** | |  | |  | |  | | |  | | |  | | | |  |
| **Other Type of Employees (If Any):** | | | | | | | | | | | | | | | | | | | |
| **Certification Program Required** | | | | Initial | | | | Surveillance | | | Recertification | | | | | Transfer | | | |
| **Combined Audit** | | | | In the case of several certification programmes, would you like the audits to be Combined or carried out separately?  Yes   No  If the answer is yes, please specify which combination of Standards: | | | | | | | | | | | | | | | |
| Is Internal Audit is Combined:  Yes  No | | | | | | | | | | | | | | | |
| Is MRM is Combined:  Yes  No | | | | | | | | | | | | | | | |
| Is Manual, Procedures are Combined:  Yes  No | | | | | | | | | | | | | | | |
| Is Implemented System is Integrated:  Yes  No | | | | | | | | | | | | | | | |
| |  |  | | --- | --- | | **Integration Level of the Client Organization** | | | 1. An integrated documentation set, including work instructions to a good level of development, as appropriate; | **🗆Yes 🗆No** | | 2. Management Reviews that consider the overall business strategy and plan; | **🗆Yes 🗆No** | | 3. An integrated approach to internal audits; | **🗆Yes 🗆No** | | 4. An integrated approach to policy and objectives; | **🗆Yes 🗆No** | | 5. An integrated approach to systems processes; | **🗆Yes 🗆No** | | 6. An integrated approach to improvement mechanisms, (corrective and preventive action; measurement and continual Improvement); | **🗆Yes 🗆No** | | 7. Integrated management support and responsibilities. | **🗆Yes 🗆No** | | | | | | | | | | | | | | | | | | | | |
| **Is Already Certified for any Standard** | | | | Yes  No  If Answer is Yes Mention Name of the Standard: | | | | | | | | | | | | | | | |
| **Is Consultants Involved** | | | | Yes  No  If Answer is Yes Mention Name of the Consultants: | | | | | | | | | | | | | | | |
| **Key Business Process Involved** | | | |  | | | | | | | | | | | | | | | |
| **How To Reach at Site** | | | |  | | | | | | | | | | | | | | | |
| **Manual Date** | | | |  | | | | | | | | | | | | | | | |
| **Internal Audit Date** | | | |  | | | | | | | | | | | | | | | |
| **MRM Date** | | | |  | | | | | | | | | | | | | | | |
| **Applicable for ICT Only** | | | | | | | | | | | | | | | | | | | |
| **Arrangements/Facilities for the Use of Information Communication and Technology Tools (For e.g. Skype, WhatsApp, Zoom, Any desk etc...):** | | | | | | | | | | | | | | | | | | | |
| **Internet Connectivity Details:** | | | | | | | | | | | | | | | | | | | |
| **Level of Awareness of the Peoples for the ICT Tools:** | | | | | | | | | | | | | | | | | | | |
| **Additional Information Required** | | | | | | | | | | | | | | | | | | | |
| **EMS** | | How many Sites the company is Managing at the same time?  Do you have Register of Significant Environment aspect?  Yes  No  Do you have an Environmental Management Manual?  Yes  No  Do you have an Internal Environmental Audit Programme?  Yes  No  Has the Internal Environmental Audit Programme been implemented?  Yes  No | | | | | | | | | | | | | | | | | |
| **FSMS** | | HACCP Implementation or Study Conducted:  Yes  No  No of HACCP Studies …………………… No of Sites.………….  No of Process Lines: ………………...  Processing is Seasonal  Continuous  **Please Write Proper Details of Product and Processes:** | | | | | | | | | | | | | | | | | |
| **OHSMS** | | Hazard’s Identified?  Yes  No  Detail any critical occupational health & safety risks identified?  The key hazards and OH&S risks associated with the processes:  information about the main hazardous materials used in the processes: | | | | | | | | | | | | | | | | | |
| **ISMS** | | Additional Information Required (Tick one in each box)  Critical business sectors are sector that may affect critical public services that will cause risk to health, security, economy, image and governmental ability to function that may have a very large negative impact to country | | | | | | | | | | | | | | | | | |
| **Any Confidential Information where Issues of Accessibility is there? {If Any}** | |  | | | | | | | | | | | | | | | | | |
| **Business and organization Complexity** | | | | | | | | | | | | | | | | | | | |
| Types of Business and regulatory Requirement | | 1. Organization work in non-critical business sector and non-regulated sector 2. Organization has customer in critical business sector.   Organization works in critical business sector. | | | | | | | | | | | | | | | | | |
| Process and Task | | 1. Standard Process with standard and repetitive task i.e., lots of persons doing work under the organization’s control carrying out the same tasks, few products or services 2. Standard but not repetitive process with high number of products or services 3. Complex Process, High number of products and services, many business units included in scope of certification | | | | | | | | | | | | | | | | | |
| Level of establishment of the Management System | | 1. ISMS is already well established and/or other management system is in place. 2. Some elements of other Management system are implemented, others not 3. No other Management system implemented at all, ISMS is new and not established. | | | | | | | | | | | | | | | | | |
| **IT Environment Complexity** | | | | | | | | | | | | | | | | | | | |
| IT Infrastructure Complexity | | 1. Few or highly standardized IT platforms, servers, operating system, database, networks etc. 2. Several different IT platforms, servers, operating system, database, networks etc. 3. Many different IT platforms, servers, operating system, database, networks etc. | | | | | | | | | | | | | | | | | |
| Dependency on outsourcing and suppliers including cloud services | | 1. Little or no dependency on outsourcing 2. Some dependency on outsourcing or suppliers, related to some but not all-important business activities. 3. High dependencies on outsourcing or supplier, large impact on important business activities. | | | | | | | | | | | | | | | | | |
| Information System Development | | 1. Non or very limited in-house system/application development 2. Some in house or outsourced system/application development for some important business purpose 3. Extension in house or outsourced system/application development for important business purpose | | | | | | | | | | | | | | | | | |
| **DECLARATION:** The above information is true to the best of my knowledge and belief and I am authorized to provide such information on behalf of the company. | | | | | | | | | | | | | | | | | | | |
| **Name** |  | | | | | **Designation** | | | |  | | | **Signature** | | | |  | | |
| **OEQ Official Use**  **Can the Application Proceed for Application Review:**  Yes  No | | | | | | | | | | | | | | | | | | | |
| **Name of Application reviewer** | | |  | | | **Signature** | | | |  | | | | **Date** | | | |  | |

**\*Delete or leave whichever is not applicable**