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| C:\Users\aemre\Desktop\Logos.jpgTL%20Logo%20(Mühür)%20Siyah.jpg | MANAGEMENT SYSTEM CERTIFICATION  QUOTE REQUEST FORM |

Requested certification standard

ISO 9001:2015  ISO 14001:2015  ISO 45001:2018  ISO 10002:2018

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| Company name (Registered name) : | | | | | |
| Address : | | | | | |
| Tel : | | Fax : | e-mail : | | web : |
| NACE Activity Code: | | | | | |
| If the company is part of a larger group please mention : | | | | | |
| \* **Production site (if different from the head office) or multi site** *(In the case of more than one production site please enclose the list* | | | | | |
| Address : | | | | | |
| Tel : | Fax : | | Activity: | | |
| Company Responsible  Name Surname/ Position |  | | Management Representative  Name Surname |  | |

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| For ISO 9001 and ISO 14001 certificates are issued by TURKAK (Turkish Accreditation Agency) accreditation. |

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| Certification scope (product, service)  (Scope that will be written on certificate) |  | | | | | | | | | |
| For ISO 9001 Standard  Excluded items from the 7.clause (product realization) of the standard (i.e: 7.3 Design and Development) |  | | | | | | | | | |
| Explain, if any, outsourced process which is in certification scope |  | | | | | | | | | |
| Explain the activities, if any, which aren’t covered in the scope of certification |  | | | | | | | | | |
| Number of staff in head office and sites | Head Office | | | Sites | | | | | Total | |
| The number of the personnel doing the same kind of work |  | | Explanation: | | | | | | | |
| Is there seasonal work or shift in the company? If yes please explain shift number and personnel working in each shift | NO | Number of employees who do not work on shifts | | | | Shift Number | 1.Shift | 2. Shift | | 3. Shift |
| YES |  | | | |  |  |  | |  |
| **For ISO 10002 Standard**  Personnel number contacting customer | Head Office | | | | Sites | | | | Total | |

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| If the company has been already certified before; Certification body, kind of certificate and validity time of the certificate | |  | | |
| Foreseen date for certification audit |  | | How long has Management System been applied? |  |
| How did you reach to Türk Loydu |  | | If you taken consultancy; The name of the company |  |

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| Filled by  Name Surname/ Position |  | Signature/ Stamp  Date |  |

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| After replying the above questions in detailed, please sent by mail or fax to bellow. |
| Tel: +90 216 581 37 00 Faks: + 90 216 581 38 20 e-posta: [teklif-endustri@turkloydu.org](mailto:teklif-endustri@turkloydu.org) |