CERTIFICATION APPLICATION

Company, legal representative and requested service — Page 1 of 6

COMPANY INFORMATION

Legal company name *

Trade name / abbreviation

Tax ID (NIT) *

Registered address *

City *

Website

Phone *

LEGAL REPRESENTATIVE

Full name *

Primary email *

Secondary email

Phone — ext.

Mobile

REQUESTED SERVICE

Planned project date

Estimated budget

Project type *

- ☐ Initial certification
- ☐ Recertification
- ☐ Standard migration — From standard: _____ To standard: _____
- ☐ Scope extension — Technical: _____ Geographic: _____
- ☐ Surveillance visit — Visit no.: ☐ 1 ☐ 2
- ☐ Certificate transfer

Previous certification body

Start date

End date

Send the completed form to director@sistemacertification.com. Submission does not guarantee acceptance or accredited availability.

CERTIFICATION APPLICATION

Standards to certify and current status — Page 2 of 6

STANDARDS TO CERTIFY

- ☐ Quality Management System (ISO 9001) ☐ Design applies (clause 8.3)
- ☐ Environmental Management System (ISO 14001)
- ☐ Occupational Health & Safety Management System (ISO 45001)
- ☐ Information Security Management System (ISO/IEC 27001)
- ☐ Oil & gas sector supplier evaluation (NORSOK S-WA-006)
- ☐ Road Traffic Safety Management System (ISO 39001)
- ☐ Other service:

Management system scope *

Does the organization outsource any process? ☐ Yes ☐ No

Which one(s)?

Number of workers involved

Is the organization already certified? ☐ Yes ☐ No

Certification body

Standard(s) held

CONSULTANT INFORMATION

Has the organization received any consulting for the management system? ☐ Yes ☐ No

Consultant name

Phone

Email

PRIOR SERVICES WITH SISTEMA CERTIFICATION & INSPECTION

Has the organization received any other service from us? ☐ Yes ☐ No

Which one(s)?

CERTIFICATION APPLICATION

Process map and audit language — Page 3 of 6

PROCESS MAP

#	Process name	Main activities	Workers

Total workers

Number of shifts

Preferred audit language

☐ Spanish ☐ English ☐ French ☐ Portuguese

Is any process not covered by the scope? Which one(s)?

CERTIFICATION APPLICATION

Organization characteristics and audit criteria — Page 4 of 6

ORGANIZATION CHARACTERISTICS

Is there local regulation relevant to the scope or activities of the organization? ☐ Yes ☐ No

Which one(s)?

Have any serious work accidents or regulatory non-compliances occurred in the certification areas? ☐ Yes ☐ No

How many?

Are specific permits or licenses required for the scoped activities? ☐ Yes ☐ No

Which one(s)?

AUDIT CRITERIA — ISO 45001 & ISO 14001

ISO 45001 — OH&S risk factors

- ☐ Biological
- ☐ Physical (noise / lighting)
- ☐ Physical (vibration / extreme temperature / pressure)
- ☐ Physical (ionizing / non-ionizing radiation)
- ☐ Chemical — hazardous substances
- ☐ Safety conditions (mechanical / machinery)
- ☐ Safety conditions (electrical)
- ☐ High-risk work (confined spaces / work at height)
- ☐ Other — which?

Work accidents — previous year

Work accidents — current year

ISO 14001 — Environmental aspects

- ☐ Wastewater discharge to water/land
- ☐ Hazardous & special waste management
- ☐ Ordinary waste management
- ☐ Landscape changes
- ☐ Post-consumer waste
- ☐ Use of raw materials & natural resources (water, energy, minerals)
- ☐ Emissions (including noise)
- ☐ Impact on communities
- ☐ Other — which?

Environmental emergencies materialized

Current occupational illnesses

CERTIFICATION APPLICATION

Integrated management systems and sites — Page 5 of 6

INTEGRATED MANAGEMENT SYSTEMS

Is there a single internal audit programme covering the whole IMS? ☐ Yes ☐ No

Is there a single management review covering the whole IMS? ☐ Yes ☐ No

Is there a single document-control system common to the whole IMS? ☐ Yes ☐ No

Is there a single team responsible for managing and maintaining the IMS? ☐ Yes ☐ No

MULTI-SITE AND TEMPORARY SITES

Sites

City	Address	Branch name	Activities

Temporary sites

City	Address	Client	Activities / contract purpose	Duration

Repetitive activities

Activity	Number of workers

CERTIFICATION APPLICATION

Annexes, declaration and contact — Page 6 of 6

ANNEXES

Annex 1 — Note on the information in this form: If the data provided changes between the completion of this form and the certification audit, surveillance audit and/or re-certification audit, audit durations may change as a result.

Annex 2 — Authorization to consult credit bureaus (Colombian Habeas Data Law): We irrevocably authorize SISTEMA CERTIFICATION & INSPECTION S.A.S., for statistical, control, supervision and commercial-information purposes, to report to credit bureaus and any other entity managing databases for the same purposes the creation, modification and termination of obligations previously incurred or arising from contracts or commercial offers entered into with SISTEMA CERTIFICATION & INSPECTION S.A.S. This authorization covers information regarding overdue, unpaid debts for the term established by law or, failing that, by the case law of the Colombian Constitutional Court. It also authorizes SISTEMA CERTIFICATION & INSPECTION S.A.S. to consult, at any time, all information relevant to assessing our payment behavior and capacity, or to evaluate the future risk of extending credit, as well as to report, process and disclose personal financial data and request information about our commercial relationships, in accordance with the applicable regulations of those bureaus. This clause is governed by Colombian law and is provided here in English for reference only; the Spanish text of Annex 2 is the version with legal effect.

DECLARATION

I confirm that the information provided in this form is accurate and complete, and that I have read and accept Annexes 1 and 2 above, including the credit-bureau authorization.

☐ Accepted

Date

Authorized name

ORGANIZATION CONTACT PERSON

Full name

Job title

Phone

Email

Accreditations