


MANAGEMENT SYSTEM CERTIFICATION
**ADDITIONAL QUESTIONNAIRE
ISO 50001 CERTIFICATION SCHEME**
1. INFORMATION ABOUT SITES SEEKING CERTIFICATION

(a) Address : _____

Activities : _____

Site built-up area : _____

Total no. of effectiveness personnel (refer to table below for the breakdown) : _____ Detail of shifts system : _____

EnMS effective personnel include the following :	Numbers of personnel
Top management	
Management representative (s)	
Energy management team	
Persons responsible for:	
a) major changes affecting energy performance	
b) effectiveness of the EnMS	
c) developing, implementing or maintaining energy performance improvements including objectives, targets and action plans	
d) significant energy uses	


(b) Address : _____

Activities : _____

Site built-up area : _____ Total land area : _____

Total no. of effectiveness personnel (refer to table below for the breakdown) : _____ Detail of shifts system : _____

EnMS effective personnel include the following :	Numbers of personnel
Top management	
Management representative (s)	
Energy management team	
Persons responsible for:	
a) major changes affecting energy performance	
b) effectiveness of the EnMS	
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If more sites are to be covered, please provide a separate list.

Total number of effective personnel in sites to be certified _____

Note:
 *EnMS effective personnel refers to personnel who materially impact the EnMS.

Please enclose organization chart.

2. ACTIVITIES AND PROCESSES ON SITE

(a) Please describe, within the space provided, the scope of your organisation’s activity for which certification is sought.

(b) Please list range of products/services to be covered by the certification with details of the processes involved.

3. ENERGY PROFILE OF THE ACTIVITIES AND PROCESSES ON SITE

(a) Please tick (✓) the types of energy sources and the total consumption by energy source over the last 12 months.

<u>Energy Sources</u>	<u>Total consumption over the last 12 months</u>
<input type="checkbox"/> Electricity	_____ kWh
Fuel :	
<input type="checkbox"/> • Natural Gas	_____ m ³
<input type="checkbox"/> • LPG	_____ m ³
<input type="checkbox"/> • Liquid Fuel Oil	_____ Litres
<input type="checkbox"/> • Diesel	_____ Litres
<input type="checkbox"/> • Coal	_____ Tonnes
<input type="checkbox"/> • Other : _____	_____
<input type="checkbox"/> Steam	_____ Tonnes
<input type="checkbox"/> Compressed Air	_____
Renewable Energy :	
<input type="checkbox"/> • Solar	_____ kWh
<input type="checkbox"/> • Biomass	_____ Tonnes
<input type="checkbox"/> • Biogas	_____ m ³
<input type="checkbox"/> • Other : _____	_____


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- (b) Please specify the significant energy use or application of the energy at site/plant/building e.g. Lighting, Air-conditioning, Boiler, Air Compressor, Chiller, Furnace and Process Equipment (e.g. molding machine, paper mill, extruder, etc.).

<u>Facilities (✓)</u>	<u>No. of units</u>	<u>Others (Please specify)</u>	<u>No. of units</u>
Steam Boiler	_____	1. _____	_____
Thermal Heater	_____	2. _____	_____
Electric Heater	_____	3. _____	_____
Furnace	_____	4. _____	_____
Dryer	_____	5. _____	_____
Cogeneration system	_____	6. _____	_____
Air Compressor	_____	7. _____	_____
Chiller	_____		
Transformer	_____		
Cooling Tower	_____		
Lighting	_____		
Central air conditioning	_____		

Total no. of identified significant energy uses _____

- (c) What is the electricity tariff category : **Low / Medium / High** voltage (please select the tariff category)

Please fill in the tariff rate where applicable.

- Flat Rate

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 RM/kWh
- Peak

--

 RM/kWh
- Off-peak

--

 RM/kWh
- Max Demand Charges

--

 RM/kWh

Average MD _____ kW per month

4. ENERGY MANAGEMENT, LEGISLATIVE AND REGULATORY REQUIREMENTS

- (a) Please list the legal and regulatory requirements relating to energy management that are applicable to your activities. (Federal/State/Local Authority Law/Regulations)

- (b) Is your organization categorized as an installation under the **Efficient Management of Electrical Energy Regulations 2008 [P.U. (A) 444]** requirements?

Yes No

- (c) Please indicate any Industry Code of Practice/International Charter etc. that your organisation subscribes to. (e.g. MS 1525, Green Building Index, LEED, Green Mark)

Thank you for your co-operation in completing the questionnaire. Please ensure that all information requested have been provided to expedite the processing.