



MANAGEMENT SYSTEM CERTIFICATION

APPLICATION FORM

1. Name of organization : _____

2. Address : _____

3. Please indicate below the applicable Management System Standard to which you wish to be assessed:

ISO 9001 ISO 14001 OHSAS 18001 Others: _____

MS 1900 ISO 13485 MS 1722

For more than one scheme, do you want an integrated/ combined audit to be carried out? Yes No

4. Declaration:

- a) I hereby declare that the information provided in the Questionnaire, which was previously submitted, is still valid.
- b) I undertake to comply with the provisions of the Certification Agreement, a copy of which has been made available to me.
- c) I agree to pay all fees/ costs connected to the certification process.
- d) I shall not refuse any request by SIRIM QAS International to allow representative(s) of Accreditation Body(ies) to carry out witness audit of SIRIM QAS International, at my premises, should such a request be made.

I enclose herewith a cheque no. _____ for RM _____ made payable to **SIRIM QAS International Sdn. Bhd.** for the application fee as indicated in the quotation. (Quotation No. _____)

5. Signature of authorized representative : _____ Date : _____

Name : _____ Position : _____

Please return form duly completed to:

Head
Sales and Business Development
Management System Certification Department
SIRIM QAS International Sdn. Bhd. (410334-X)
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40700 Shah Alam
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