



CHAIN-OF-CUSTODY CERTIFICATION INITIAL QUESTIONNAIRE

1. GENERAL INFORMATION

- 1.1 Name of Company : _____
- 1.2 Company Registration No : _____
- 1.3 Registration Number as Timber Supplier (TS) and Timber Exporter (TE) : TS : _____
TE : _____
- 1.4 Address (main site/mill/office) : _____
- 1.5 Contact details : a) Telephone : _____
b) Fax : _____
c) Website : _____
- 1.6 Contact Person details. a) Name : _____
b) Position : _____
c) Telephone : _____
d) Fax : _____
e) Email : _____
- 1.7 Number of employees : _____
- 1.8 Name and distance of nearest town to office/mill : _____

1.9 Category of company (tick where appropriate)

<input type="checkbox"/>	SMI	<input type="checkbox"/>	Multinational
<input type="checkbox"/>	Large	<input type="checkbox"/>	Joint Venture
<input type="checkbox"/>	Government	<input type="checkbox"/>	Other

1.10 Annual total turnover of the company .Please tick (√) in the appropriate box and please submit latest financial statement

<input type="checkbox"/>	Up to RM 5 million	<input type="checkbox"/>	Over 5 million and up to 20 million
<input type="checkbox"/>	Over 20 million and up to 50 million	<input type="checkbox"/>	Over 50 million and up to 100 million
<input type="checkbox"/>	Over 100 million		



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2. INFORMATION ON ADDITIONAL SITES (kiln drying/warehouse/distribution centre etc). *Please include additional sites to be certified in separate sheets]*

- 2.1 a) Address : _____
 b) Activity : _____
- 2.2 a) Address : _____
 b) Activity : _____

3. MANUFACTURER: INFORMATION ON PRODUCT/PROCESS TO BE CERTIFIED

3.1 Describe the scope of your company's activity for which certification is sought (Indicate the process(es) and final products for which chain-of-custody is applied for)

3.2 List processes/activities which have been sub-contracted

No.	Process/Activity	Name and Address of Sub-Contractor

3.3 Input or raw material used (for example logs, sawn timber, veneer, etc.) : _____

3.4 Source of Certified Raw Material

i) Domestic (*Names and certificate numbers of MTCS-certified FMUs or companies*) : _____

ii) Import(*Names and certificate numbers of PEFC-certified FMUs or companies*) : _____



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3.5 Output of Final Product

Type of Product (e.g. sawn timber, plywood, veneer, etc.)	Annual Output (m ³ or no. of units)

3.6 Is uncertified material used in manufacturing the product(s) mentioned in item 3.5?

Yes

No

3.7 If the uncertified raw material used is imported state source of material (country) _____ :

4. EXPORTER: INFORMATION ON PRODUCT/ PROCESS TO BE CERTIFIED

4.1 Describe the scope of your company's activity for which certification is sought (Indicate the final product(s)/process(es) for which chain-of-custody is applied for)

4.2 Source of Certified Product _____ :

i) Domestic (*Names and certificate numbers of MTCS-certified FMUs or companies*) _____

ii) Import (Names and certificatenumbers of PEFC-certified FMUs or companies) _____ :

4.3 Export of Product

Type of Product	Annual Export (m ³ or no. of units)



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5. IMPORTER: INFORMATION ON PRODUCT TO BE CERTIFIED

5.1 Describe the scope of your company's activity for which certification is sought (Indicate the final product(s)/process(es) for which chain-of-custody is applied for)

5.2 Source of certified product (*Names and certificate numbers of PEFC-certified FMUs or companies*) : _____

5.3 Import of Product

Type of Product (e.g. sawn timber, plywood, veneer)	Annual Import (m ³ or no. of units)

6. OTHER INFORMATION

6.1 If your company buy logs, the name and location of the Forest Checking Station(FCS) issuing the Removal Passes

No.	Name of FCS	Location

6.2 Have your company engaged the service of a consultant to develop the chain-of-custody system? If yes, provide the name and address of the consultant.

Yes

No

6.3 Name of consultant :

6.4 Company of consultant :



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6.5 Management system certification currently or previously held (if any)

6.4 Do you have a documented operation procedure (SOP) for chain-of-custody system?

Yes

No

6.5 Target date for audit

: _____

Signature : _____
Name : _____
Position : _____
Date : _____

Thank you for your co-operation in completing the questionnaire. Please ensure that all information requested have been provided to expedite the processing. Kindly submit the completed Questionnaire to:
Head of Sales and Business Development, Management System Certification Department, SIRIM QAS International Sdn. Bhd.
Address : Building 4, SIRIM Complex, No. 1, Persiaran Dato' Menteri, 40700 Shah Alam, Selangor Darul Ehsan, Malaysia.
Email : ask.msc@sirim.my
Fax : 603-5544 6787

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Adequate information received: Proceed with contract review
Request for quotation declined. Justification for declining:

Head/Executive of Sales and Business Development : _____ Date : _____