



**APPLICATION FOR SIRIM MATERIALS RECOVERY FACILITIES' APPROVAL SCHEME**

**A. APPLICANT'S INFORMATION**

**1. NAME AND ADDRESS OF APPLICANT**

<i>2 contact persons shall be named. Only person who has authority in relation to certification process, product quality and/or process should be named as contact person.</i>	Company Name						
	Company Address						
			Post code				
	Business Reg.						
	Contact Person 1			Position			
		Phone No.			H/P No.		
				Email			
	Contact Person 2			Position			
		Phone No.			H/P No.		
				Email			
Website							
Recovered materials to import Please tick <input checked="" type="checkbox"/> where applicable	Metal scrap / Recovered metal						
	HS Code		Description				
	7204		Ferrous waste and scrap; remelting scrap ingots of iron or steel				
	7404		Copper waste and scrap				
	7602		Aluminium waste or scrap				
	Waste paper / Recovered paper						
	HS Code		Description				
	4707.10		Unbleached kraft paper or paperboard or corrugated paper or paperboard				
	4707.20		Other paper or paperboard made mainly of bleached chemical pulp, not coloured in the mass				
	4707.30		Paper or paperboard made mainly of mechanical pulp (for example, newspapers, journals and similar printed matter)				

## 2. MATERIALS RECOVERY FACILITY INFORMATION

<i>Only person who has authority in relation to certification process, product quality and/or process should be named as contact person.</i>	Company Name		
	Address (if different from above)		
		Post code	
		Email	
	Contact Person	Position	
	Phone No. H/P No.	email	
	Web Site		
	Type of MRF (Clean/mixed/dirty/wet/etc)		
Recovered materials processed in the facility <i>Please tick <input checked="" type="checkbox"/> where applicable</i>	<input type="checkbox"/> Metal <input type="checkbox"/> Paper <input type="checkbox"/> Plastic <input type="checkbox"/> Glass <input type="checkbox"/> Others (please specify) :		

## B. ADDITIONAL INFORMATION

*Please attach all the additional information below and indexed them according to the relevant annex numbers*

Annex 1*	A copy of SSM/ROC and licence from local authority (for local applicant)
Annex 2*	MRF licence or permit from local authority
Annex 3	List of test and process equipment in the MRF
Annex 4	MRF process flow chart and Quality control plan
Annex 5*	List of ML holders or ICA 10 manufactures (if you are trading, or importing on behalf of ML/ICA 10 manufacturers)
Annex 6*	Memorandum of Agreement (MoA) with ML Holders or ICA 10 manufactures (if you are trading, or importing on behalf of ML/ICA 10 manufacturers)
Annex 7*	A copy of approved Manufacturing licence (ML) from MITI or ICA 10 from MIDA

*\*Minimum documents to be submitted for issuance of quotation*

**C. DECLARATION AND UNDERTAKING**

In connection with this application, I/we:

- (a) undertake to ensure the MRF process comply with SIRIM MRFs' Approval Scheme Guideline.
- (b) undertake to supply all information required by SIRIM QAS International Sdn. Bhd. for the purpose of evaluation of the MRFs' Approval Scheme;
- (c) undertake to prepare samples to SIRIM QAS International Sdn. Bhd. for evaluation and testing purposes;
- (d) agree that SIRIM QAS International Sdn. Bhd. may review the MRF process details if it found that, during the assessment, the MRF process evaluated is/are different from the actual declared in this application form;
- (e) undertake to pay SIRIM QAS International Sdn. Bhd. all costs of processing this application;
- (f) agree that SIRIM QAS International Sdn. Bhd. may release information obtained in the course of processing the application to the public or government authorities so far as is prudent to warn in the opinion of SIRIM QAS International Sdn. Bhd.;
- (g) undertake to sign the SIRIM QAS International Sdn. Bhd. MRFs' Approval Scheme Agreement before grant of the Inspection certificate.
- (h) I/we also undertake not to involve SIRIM QAS International Sdn. Bhd., its directors, officers and authorized representatives in any legal proceeding on any disputes between us and other parties.

I, hereby, declare that all information and/or statement given in this application form are correct to my knowledge.

<i>An authorized representative of the applicant shall put his signature in this section.</i>	Signature		Applicant's stamp:
	Name		
	Designation		
	Date		

Please return form duly completed to:

**PRODUCT CERTIFICATION & INSPECTION DEPARTMENT  
SIRIM QAS INTERNATIONAL SDN. BHD.  
BUILDING 25, SIRIM COMPLEX  
1, PERSIARAN DATO' MENTERI  
P.O. BOX 7035  
40700 SHAH ALAM  
SELANGOR DARUL EHSAN**