

**山东创安检测认证集团有限公司**

**Shandong Chuangan Testing and Certification Group Co.,Ltd**

**Management System Certification Application**

**Name of applicant (stamp)**

|  |  |  |  |  |  |  |  |  |  |
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| **I. Basic information of the applicant** | | | | | | | | | |
| **Organization name** | |  | | | | | | | |
| **Registered address** | | (Same as business license address) | | | | | | **post code** |  |
| **Production/operation address** | | (If they are the same, write the same as above. If they are different, fill in the actual information.) | | | | | | **post code** |  |
| **Office address** | | (If they are the same, write the same as above. If they are different, fill in the actual information.) | | | | | | **post code** |  |
| **Legal representative** | |  | **Landline** | |  | | **fax** |  | |
| **Mobile phone** | |  | |
| **Management representative** | |  | **Landline** | |  | | **e-mail** |  | |
| **Mobile phone** | |  | |
| **System manager** | |  | **Landline** | |  | | **e-mail** |  | |
| **Mobile phone** | |  | |
| **1)Number of employees covered by the system:**  Note: The total number of people covered by the system (including temporary workers/seasonal workers/subcontractors present during the audit)  2) Schedule: .  3) Whether to work in shifts:□Yes/□No; Number of shifts: .  4) Is it seasonal production/service: □Yes/□No; the production/service season is from: - (January to February every year)  5) Special requirements for audit language and national cultural requirements . | | | | | | | | | |
| **Application type:** □ Initial application □ Re-certification □ Expansion □ Certificate conversion □ Others | | | | | | | | | |
| **Proposed certification areas and standards:** | | | | | | | | | |
| □ Quality Management System Certification（□QMS □EC9000） | | | | According to | | GB/T 19001-2016 | | □ GB/T 50430-2017 | |
| □ Environmental Management System Certification（EMS） | | | | According to | | GB/T 24001-2016 | |  | |
| □ Occupational Health and Safety Management System Certification（OHSMS） | | | | According to | | GB/T 45001-2020 | |  | |
| □ Supply Chain Security Management System（SCSMS） | | | | According to | | ISO 28000-2022 | |  | |
| □ Enterprise Integrity Management System（EIMS） | | | | According to | | GB/T 31950-2023 | |  | |
| □ Social Accountability Management System（SAMS） | | | | According to | | GB/T 39604-2020 | |  | |
| □ Compliance Management System（CMS） | | | | According to | | GB/T 35770-2022 | |  | |
| □ Anti-Bribery Management System（ABMS） | | | | According to | | ISO 37001：2016 | |  | |
| □ Asset Management System（AMS） | | | | According to | | GB/T 33173-2016 | |  | |
| □ Business Continuity Management System（BCMS） | | | | According to | | ISO 22301：2019 | |  | |
| □ Green Supply Chain Management System（GSCMS） | | | | According to | | GB/T 33635-2017 | |  | |
| □ Green Factory Certification（GF） | | | | According to | | GB/T 36132-2018 | |  | |
| □ Green Regeneration Management System（GRMS） | | | | According to | | T/CRRA 0102-2017 | |  | |
| □ Green Recycled Plastic—Chain of CUSTODY（GRPCC） | | | | According to | | T/CRRA 0301-2023 | |  | |
| □ Health, Safety and Environment Management System（HSE） | | | | According to | | □ Q/SY 08002.1-2022 | | □ SY/T 6276-2014 | |
| □ Sinopec "HSE Management System Manual" | | □ Q/SHS 0001.1-2001 | |
| □ Others: | | | | According to | |  | |  | |
| **Information on the integration degree of the organizational management system (fill in if applying for two or more systems)**  □ System documents □ Management review □Internal audit □ Policy and objectives □System process □ Improvement mechanism □ Management support and responsibilities | | | | | | | | | |
| **Products and activities to be covered by the management system:** | | | | | | | | | |
| **QMS not applicable and outsourcing:**  Inapplicable conditions: □ No/□ Yes, the inapplicable clauses are: | | | | | | | | | |
| **Scope description: (such as major outsourcing processes, commissioned processing (if applicable))** | | | | | | | | | |
| **The scope of application for certification covers the quality standards of products or services:**  National/industry standards:  Enterprise standards (provide relevant materials for filing): | | | | | | | | | |
| **Have you been punished by government departments or had major quality, environmental, occupational health and safety accidents or customer complaints occurred within one year before applying for certification:**  □ No/□ Yes, if you choose this option, please briefly describe the relevant situation: | | | | | | | | | |
| **Time when the management system starts operating:** 202  **(Y/M/D)** (It should be in operation for at least 3 months before on-site audit, and 6 months for special industries) | | | | | | | | | |
| **Management system operation site:**  in total (multiple sites/temporary sites, please list the distribution according to the requirements of the attached table) | | | | | | | | | |
| **Expected on-site audit date:** 202 (Y/M) to 202 (Y/M) | | | | | | | | | |
| **Certification consultation received:** Received certification consultation: □ No/□ Yes Consulting organization and personnel: | | | | | | | | | |
| **Whether or not they have ever been certified:** □ No/□ Yes   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Certificate Type | Issuing Body | Certificate No. | Date of issue | Certificate validity period | Certificate Status | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | | | | | | | | | | |
| **II. Information to be submitted when applying for system certification** | | | | | | | | | |
| **Basic information**  (including quality management system certification) | □ Proof of the applicant's legal status (business license of a legal person, **the copy must be stamped and marked "same as the original"**)  □ Copies of qualifications or licenses (for industries that require qualifications and licenses according to laws and regulations, **the copies must be stamped and marked "same as the original"**)  □ A copy of the trademark registration certificate or a certificate of authorized use of the trademark (required when the certification certificate indicates a registered trademark)  □ Effective management system documents (manuals, procedure documents, etc.)  □ List of organization certification sites (provided when there are two or more sites, filled in according to the requirements of the attachment)  □ Schematic diagram of production/service process flow, main production and inspection/monitoring equipment, list of applicable product standards | | | | | | | | |
| **Supplementary information for environmental management system certification** | □ List of important environmental factors, list of applicable laws and regulations, and environmental goals, indicators and management plans  □ Environmental impact assessment approval for new, expanded or renovated buildings after the end of November 1998, and “three simultaneous” acceptance reports (when applicable, **the copies must be stamped and marked “in accordance with the original”**)  □ Major pollutants, emission standards and categories (grades) implemented, and monitoring reports of major pollutants (when applicable, **the** **copies must be stamped and marked "matching the original"**)  □ Activity areas covered by the environmental management system of the audited party; provide a pipe network diagram (including at least sewage and rainwater pipes) and indicate each sewage outlet when necessary  □ Sewage discharge permit (when applicable) | | | | | | | | |
| **Supplementary information for occupational health and safety management system certification** | □ List of major hazards, list of applicable laws and regulations, and occupational health and safety objectives and management plans  □ Schematic diagram of the activity area covered by the occupational health and safety management system  □ Commitment that the organization has not had any major safety accidents within one year (if necessary)  □ Safety approval, occupational disease hazard pre-assessment approval (if necessary, **the copy must be stamped and marked "same as the original"**)  □ Monitoring report on dust, toxicity, noise, etc. in the workplace issued by the health monitoring or disease control center within the past year (if necessary, **the copy must be stamped and marked "same as the original"**) | | | | | | | | |
| **Special note: For special projects, in addition to the above information, our company may require applicants to submit other additional information in accordance with national certification and accreditation regulations.** | | | | | | | | | |
| **III. Declaration and Commitment of the Applicant** | | | | | | | | | |
| We have obtained CATC's public documents on management system certification and have fully understood the national laws and regulations on certification and accreditation, as well as your company's certification fee standards, impartiality requirements, accreditation business scope, certification application conditions and general procedures.  We voluntarily apply for certification to your company and promise to always comply with the requirements of certification, use of certification marks, notification of changes in certification information, etc.; pay all fees required for certification activities to your company as required; accept routine supervision and audit and national surveillance and spot checks on certified organizations during the validity period of the certificate.  The management system for which we apply for certification has been in operation for more than three months, and has maintained operation records, and has met the conditions for on-site audit.  We promise to comply with the certification requirements, provide the information and materials required for the application for certification, and the "Certification Application" and the documents and materials provided are true and complete. We truthfully declare the number of people covered by the management system (including multiple sites, temporary sites, temporary workers, seasonal workers) and the number of projects in multiple sites and temporary sites, and bear any other legal liability caused by concealing the actual number of people and missing the number of projects that affect the validity of the certification and/or cause; our unit understands and agrees: if you find that the on-site audit is inconsistent with the actual situation (including but not limited to the aforementioned [covered number of people, sites, projects]), in order to ensure the validity of the audit results, you have the right to increase the audit man-days and audit fees; we promise to provide the audit team with necessary working conditions and true and effective operation information when accepting the audit.  We promise that the organization has known that there is no conflict of interest between internal or external personnel and the certification body applied for.  Legal representative/authorized person of the applicant:  (Y/M/D) | | | | | | | | | |

Attachment1:

**Fixed multi-site/temporary multi-site/multi-name organization distribution table (fill in when necessary)**

□ Fixed multiple locations (such as chain stores/branches/subsidiaries, etc.) □ Temporary multi-site (such as construction sites, system integration, etc.) □ Multiple Name Organization

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Number | Place Name | Products/Services  /Scope of Activities | Coverage  Number of people | Contact person and phone number | Address | Main means of transportation and required time/distance (from headquarters to branch sites) | Construction site size/progress |
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Note: 1. Multiple sites means that the applicant organization has multiple sites, each of which should have a legal or contractual relationship with the headquarters and operate the same management system;

2. When the management system covers multiple temporary sites, the on-site audit must be conducted at an appropriate production stage.