



APPLICATION FORM

COMPANY INFORMATION		
Company name:		
ABN or Tax No:	Quote No:	
Site address:		
Postal address:		
Site address of Head Office (<i>if differs from above</i>):		
Are any other companies to be covered by the registration? <i>If so, state the company names</i>		
Main contact:		Title:
Telephone:	Mobile:	Facsimile:
Mobile:		
Email:		Website:
No. of FTE employees:	No of shifts:	Main shift:
Standard(s) applied for:		
Are you currently certified with another CB? <i>If so, please attach a copy of the current certificate</i>		

APPLICATION	
<p>I have read and undertake to observe TQCSI's Rules of Certification which is available on TQCSI's web site: www.tqcsi.com. A copy of these Rules of Certification will be retained on file for future reference. I understand that changes to these Rules may occur from time to time and agree to observe any such amendments.</p> <p>I accept the quotation provided by TQCSI and understand the initial and annual certification charges. I understand that the annual registration fee is payable immediately upon certification and then annually in advance. I understand that standard terms of payment are 14 days.</p> <p>As credit is extended, we are obliged to require any expenses, costs or disbursements incurred by us in recovering any outstanding monies, including debt collection agency fees and solicitor's costs, to be settled by the client.</p> <p>Note: The Application Fee will be invoiced – do not pay with this Application Form.</p>	
Signature:	Date:
Name & Title:	Order/Ref No (if applicable):

QUESTIONNAIRE (PLEASE COMPLETE BEFORE FORWARDING TO TQCSI)

List sites to be covered under the certification:

Brief description of the activities and processes covered by the certification (including design and if extra sites are different)

List any central functions controlled by Head Office (if separate to main site):

List main products/services (max of 600 characters):

List main technologies used (max of 300 characters):

AUDIT DURATION DETERMINATION

Audit duration has been calculated in accordance with International Accreditation Forum (IAF) Mandatory Documents: MD 1:2018 (audit and certification of multi-site organisations), MD 5:2015 (audit time for quality and environmental management systems) and MD 11:2013 (audits of integrated management systems), which have been replicated in TQCSI's procedures. The resultant number of auditor days has been based on the following:

- The total number of full-time employees (FTE) at each site
 - *Main suburb* – xx
 - *List each other sites' suburbs* - xx
- The risk associated with the current operations and each Program has been assessed as:
 - EMS – xx
 - SMS - xx
- Multiple site factors considered for audit time reduction:
 - xx
- Management system factors considered for audit time reduction:
 - xx
- Integrated management system factors considered for audit time reduction:
 - xx
- Factors considered for increased audit duration:
 - xx