QACS APPLICATION FOR MANAGEMENT SYSTEM AUDIT AND CERTIFICATION

Company Name			
Main Office Address			
Scope of Office Address			
Work / Factory Address			
Scope of Work / Factory Address			
Telephone Number		Fax Number	
e-mail		Tax Administration/ Tax Identification Number	
Top Management		TM Representative	
Applicable regulatory requirements			

Assessment Standard against which registration is sought

STANDARD	REQUIRED ACCREDITATION	*IAS*	QACS
ISO 9001:2015	Quality Management System	☐	☐
ISO 14001:2015	Environment Management System	☐	☐
ISO 45001:2018	OHSMS	☐	☐
ISO 22000:2018	Food Safety Management System	☐	☐
ISO 27001:2013/2022	*Information Security Management System*	☐	☐
ISO 20000-1:2018	*Information Technology-Service Management*	☐	☐
ISO 37001:2016	*Anti-Bribery Management System*	☐	☐
ISO 13485:2016	Medical Devices Quality Management System		☐
HALAL	HALAL		☐
KOSHER	KOHSER		☐
ISO 10002	the complaint handling system		☐
ISO 10004	*customer* satisfaction system		☐
CE	*CE Marking Conformity Assessment*		☐
HACCP	*Hazard analysis critical control point*		☐
ISO 50001	*Energy management system*		☐
ISO 10015	*Quality management - guidance for training*		☐
CGMP	*Cosmetic good manufacturing practice*		☐
ROHS	Restriction of Hazardous Substances		☐
REACH	PRODUCT MANUFACTURING PROCESS AND TEST REPORT OF THE PRODUCT		☐
ISO 10002	Quality management customer satisfaction		☐
ISO 29990	the learning services for non-formal education and training		☐
ISO 22301	*Business continuity management system*		☐
ISO 10004	Quality management – customer satisfaction		☐
ISO 30000	the ship management system		☐
ISO 26000	Social responsibility		☐
HSE-MS	HSE management system		☐
GDP	GOOD DISTRIBUTION PRACTICE		☐
ISO 30000	Ship management system		☐
GSP	Good storage practice		☐
ISO/TS 29001	the Petroleum, petrochemical and natural gas		☐
ISO 11135	the Sterilization of health-care products system		☐
ISO 20252	Market opinion and social research		☐

ISO 11137-1	STERILIZATION FOR MEDICAL DEVICE		☐
ISO 11137-2	STERILIZATION FOR MEDICAL DEVICE		☐
ISO 39001	the road traffic safety (RTS)		☐
ISO 3834-2:2005	Quality requirements for fusion welding of metallic materials		☐
GMP	Good manufacturing practice		☐
ISO 10006	Quality management in practice		☐
ISO 15489	Record management system		☐
ISO 15378	GMP		☐
GHP	Good hygiene practice		☐
ISO 41001	Facility management system		☐
ISO 3834-2	Quality requirements for fusion welding of metallic materials		☐
ISO 15189	Medical laboratories- requirement for quality and competency		☐
Any Other standard Please specify			☐

(For Integrated Management System)

Do you Have demonstrated all documents including Work instruction common for all standards?	Yes	NO
Did MRM cover overall business strategy and plan?	Yes	NO
Did integrated approach for all standard used in Internal audit?	Yes	NO
Did you have common policy and objective documents?	Yes	NO
Did you have integrated approach to system processes?	Yes	NO
Did integrated approach is taken for improvement mechanism (CA/PA, Monitoring and continual Improvement)	Yes	NO
Did management support and responsibilities are integrated?	Yes	NO

Details of employees

No. Of Shifts	General		Shift 1		Shift 2		Shift 3	
Working time								
Employee involvement	In Different activity	In Same activity	In Different activity	In Same activity	In Different activity	In Same activity	In Different activity	In Same activity
Permanent employee								
Part Time Employee								
Temporary employee								
Contractual employee								
Per Shift Employees Number								
Number of employee deputed at client site								
Total Employees Number								
Shift having critical Function (Mark * for critical shift)								
Shift wise activity								

In Case of companies having multiple sites or having outsourced main process / activity

Note- Companies having or providing agriculture, mining, installation, construction, transportation, warehousing, services have permanent / temporary sites.

	Address of company – sites (temp/permanent)	No. Of Employees	No. Of shifts
Site1			
Site2			
	Add more as requires		

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If You are applying for EMS ISO:14001 Please provide following additional information

Sl.	Particular	Head office	Site 1	Site 2
1.	Is there any Other requirement (Other than legal requirements)			
2.	Is there generation of solid waste	□ Yes □No.	□ Yes □No.	□ Yes □No.
3.	Is there generation of liquid waste	□ Yes □No.	□ Yes □No.	□ Yes □No.
4.	Is there generation of flue gases or vaporous substances?	□ Yes □No.	□ Yes □No.	□ Yes □No.
5.	No. Of EMS aspects identified			
6.	Use of natural resources (mineral etc.)	□ Yes □No.	□ Yes □No.	□ Yes □No.
7.	Use of fossil fuels	□ Yes □No.	□ Yes □No.	□ Yes □No.
8.	Use of electricity	□ Yes □No.	□ Yes □No.	□ Yes □No.
9.	Use of water	□ Yes □No.	□ Yes □No.	□ Yes □No.
10.	Use of chemicals	□ Yes □No.	□ Yes □No.	□ Yes □No.
11.	Spraying equipment used	□ Yes □No.	□ Yes □No.	□ Yes □No.
12.	Welding process used	□ Yes □No.	□ Yes □No.	□ Yes □No.
13.	Location of site	□ Notified □ Acceptable □ Unacceptable	□ Notified □ Acceptable □ Unacceptable	□ Notified □ Acceptable □ Unacceptable
14.	Does site have proximity to wet land	□ Yes □No.	□ Yes □No.	□ Yes □No.
15.	Does site proximity to virgin forests	□ Yes □No.	□ Yes □No.	□ Yes □No.
16.	Does site is situated within human habitat	□ Yes □No.	□ Yes □No.	□ Yes □No.

If You are applying for OHSMS ISO:45001 Please provide following additional information

SL	Particular	Head office	Site 1	Site 2
A	Name of Legal responsible person for health of employees (Nominated person under Law not necessary MR)			
B	Name of employee representative responsible for health of Employee (if available)			
C	Name of Person responsible for monitoring health (Doctor/Medical Person)			
1	List out all legal requirements	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
2	What are key hazards?	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
3	What are the main hazardous materials used in process?	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
4	How many personnel work away from the organisations premises?			
5	**What are the OH&S risk associated with processes**			
5.1	Very Hot process?	□ Yes □No.	□ Yes □No.	□ Yes □No.
5.2	Very cold process?	□ Yes □No.	□ Yes □No.	□ Yes □No.
5.3	Working on height?	□ Yes □No.	□ Yes □No.	□ Yes □No.
5.4	Working with acid/base?	□ Yes □No.	□ Yes □No.	□ Yes □No.
5.5	Need to lift heavy load?	□ Yes □No.	□ Yes □No.	□ Yes □No.

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5.6	Working with hazardous material?	□ Yes □No.	□ Yes □No.	□ Yes □No.
5.7	Working under ground?	□ Yes □No.	□ Yes □No.	□ Yes □No.
5.8	Working place is having vehicular moments?	□ Notified □ Acceptable □ Unacceptable	□ Notified □ Acceptable □ Unacceptable	□ Notified □ Acceptable □ Unacceptable
5.9	Working place is using crane to lift and transport heavy material?	□ Yes □No.	□ Yes □No.	□ Yes □No.

If You are applying for FSMS ISO:22000 Please provide following additional information

Sl.	Particular	Site1		Site 2	
1	How many process lines are in the site?				
2	What are the product and processing season?	Product	Season	Product	Season
3	How many HACCP Studies are conducted for Site?				
4	How many CCP's are identified?				

If You are applying for ISMS ISO:27001 Please provide following additional information

Statement of applicability: Document Number **revision number** **date of last revision**

Do you have any type of sensitive / confidential information which you will not be able to made available to audit team (Give detail of such information) **Yes / No**

Can you make specific arrangement so that audit team can review those ISMS record or design and effectiveness of control **Yes / No**

Business and organization Complexity

Sl	Requirement	Organisation declaration
1	Types of Business and regulatory Requirement	1. Organization work in non critical business sector and non regulated sector ☐ 2. Organization has customer in critical business sector. ☐ 3. Organization works in critical business sector. ☐
2	Process and Task	1. Standard Process with standard and repetitive task i.e. lots of persons doing work under the organization's control carrying out the same tasks, few product or services ☐ 2. Standard but not repetitive process with high number of products or services ☐ 3. Complex Process, High number of products and services, many business units included in scope of certification ☐
3	Level of establishment of the Management System	1. ISMS are already well established and/or other management system is in place. ☐ 2. Some elements of other Management system are implemented, others not ☐ 3. No other Management system implemented at all, ISMS is new and not established. ☐
	IT Environment Complexity	
4	IT Infrastructure Complexity	1. Few or highly standardized IT platforms, servers, operating system, database, networks etc ☐ 2. Several different IT platforms, servers, operating system, database, networks etc ☐ **3.** Many different IT platforms, servers, operating system, database, networks etc ☐
5	Dependency on outsourcing and suppliers including cloud services	1. Little or no dependency on outsourcing ☐ 2. Some dependency on outsourcing or suppliers, related to some but not all important business activities. ☐ 3. High dependencies on outsourcing or supplier, large impact on important business activities. ☐
6	Information System Development	1. Non or very limited in house system/application development ☐ 2. Some in house or outsourced system/application development for some important business purpose. ☐

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		3. Extension in house or outsourced system/application development for important business purpose. ☐

If You are applying for ITSMS ISO 20000-1 Please provide following additional information

Do you have any type of sensitive / confidential information which you will not be able to made available to audit team (Give detail of such information)s			**Yes / No**	
Can you make specific arrangement so that audit team can review those ITSMS record or design and effectiveness of control			**Yes / No**	
1	**What are locations where services provided but not covered under scope? Use of temporary sites and sizes.**			
2	**What are the services provided by organization?**	Simple & Single	Multiple in multiple jurisdiction	
3	**Is there complexity of change in language based on location**	Yes	NO	
4	**Shift Activities**	Same work in all shifts	Different work in all shift	
5	**Degree of reliance on Outside supplier for completion of services**	Low	Medium	High
6	**Does Organization frequently Add/Remove services?**	No	Some time	Very often
7	**Name of few customers of organization in respect to services.**	Name	Services	
8	Is any ITSMS records cannot be made available for review by the audit team because they contain confidential or sensitive information and to provide the corresponding justification. Kindly provide list of such information. **If Yes Then please give details:**			

If You are applying for ABMS ISO:37001 Please provide following additional information

1	Regulatory requirement applicable to organization	Many	Some	Less
2	Dealing with Government and semi government departments in normal working	Mainly	Some time	No
3	Working as link between general public and government / semi government authorities.	Yes		No
4	Involved in public relation / liasioning /lobbing	Yes		No

If You are applying for EnMS ISO:50001 Please provide following additional information

Responsible person for EnMS, if same person doing many activities then count as 1 at the higher level

	Particulars of employee	**Main**	**Site 1**	**Site 2**
1	**Top Management**			
2	**Energy Management Team**			
3	**Person Responsible for Procurement Energy performance**			
4	**Person Responsible for making major changes that affect Energy Performance**			
5	**Person Responsible for developing, implementing, or maintaining energy performance improvements, including objectives, energy target and action plan**			
6	**Person Responsible for developing and maintaining energy data and analysis**			
7	**Person Responsible for planning, operating and maintaining the processes near to SEUs including during seasonal operation as appropriate**			
8	**Person Responsible for design which affect energy performance**			
	Total No of EnMS Effective personnel's			
		Annual Consumption	**Annual Consumption Site 1**	**Annual Consumption Site 2**
	No of EnMS Effective personnels			
	Particular Type of Energy use			
1.	Electricity	KVA	KVA	KVA
2.	LDO/ Diesel/ gasoline	KL	KL	KL
3.	Compressed Natural Gas			
4.	Methane or Mixture of gases produced by recycling			

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5.	Coal	T	T	T
6.	Solar	KVA	KVA	KVA
7.	Wind	KVA	KVA	KVA
8.	Any Other (For eg Agriculture Waste)also Define the uses			
	Significant Energy uses			
1.	Lighting			
2.	Running of machineries (motor Driven)			
3.	Heating of area			
4.	Cooling / refrigeration of area			
5.	Steam generation			
6.	Electricity generation			
7.	Cooling employed in process			

Have you done risk Analysis	☐ Yes ☐ No
What are the major risks identified?	
What are the hazards identified? (Safety Hazard in case of ISO 45001)	
Please mention out of scope standard clauses	
Please mention if you have certification transfer demand	☐ Yes ☐ No
Date of Last internal Audit	
Names of internal auditors	
Required audit date	
Describe your process/functional units / steps in product manufacturing or providing services Example – 1. like construction : digging foundation – filling foundation - construction of walls -ceiling – plastering – electric wiring- fitting of door windows hardware 2. Like Pest Control : Visit to customer- analysis of pest – identifying the insecticide- mixing of solution - spraying the solution	
Name of all departments in your organisation	
Do you out source any process	
Name of the consultants / consultancy company?	

Confirmation

DECLARATION: The above information is true to the best of my knowledge and belief and I am authorized to provide such information on behalf of the company

Contact Name :

Position : Signature: