## TQCS INTERNATIONAL PTY LTD

ABN 59 065 953 924

# ENQUIRY FORM

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| **COMPANY DETAILS** |
| Company Name: |  |
| Trading Name: |  |
| EIN: |  |
| Website: |  |
| Postal Address: |  |
| Site Address: |  |
| Telephone: |  |
| Primary Contact Name: |  |
| Job Title: |  |
| Email:  |  | Mobile: |  |
| Accounts Department Email: |  |

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| **STANDARD(S) REQUIRED FOR CERTIFICATION** |
| [ ]  ISO 9001:2015 | [ ]  ISO 27001:2013 | [ ]  TQCSI QHSE Code |
| [ ]  ISO 14001:2015 | [ ]  FSSC 22000 (V5) | [ ]  TQCSI IS Code |
| [ ]  ISO 45001:2018 | [ ]  ISO 22000:2018 | [ ]  TQCSI HR Code |
| [ ]  ISO 55001:2014 | [ ]  TQCSI HACCP Code | [ ]  TQCSI SBQM Code |
| [ ]  Others: |

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| **CONSULTANCY** |
| Did a consultancy assist with the development and implementation of the management system? | **Yes [ ]**  If **Yes**:**No** [ ]  | Name of consultancy: Name of consultant: |

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| **INTEGRATED MANAGEMENT SYSTEM** |
| Is the management system integrated for all Standards (ie same IMS management; common manual/instructions relevant to ISO Clauses 4, 5, 6, 9 & 10; integrated management review, internal auditing, objectives, approach to system processes, nonconformance reporting, corrective action, continual improvement and management support, including document control). | **Yes** **[ ]**  **No** [ ]  |

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| **TRANSFER OF CERTIFICATION** |
| Transferring from another Certification Body? **Yes** [ ]  **No** [ ]  If Yes, complete the following: |
| Certification Body: | Standard(s):  | Expiry Date:  |

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| **SITES FOR CERTIFICATE & NO. OF EMPLOYEES:**  |
| **Address** | **Full Time** | **Part Time / Casual** | **Total** **(full time employees) FTE** |
| **Head Office** (address if different to above):  |  |  |  |
|  |  |  |  |
| **WORK OFF SITE:** |
| Does the Company conduct work off-site? **Yes** [ ]  **No** [ ]  If Yes, complete the following: |
| How many employees regularly work off-site: |  |  |  |

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| **PROCESSES:** *Describe the major processes/activities (eg design, fabrication, packaging, storage, distribution)* |
| **The scope of registration covers:**  |
| **PRODUCTS OR SERVICES:** *Describe the types of products or services* |
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| **TECHNOLOGIES USED:** |
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| **MAJOR ACTIVITIES OUTSOURCED:** |
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