

**This is to Certify that the Quality Management System of**

**{COMPANY NAME}**

Initial Registration Date {REGISTRATION}

Validity of this Certificate {VALIDITY}

Recertification due on DDMMYYYY

Revision No./Date REVISION

IAF Code XXXXXX

Certificate Number {CERTIFICATE NUMBER}

Current Issue Date {ISSUE}

1st Surveillance on or before {SUR1}

2nd Surveillance on or before {SUR2}

Issue No. XXXXXX­­

**{ADDRESS}**

**has been assessed and registered by TNV as conforming**

**to the requirements of:**

**ISO 9001:2015**

**(Quality Management System)**

**For the following activities**

**{SCOPE}**

***TNV is accredited by United Accreditation Foundation (UAF), Status of Certificate can be verified on***

***www.isoindia.org & www.iafcertsearch.org***