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| **Company Name:** |  |

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| **ISO 9001:2015** | **ISO 14001:2015** | **ISO 45001:2018** | **SSIP** |

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| **Scope: Please describe what activities your organisation carries out:** |
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| **Detail main address to be stated on the certificate of registration.**  **(If more than one site, state details below)** | |  | | | | | | | | |
| **If the company’s activities are all remote, with no premises or onsite working, please indicate so here** | | | | | | | | | | |
| **If multiple sites, please indicate location and employee numbers:** | | | | | | | | | | |
| Site 1: | | |  |  | |  |  | |  |  |
| Site 2: | | |  |  | |  |  | |  |  |
| **Are you a multisite with a central function Y/N?**        **(If yes, additional supplement will be sent for further information)** | | | | | | | | | | |
| **Type of management system:** | Single  e.g., ISO 9001 only | | | | Integrated  e.g., One system including other standards, e.g., ISO 9001, ISO 14001 | | | Specify other standards: | | |
| **The extent to which the management system is integrated (as applicable):** | | | | | | | | | | |
| An integrated documentation set, including work instructions to a good level of development, as appropriate | | | | | Fully Integrated | | | Partially Integrated | | |
| An integrated approach to internal audits. | | | | | Fully Integrated | | | Partially Integrated | | |
| An integrated approach to policy and objectives. | | | | | Fully Integrated | | | Partially Integrated | | |
| An integrated approach to systems processes. | | | | | Fully Integrated | | | Partially Integrated | | |
| An integrated approach to improvement mechanisms, (corrective and preventive action measurement and continual Improvement). | | | | | Fully Integrated | | | Partially Integrated | | |
| Integrated management support and responsibilities. | | | | | Fully Integrated | | | Partially Integrated | | |
| Management Reviews that consider the overall business strategy and plan. | | | | | Fully Integrated | | | Partially Integrated | | |

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| **Contact Name (including title):** |  | **Position:** |  |
| **Telephone:** |  | **E-mail:** |  |
| **Website:** |  | **Sector:** |  |
| **Main Language:** |  | **Date:** |  |

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| **How did you hear about us?** |  |

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| **Consultant Name (as applicable):** | **Business Name:** | **Website:** |
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| **Do you hold any other third-party registrations? If so, please give details:** |
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| **Type of application (please select from the following options):** | | | | | | | |
|  | New |  | Renewal |  | Scope Extension |  | Transfer (please send in your latest Certificate(s) and Report(s) |

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| **When will you be ready for a Stage one review?** | Click or tap to enter a date. |
| **Please specify the number of employees on each shift and the shift hours:** | |
| Day Shift | Shift hours: |
| Afternoon Shift | Shift hours: |
| Night Shift | Shift hours: |

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| **Please list the number of employees in each area/site:**  (Please use additional sheets if required) | **Full Time** | **Part Time** | | **Full Time** (Site 2) | **Part Time** (Site 2) |
| Management |  |  | |  |  |
| Administration |  |  | |  |  |
| I.T. |  |  | |  |  |
| Support staff  e.g., Finance, marketing, secretaries etc. |  |  | |  |  |
| **Operational Staff:**  **(Breakdown of employee roles please describe below)** | | | | | |
| Sales |  |  | |  |  |
| Quality Control |  |  | |  |  |
| Labourers |  |  | |  |  |
| Drivers |  |  | |  |  |
| **Others:** | | | | | |
| Associates |  |  | |  |  |
|  |  |  | |  |  |
| **Grand Total of employees’ full time and part time** |  |  | | | |
| **State the number of personnel working on and offsite from the organisation’s premises.** | **On Site** | **Off Sit**e | **Additional Comments:** | | |
| **Approx. number of subcontractors:** |  | | **Type of work subcontracted:** | | |
| **% of total work subcontracted** |  | |  | | |
| **Do you conduct any work at customer locations?** (e.g. installation, repair, maintenance, construction works) | **Yes** | **No** | **If yes, state details:** | | |
| **% of work carried out at Clients Site:** | **%** |  | | | |
| **Are there any activities that are outsourced or subcontracted?**  e.g. fabrication, transport, assembly, construction works**.** | **Yes** | **No** | **If yes, state details:** | | |

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| **ISO 9001 (Only) – State clauses that may not be applicable.** |
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| **ISO 9001 (Only) ) – State relevant product/service regulation associated with company activities E.g. CE, UKCA, Consumer Rights Act, General Product Safety Regulations, Supply of Machinery (Safety) Regulations.** |
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| **ISO 14001 (Only) – State any environmental concerns from your Interested Parties?** |
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| **ISO 14001 (Only) – State the potential environmental accidents that could arise and the impact these have?** |
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| **ISO 14001 (Only) – Do you have environmental aspects requiring consents or any regulated conditions**  (please send in copies of consents) |
| **ISO14001 and ISO45001/SSIP (Only) – State the main hazardous material and the applicable legislation for your processes.** |
| **ISO45001/SSIP (Only) - Does your business handle, produce, use or store dangerous substances (including toxic, oxidising, explosive, flammable, etc.) in large quantities and could therefore be subject to COMAH (Control of Major Accident Hazards)?** |
| **ISO45001/SSIP (Only) - Provide details of the key hazards and risks associated with your activities and processes including the relevant legal obligations.** |

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| **SSIP (Only)** – **Select the category for approval** | |
| **SSIP Approved** |  |
| **SSIP Approved: Principal Contractor** |  |
| **SSIP Approved: Contractor** |  |
| **SSIP Approved: Principal Designer** |  |
| **SSIP Approved: Designer** |  |
| **Group** |  |

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| **Do you have business relationships (customers, suppliers) in any sanctioned countries?**  **https://www.gov.uk/government/collections/financial-sanctions-regime-specific-consolidated-lists-and-releases** | | | **Yes** | **No** |
|  |  |
| **If yes, elaborate on how you ensure compliance with applicable sanctions laws or requirements:** | | | | |
| **Are there any Politically Exposed Persons (PEPs) in the company ownership structure?**  E.g., board members or executives of international organisations, bank governors, senior government executives | | | **Yes** | **No** |
|  |  |
| **If yes, please provide: Role, Name, Nationality, Date of birth):** | | | | |
| **Is the company owned or controlled by a sanctions target?**  Notes:  ” Sanctions target” refers to individuals or entities that have economic sanctions imposed on them.  “Owned or controlled by a sanctions target” E.g. where a sanctions target has:  (1) Greater than 50% of the company ownership.  (2) Board members.  (3) voting rights; and/or  (4) Executive post, e.g., Chairman of the board, Chief Executive Officer (CEO) | | | **Yes** | **No** |
|  |  |
| **If yes, please provide: Role, Name, Nationality, Date of birth):** | | | | |
| **Please provide the names(s) of the Board of Directors:** | | | | |
| **Please provide name(s) of individuals who directly or indirectly own/control at least 25% of the company:** | | | | |
| **Is the company part of a group structure?** | | | **Yes** | **No** |
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| **If yes, please provide details of headquarters:** | **Name:** | **Country:** | | |
| **Under The Sanctions Act, you declare that you and your company are not subject to a sanction .** | | | | |

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| **Under GDPR, we will retain your data for legitimate interest only, safely and securely.** **Please confirm your consent**  **.** |

When completed, please send this form to Forefront Certification Limited, Basepoint Business Centre, Isidore Road, Bromsgrove Enterprise Park, Bromsgrove, B60 3ET Tel: 01527 917980; Web: www.ffcert.com, email info@ffcert.com