

#### Send by email to: kundendienst@deuzert.de or by fax to: +49 3375 217459-19

DeuZert Deutsche Zertifizierung in Bildung und Wirtschaft GmbH Hochschulring 2, D-15745 Wildau near Berlin / Germany

Application type		
Company Headq	uarter	
Company:		
Street, No:		
Postal Code, City:		
CEO:	(first name, family name)	
Phone / Fax:		
Website:		
Billing address,	if different	
Company:		
Street, No:		
Postal Code, City:		
Point of contact		
First name, Family name:		
Role:		
Street, No:		
Postal Code, City:		
Phone / Fax:		
Email:		

# ISO 9001:2015



Information about the company			
Which services and / or products are provided / manufactured?			
Which areas of business a	re represented by your client	ts? (e. g. data processing, a	automotive industry, etc.)
Was an external consultan management system?	nt involved during the develop	oment and implementation	of the quality
Yes	please name company and consultants involved:		
☐ No			
Are there any non-applical	ble requirements claimed acc	cording to chapter 4.3 ISO	9001:2015?
Yes	please state the requirements		
☐ No			
Number of employees ( <u>full time equivalent</u> ) in the area of application of the requested certification?			
Total amount of <b>sites</b> <sup>1</sup> to b	e certified? (please complete page	ge 3 for each site)	
The criteria for class certi	fication <sup>2</sup> are as follows:		
	All sites are bound to use a homogeneous controlled quality management system.		
	There is a single responsible head of quality management system.		
	All internal audits are controlled and analysed at one site.		
	There is a headquarter with authority to issue directives to all sites.		
	All sites have similar products / services / processes respectively sequential modules for products / services / processes.		

At a fixed location, the organization performs work or services on an ongoing basis, including related or affiliated activities. At a virtual site, the organization performs work or provides services based on processes from physical sites using an online environment. A virtual site is considered a single site for purposes of determining audit time.

Certification of an organization with a quality management system at multiple sites.



In case of change of the scope of an existing certification				
Certificate registration no:		Date of issue:		
Please describe the chang	je:	,		
Other final information	l			
Should all sites be listed or	n a single certificate?			
Please write down a sugge	estion for the area of busine	ss to quote on the certificate	after successful audition:	
Preferred date (CW):				
Place and date:				
First name, Family name:				
Signature to confirm the validity of statements:				



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Please complete this page separately for each site <sup>3</sup> !				
Registered office:				
Site address				
Company:				
Street, No:				
Postal Code, City:				
Existing certification	ations: Please at	tach a copy of each current certificate if av	ailable.	
Standard		Certification body	Valid until	
ISO 9001:2015				
☐ ISO/IEC 27001:2013				
☐ ISO 21001:2018				
AZAV § 2				
miscellaneous:				
Number of personnel at the site (permanent employees):				
	Marginally employed (e.g. max. 15 h per Week) or temporary workers (simple task)			
	Other part-time working personnel			
	Apprentices			
	Drivers			
	Field Staff (sales, r	messengers, etc.)		

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Are there shift workers?			
Yes	please state number of shifts		
No			
What are the activit	ies and processes at the site?		
Fundle on management (a	n Assertant and the section of		
Furtner remarks (e.	g. temporary location)		

Thank you for your effort.