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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **IBMS CERTIFICATION APPLICATION FORM** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *Report Number* | | *(Report No is going to be completed by IBMS CERT.)* | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Organisation Name\**** | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Main Office Address*** | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| ***2nd Address (If Available)*** | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| ***City\**** | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Country\**** | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Postcode / Zipcode\**** | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Corporate / Legal Entity For Company*** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Legal Status of Company*** | | Private | | | | |  | | | Public | | | | | |  | Proprietorship | | | |  | Partnership | | | |  |
| Govt. Undertaken | | | | |  | | | PSU | | | | | |  | LLP | | | |  | Other \_\_\_\_\_\_\_\_\_ | | | |  |
| ***Business Registration Number\**** | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Company PAN*** | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| ***GST No.(If Applicable)*** | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Contact Person Details*** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Authorized Person Name*** | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Designation*** | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Phone / Fax No./Mobile No./ Telephone No.*** | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| ***E-mail*** | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Website*** | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Scope of Certification*** | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Organisation Details*** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Manpower Details*** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ***No. of employees (at all locations) engaged in*** | | ***Full Time*** | ***Part Time*** | | | ***Work from Home*** | | | | | ***Contracted /Subcontracted*** | | | | | | | ***At temporary site*** | | ***Number of Employees engaged in identical or similar activities*** | | | | | | |
| Manufacturing/Service area | |  |  | | |  | | | | |  | | | | | | |  | |  | | | | | | |
| Management & Administrative Activities | |  |  | | |  | | | | |  | | | | | | |  | |  | | | | | | |
| Design & Development Activities | |  |  | | |  | | | | |  | | | | | | |  | |  | | | | | | |
| Producation/QC/QA/Technical | |  |  | | |  | | | | |  | | | | | | |  | |  | | | | | | |
| Sales/Marketings | |  |  | | |  | | | | |  | | | | | | |  | |  | | | | | | |
| Purchase | |  |  | | |  | | | | |  | | | | | | |  | |  | | | | | | |
| Stores, Warehouse & Transport Activies | |  |  | | |  | | | | |  | | | | | | |  | |  | | | | | | |
| Other Activities (Please Specify) | |  |  | | |  | | | | |  | | | | | | |  | |  | | | | | | |
| Total Employees | |  |  | | |  | | | | |  | | | | | | |  | |  | | | | | | |
| Exclusion if any | | ***Clause*** | | | | ***Justification*** | | | | | | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | | | | | | | |
| Approx number of sub contractors used on average if applicable. | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Is there any shift available?*** | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Documentation Language*** | | *English* | |  | | *Local Langauge* | | | | | | |  |  | | | | | | | | | | | | |
| ***Audit Type*** | | *Certification* | |  | | *Transfer* | | | | | | |  | *Pre-Audit* | | | | |  | *Surveillance* | | | | |  | |
| *Re-Certification* | |  | | *Scope Change* | | | | | | |  | *Address Change* | | | | |  |  | | | | |  | |
| ***Consultants Involved*** | | *Yes* | | |  | *If Answer is yes,* | | | | | | *Mention Name of the Consultants:* | | | | | | | | | | | | | | |
| *No* | | |  |  | | | | | | | | | | | | | | | | | | | | |
| ***For Transfer Case*** | | *Certificate No* | | | | | |  | | | | | | | | | | | | | | | | | | |
| *Certification Body Name* | | | | | |  | | | | | | | | | | | | | | | | | | |
| *Accreditation Body Name* | | | | | |  | | | | | | | | | | | | | | | | | | |
| *Assessment Standard against which registration is sought*: | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *STANDARD* | *REQUESTED ACCREDITATION* | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | *Accredited* | | | | *Non-accredited* | | |
| *ISO 9001:2015* | *Quality Management System* | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| *ISO 14001:2015* | *Enverironmental Management System* | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| *ISO 45001:2018* | *Occupational Health & Safety Managemt* | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| *ISO/IEC 27001:2022* | *Information Security Management System* | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| *ISO 37001:2016* | *Anti-Bribery Management System* | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| *Other* |  | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| **Standard(s) Specific Information:** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **ISO 9001:2015 (Quality Management System)** | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | *No* | | | | *Yes-Describe* | | |
| Is there any process outsourced that affects product conformity? | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| If yes, give the name of the outsourced process | | | | | | | | | | | | | | | | | | | | *-* | | | | | | |
| Exclusions, if any? | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| Is the documented system (Procedures, W.I., Forms/Formats etc.) has been implemented for a period of at least three months followed by at least one internal audit and a management review? | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| If yes, give the dates ofInternal Audit and Management Review | | | | | | | | | | | | | | | | | | | | **Internal Audit***:* DD-MM-YYYY  **MRM:**DD-MM-YYYY | | | | | | |
| additional factors (if any applicable- kindly tick ) | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| Complicated logistics involving more than one building or location wherework is carried out, e.g. a separate Design Centre must be audited. | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| Staff speaking in more than one language (requiring interpreter(s) orpreventing individual auditors from working independently). | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| Very large site for the number of personnel (e.g. a forest) | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| High degree of regulation (e.g. food, drugs, aerospace, nuclear power,etc.). | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| System covers highly complex processes or relatively high number ofunique activities. | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| Activities that require visiting temporary sites to confirm the activities ofthe permanent site(s) whose management system is subject tocertification. | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| **ISO 14001:2015 (Eniviormental Management System)** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Number of Site to Be audited? Single Multiple | | | | | | | | | | | | | | | | | | | | *No* | | | | *Yes* | | |
| Whether Initial Environmental Review (IER) available? | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| Whether Register of Significant Aspects / Impacts available? | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| Whether Legal Register available? | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| Whether Environmental Management Program (EMP) available? | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| Has EMP been implemented? | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| Attach List of Compliance Obligation | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| **ISO 45001:2018 (Occupational Health and Safety (OH&S) Management System)** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Number of Sites to be Audited? Single Multiple | | | | | | | | | | | | | | | | | | | | *No* | | | | *Yes* | | |
| Have you identified Hazards? | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| If yes--List of Hazardous materials any relevant legal obligations. | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| Personal working onsite and off-site | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| Detail all identified Critical occupational health and safety risks | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| Whether Incident/ Accident Register available? | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| **ISO 37001:2016 (Anti-Bribery Management System)** | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | *No* | | | | *Yes* | | |
| Are Anti - Bribery Management Manual/ Procedure etc. available? | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| Is Internal Anti - Bribery Audit Programme available and conducted? | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| Has the Internal anti - bribery Audit Programme been implemented? | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| What are the anti - bribery Laws/Acts applicable to your organization? Please list them. | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| Is undertaking from personnel and business associates in place? | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| Are there posts in the organization where significant bribery risk has been identified?If yes, No. of personnel working on such posts (other than public officials) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | | |  | | | |  | | |
| Number of personnel in anti-bribery compliance functions \_\_\_\_\_\_\_\_\_\_\_\_\_ (Vigilance activity). | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Number of public officials \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **ISO/IEC 27001:2022 (Information Security Management System)** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *Number of Sites to be Audited?* Single Multiple  *Has a Statement of Applicability been compiled?* Yes No  *No. of user = ………....* No. of sites = *……..……..*  *No. of servers = ……..……..* No. of Workstations (PC + Laptops) *= ………..…..*  *Any Prior Audits Conducted* Yes No  *If Yes , attach audit findings:……………………………………………………………………………………………..* | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please tick factors related to Information Technology environment (determination of factors related to IT Complexity): | | | | | | | | | | | | | | | **ISO/IEC 27001:2022** | | | | | | | |  | | | |
| IT infrastructure and complexity:  1. Few or highly standardized IT platforms, servers, operating systems, databases, networks etc.  2. Several different IT platforms, servers, operating systems, databases, networks etc.  3. Many different IT platforms, servers, operating systems, databases, networks etc.  4. Extent and diversity of technology utilized in the implementation of the various components of the ISMS (e.g. number of different IT platforms, number of segregated networks); | | | | | | | | | | | | | | |  | | | | | | | | | | | |
| Dependency on outsourcing and suppliers, including Cloud services:  1. Little or no dependency on outsourcing or suppliers.  2. Some dependency on outsourcing or suppliers, related to some but not all important business activities.  3. High dependency on outsourcing or suppliers, large impact on important business activities.  4. Number of sites and number of Disaster Recovery (DR) sites. | | | | | | | | | | | | | | |  | | | | | | | | | | | |
| Information system development:  1. None or very little in-house system/application development.  2. Some in-house or outsourced system/allocation development for some important business processes  3. Extensive in-house or outsourced system/application development for important business processes | | | | | | | | | | | | | | |  | | | | | | | | | | | |
| IT Business and organization Complexity  1. Organization work in non-critical business sector and non-regulated sector block  2. Organization has customer in critical business sector  3. Organization works in critical business sector | | | | | | | | | | | | | | |  | | | | | | | | | | | |
| Process and Task  1. Standard Process with standard and repetitive task i.e., lots of persons doing work underthe organization’s control carrying out the same tasks; few products or services.  2. organization’s control carrying out the same tasks, few product or services.  3. Standard but not repetitive process with high number of products or services  4. Complex Process, High number of products and services, many business units included in scope of certification | | | | | | | | | | | | | | |  | | | | | | | | | | | |
| If any Additional factors invloved –Kindly Tick | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Complicated logistics involving more than one building or location in the scope of the ISMS;  Staff speaking more than one language (requiring interpreter(s) or preventing individual auditors from working independently) or documentation provided in more than one language;  Activities that require visiting temporary sites to confirm the activities of the permanent sites(s) whose management system is subject to certification (see paragraph below next list);  High number of standards and regulations that apply to the ISMS.  The organization has already been certified accredited management system (If Yes) :  **Certification Body Name:**  **Standard:** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Addresses for Multi-site Organizations**  **(Company – Site – Construction Site )** | | | | | | | | | ***Employee No*** | | | | | | ***Shift number*** | | | | | ***Scope*** | | | | | | |
|  | | | | | | | | |  | | | | | |  | | | | |  | | | | | | |
| **Integrated Management System** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| An integrated documentation set, including work instructions to a good level of development, as appropriate; | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Management Reviews that consider the overall business strategy and plan; | | | | | | | | | | | | | | | | | | | | | | | | | | |
| An integrated approach to internal audits; | | | | | | | | | | | | | | | | | | | | | | | | | | |
| An integrated approach to policy and objectives; | | | | | | | | | | | | | | | | | | | | | | | | | | |
| An integrated approach to systems processes; | | | | | | | | | | | | | | | | | | | | | | | | | | |
| An integrated approach to improvement mechanisms, (corrective and preventive action; measurement and continual Improvement); | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Integrated management support and responsibilities. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **ICT ACCORDING  TO IAF MD 4:2018**  Information and Communication Technology (ICT) for Auditing/Assessment Purposes | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **What is ICT & Purpose**  *The term ICT refers to the use of technologies to collect, store, retrieve, process, analysis and transmission of information.*  *ICT is the use of technology for gathering, storing, retrieving, processing, analyzing and transmitting information. It includes software and hardware such as smartphones, handheld devices, laptop computers, desktop computers, drones, video cameras, wearable technology, artificial intelligence, and others. The use of ICT may be appropriate for auditing/assessment both locally and remotely.* | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *Is Possible to use this ICT Method?* | | | | | | | | | | | | | | | Yes  No | | | | | | | | | | | |
| *How do you become aware of IBMS Certification?* | | | | | | | | | | | | | | |  | | | | | | | | | | | |
| **Application Date :** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Confirmation*** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Contact Name*** | ***Position*** | | | | | **Date** | | | | | | | | | ***Signature/ Stamp*** | | | | | | | | | | | |
|  |  | | | | |  | | | | | | | | |  | | | | | | | | | | | |
| **(FOR IBMS CERTIFICATION PVT. LTD. USE ONLY)** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Can the application be further processed? | | | | | | Yes | | | | | | | | | No | | | | | | | | | | | |
| İf yes) Reson for Non Processing: - | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Reviewed By** | | | | | | **Signature** | | | | | | | | | **Date** | | | | | | | | | | | |
|  | | | | | |  | | | | | | | | |  | | | | | | | | | | | |
| ***Please return this form to :***  **IBMS Certification Pvt. Ltd.,** Lucknow, Uttar Pradesh, India **Toll Free**: +91-9569970098; **E Mail:** [info@ibmscert.com,](mailto:info@ibmscert.com,)**Web: www.ibmscert.com** | | | | | | | | | | | | | | | | | | | | | | | | | | |

**Declaration:** We accept the terms and conditions of certification process and agree to abide by the Certification requirements as provided by IBMS Certification Pvt. Ltd.,