

Application for Registration



1. Which registration is sought

Customer number ()

- ☐ ISO 9001 ☐ ISO 14001 ☐ K-OHSMS 18001 ☐ ISO 45001 ☐ ISO 22000
☐ IATF 16949 ☐ ISO 27000 ☐ HACCP ☐ ISO 37001

2. Relevant schemes to be included if applicable. Eg. KS

: _____

3. Company details

Name(or Trading Name) of Company or Organization

Local Lang. : _____

English : _____

Main Address(ie Head Office) Postcode : _____

Local Lang. : _____

English : _____

Contact : _____ (H.P: _____) spot : _____

Quality Manager : _____ President : _____ H.P: (_____)

Potential Audit Date: _____ Employees No. : _____

Tel No : _____ Fax No : _____

Homepage : _____ E-mail : _____

4. Address(es) of location(s) for assessment, if different or additional to above

Contact : _____ Position : _____

Tel No : _____ Fax No : _____

Note : If more than one location, please provide details on a separate sheet

5. Proposed scope of registration (this will be discussed with you at the pre-audit visit)

-Local Lang. : _____

-English : _____

6. Have you engaged a QA consultant to assist you? If you so, please give details)

7. Declaration

We undertake to comply with the SPEC Regulation Relating to Registration and to pay all fees and charges connected with the registration process, irrespective of the eventual granting of registration.

Signature : _____ Date and Time : _____

Name : _____ Spot : _____

※ Fill out this application form and send it by e-mail or fax.

Tel : 02-561-9001

Fax : 02-561-9002

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