



all kind solutions

# All Kind Solutions

## ISO Application Form

<b>Product and Service Interest (Tick as appropriate)</b>			
ISO 9001- Quality Management Systems			
ISO 14001- Environmental Management Systems			
OHSAS 18001- Health & Safety Management Systems			
ISO 22000- Food Safety Management Systems			
ISO 27000- Information Security Management Systems			
CE Mark Certification			
<b>Contact Details</b>			
*Name of Organization			
*Name of Parent Organization			
*Address:			
Postal/Zip Code:		Country:	
*Name of Primary Contact:		*Position in Organization:	
*Telephone Number:		Fax Number:	
*E-mail Address:			
Name of Secondary Contact:		Position in Organization:	
<b>About Your Organization</b>			
Industry Sector		Description of Products/Services:	
No. sites covered by this enquiry:		No. employees Covered by enquiry:	
Description of certificates already held:			
Description of shift pattern:			
SCOPE of Activity			
<b>Existing Management Systems</b>			
Please outline the structure of the Management System (e.g. Manual, Procedures, Work Instructions, Plans etc.):			
Is your system established (if so, for how long) or under development?			