

Area reserved to CCI

N° offer request:

N° offer:

N° order:

Date:

Dear Sirs, in order to allow us to formulate a personalized offer, we ask you to complete this document. Please stamp and sign this document and send it to us by fax or email.

The compilation of this document does not constitute any commitment on your part.

OFFER REQUEST	
Standard	<input type="checkbox"/> ISO 9001 <input type="checkbox"/> ISO 14001 <input type="checkbox"/> ISO 22000 <input type="checkbox"/> OHSAS 18001 <input type="checkbox"/> ISO 45001 <input type="checkbox"/> ISO 39001 <input type="checkbox"/> ISO 50001 <input type="checkbox"/> ISO 29990 <input type="checkbox"/> ISO 27001 <input type="checkbox"/> ISO 20000-1 <input type="checkbox"/> ISO 37001 <input type="checkbox"/> Other
Audit type	<input type="checkbox"/> Initial <input type="checkbox"/> Renewal <input type="checkbox"/> Transfer (See the necessary Documents in page 2)

COMPANY DATA	
Fiscal and general data of the organization (registered office)	
Company:	
Address:	Postal code: City: Country:
VAT number:	Fiscal code:
Telephone:	Fax: Mobile:
e-mail:	web:
Name of the contact person and position: e-mail:	

ADDRESS OF OPERATIVE SITES TO BE SUBMITTED TO AUDITS (if different from the registered office)	
Operative site 1
Operative site 2
Operative site 3

PERSONNEL INVOLVED IN CERTIFICATION				
Personnel Distribution	Company personnel		Outsourcing personnel	
	Full-time	Part-time	Full-time	Part-time
Owners and managers				
Workers				
Operators				
Total				
N° working shifts		In the event of multiple shifts, indicate whether the processes carried out are the same	<input type="checkbox"/> YES <input type="checkbox"/> NO	

Do you speak other languages (beyond English) within your organization for which you need an interpreter to perform the audits? (if yes, indicate which languages are spoken)

SCOPE OF APPLICATION	
Specify the type of activity subject to certification.	
.....	
For each type of activity reported in the scope of certification, indicate the number of employees for each activity:	
Activity 1	n° workers
Activity 2	n° workers
Activity 3	n° workers
Indicate any outsourced activities	

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GENERAL INFORMATION ON THE IMPLEMENTED MANAGEMENT SYSTEM

Has the organization availed itself of external consultancy? if yes indicate:

Consultancy company:

Consultant:

For safety regulations, also indicate other types of consultancy (competent doctor, DVR consultant, external RSPP, etc.)

How long have you implemented a Management System in your organization??

In the case of organization already certified with other standards, the documentation of the Management System is:

Integrated

Divided

Integration in process

Indicate other standards:

Standard:

Standard:

Standard:

Standard:

Standard:

Standard:

MOBILE WORKING SITES

(building sites, activities at third parties, external sites)

Indicate the total number of operating units (open sites, even if suspended, activities with third parties):

CITY	REGION	ACTIVITY	N° ADDETTI	WORK START	WORK FINISH

Notes:

DOCUMENTS NECESSARY FOR THE FORMULATION OF AN ECONOMIC OFFER

- Chamber of Commerce Registration document (copy)

- In the case of a Transfer, send a copy of the certificate and the Initial / Renewal audit report and last audit performed.

The petitioner, as the person in charge of the organization, declares that the data provided are real and truthful.

Name surname:

Position:

Date:

Signature and stamp:

At the same time we inform you that pursuant to REGULATION (EU) 2016/679 of 27 April 2016 "General Regulation on Data Protection", with the acceptance of this, we authorize the processing of data provided to CCI, in compliance with the institutional purposes related to activities of the same and provided for by the relevant regulations.

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SPECIFIC DATA for ISO 9001

The organization carries out design activities (even if outsourced)?: Yes NO

MANDATORY information for ISO 9001 for organizations operating in the EA 28 sector:

ORGANIZATION TURNOVER:			Structural characteristics of your company:
YEAR		TURNOVER	<input type="checkbox"/> General contractor that coordinates and manages the work of individual specialized firms; <input type="checkbox"/> Specialized company that operates mainly in one or more specialized sectors generally subcontracted to the above general companies ; <input type="checkbox"/> Consortium admitted to public contracts and precisely between production and work cooperative companies; Stable consortium.
YEAR		TURNOVER	
YEAR		TURNOVER	

SPECIFIC DATA for ISO 14001

Equipment	Number	Power / Capacity '1	Type
Industrial boilers			
Industrial refrigerators			
Tanks			
Warehouse			
Treatment plant			
Structures affected by legionella			
High voltage systems			
Operating site size (m2)			

SPECIFIC DATA for BS OHSAS 18001 / ISO 45001

Outcome of the risk assessment:			
Company is subject to chemical risk unmoderated?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Company is subject to biological risk class 3 or 4?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Company is subject to a carcinogenic risk?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Company is subject to risk a major accident?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
complexity of logistics sites:	<input type="checkbox"/> High	<input type="checkbox"/> Media	<input type="checkbox"/> Low

N. employees for activities performed outside the organization:

SPECIFIC DATA for ISO 50001

Staff involved in the SGE:	Specific data on energy consumption:
Energy Management Representatives	Annual Energy Consumption (Terajoule)
Energy Management Team	Number of energy resources
Function Managers (excluding Energy Team)	Number of significant energy uses (SEUs)
Staff maintenance operations	Other
Plant contractors	

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SPECIFIC DATA for ISO 27001

Describe the major risk data controlled by the system (e.g. banks, local authorities, telecommunication service providers, non-personal commercial data, ministerial data, personal and sensitive data such as health data, etc.):

The confidential documentation of the ISS (information security management system) includes procedures, registrations etc. classified as "confidential" and / or that cannot be made available for evaluation?

YES

NO

n. of Users		n. of Sites		n. of application developers and maintenance staff	
n. of Server		n. of Workstation. PC and Laptop			

SPECIFIC DATA for INTEGRATION LEVEL

To be completed in the event that integrated audits are required for the certification of various management systems.

Aspects		Integration level		
		TOTAL	PARTIAL	ABSENT
1	Management review			
2	Integrated approach to internal auditors			
3	Integrated approach to policy and objectives			
4	Integrated approach to system processes			
5	Integrated documentation, procedures, instructions			
6	Integrated approach to improvement (AC, AP, improvement measures)			
7	Management that takes into account the global strategy and business plan			
8	Unified responsibilities, management support and the ability of the organization's staff to answer questions regarding multiple management systems			
9	Indicate whether the staff of the organization has the ability to answer questions regarding multiple SGs		YES	NO

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Name:

Position :

Date:

Signature and stamp :