

	UGANDA NATIONAL BUREAU OF STANDARDS CERTIFICATION SCHEME	Document No: CERT/SC/F26	
		Effective Date: 05/12/2019	
Document Title: PRE-APPLICATION QUESTIONNAIRE		Issue No: 01	Rev. 02

Please select service inquiry (tick)							
Initial Certification		Re-Certification		Scope Extension			Other (Specify)
Please indicate the scheme of your interest:(tick)							
ISO 9001		ISO 22000		ISO 14001		ISO45001	
						ISO 27000	
						HACCP	
							Others (please state)
For Integrated Management Systems (IMS) Please state the standards under integration							
Registered Name of Company:							
Registration number of Company:				TIN Number:			
Physical Address: (Location)				Distance in Km from UNBS Standards House:			
Contact Person's name & position:				Mobile Number			
How long has the system above been implemented?				Email address:			
Scope of certification sought:							
Exclusions from scope of certification:(Consider both business processes and standard requirements)							
Justifications for exclusions above:							
Name of the sites to be audited	Activities/processes	Number of Employees					
						No. of Temporary staff	
		Permanent	Part-time	Skilled	Un skilled		
Number of Shifts and Shift Times (if applicable):				For Part-time employees please specify number of hours per day.			
Do shifts perform different activities? If yes please specify							
Do you have any seasonal activities that impacts on operations? (Yes/No)				If yes, please specify:			
For IMS, Please declare the level of integration using a scale of 0-100%.							
For recertification, what changes have happened in your organization's management system since the last surveillance audit? Tick all that apply below.							
Scope of certification (e.g Additional processes/sites/products/services etc)			Management (organizational structure)		Changes to legislation		Other
Name:				Position:			
Signature:				Date :		Seal/stamp	

UNBS reserves the right to amend audit time if subsequently discovered that the data supplied differs from that established at the time of audit

Please scan and send form to systemscertification@unbs.go.ug