

## Application Form - Product Certification 產品認證申請表格

### (I) Filled by Client 由客戶填寫:

Company Name 公司名稱:	(Please provide a copy of Business Registration 請提供商業登記證副本)		
Address 地址:			
Telephone No. 電話:		Fax 傳真:	
E-mail 電子郵件:		Website 網站:	
Contact Person 聯絡人:	(Position 職位: )		

### Current System Certification Granted by Other Certification Body (if any)

其他認證機構授予的當前認證 (如果有):

Type of Certification 認證類型 <i>(Tick the box where appropriate 請別選在適當地方)</i>	Name of Certification Body 認證機構名稱	Certification Validity Date 認證有效期	Certification Scope 認證範圍
<input type="checkbox"/> ISO 9001			
<input type="checkbox"/> ISO 14001			
<input type="checkbox"/> ISO 45001			
<input type="checkbox"/> Other 其他			

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Information on Certification Sites 認證場地資料:		Site 1 場地 1	Site 2 場地 2	Site 3 場地 3
Type of Site 場地性質: (e.g. Office/ Manufacturing Plant/ Warehouse 例如, 辦公室/ 工廠/ 倉庫):				
Name 名稱 (if applicable 如適用):				
Address 地址:				
Telephone Number & Fax Number 電話號碼及傳真號碼:				
E-mail 電郵:				
Contact Person 聯絡人:				
Approx. Site Area 場地 大約面積 (m <sup>2</sup> 平方米):				
Number of Production Line 生產線數量:				
Work Shift 輪班 (if applicable 如適用)	No. of shift 班數:			
	No. of staff per shift 每班人員數目:			
Total Number of Staff involved in certification scope 認證範圍人員總數:				
Other Site Information 其他場地資料:				

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<b>Certification Scheme Adopted</b> 申請認證之計劃  <i>(Tick the box where appropriate 請別選在適當地方)</i>		<input type="checkbox"/> Quality Scheme for the Production and Supply of Concrete (QSPSC Issue 8 2014, HKQAA) 香港品質管理局混凝土認證計劃 (QSPSC 第 8 版 2014)	
		<input type="checkbox"/> Other 其他:	
<b>Product Description / Applied Certification Scope (產品描述/ 申請之認證範圍):</b>  			
<b>Current Major Projects 目前主要營運工程項目:</b>			
Project name/ Project Ref. No.	Project Period	Product Models / Other Product Information	
<b>Other Information 其他提供資料:</b> <i>(Tick the box where appropriate 請別選在適當地方)</i>			
Employment of Consultant 聘用顧問情況  <input type="checkbox"/> Yes, name of consultant 有, 顧問公司名稱 :  <input type="checkbox"/> No 沒有			
Audit Language 審核語言:		<input type="checkbox"/> Putonghua 普通話 <input type="checkbox"/> English 英語 <input type="checkbox"/> Cantonese 粵語  <input type="checkbox"/> Other 其他:	
<b>Outsourced Processes (外判程序)</b>  <input type="checkbox"/> No 沒有外判程序  <input type="checkbox"/> Yes, please describe 有, 說明外判情況:			
<b>Expected Date of the Certification Audit</b> 期望認證審核日期 :			

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*Note:*  
The Applicant has accepted that The Lab (Asia) Limited Certification Department (TLAC) will provide certification services (evaluation) to the Applicant's processes, implementation of management system and production operations according to the requirements of the Product Scheme as specified above, and with the TLAC's Terms and Conditions of Services.

*備註:*  
申請人已同意 The Lab (Asia) Limited Certification Department (TLAC) 提供的認證服務，將會對其過程、管理體系的實施和生產操作根據上述產品認證計劃的要求及 TLAC 的服務條款和條件進行審核。

### For and behalf of Authorized Representative 負責人代表簽署:

Signature 簽署 :		Company Chop 公司蓋章	
Name 姓名 :		Title 職位 :	
Date 日期 :			

Please return (by post, fax or email) this application form to: The Lab (Asia) Limited  
Address: 22 San Hi Tsuen Street, Ping Shan, New Territories, Hong Kong  
Tel: (+852) 2470 2588 Fax: (+852) 2470 2589 E-Mail: info@thelab.asia

請將此申請表寄回/ 傳真/ 或電郵至 : The Lab (Asia) Limited  
地址 : 香港新界屏山新喜村街 22 號  
電話 : (+852) 2470 2588 傳真 : (+852) 2470 2589 電子郵箱 : info@thelab.asia

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### (II) Filled by The Lab (Asia) Limited 由 TLAC 填寫:

(Tick the box where appropriate)

Certification Scheme:	
Type of Audit: <input type="checkbox"/> Certification Audit <input type="checkbox"/> Re-certification Audit <input type="checkbox"/> Transfer Audit <input type="checkbox"/> Audit for extension of scope <input type="checkbox"/> Other:	
No. of Audit Time (man-day) required :	
Evaluation Activities involved in the coming certification:	<input type="checkbox"/> Audit <input type="checkbox"/> Testing <input type="checkbox"/> Inspection <input type="checkbox"/> Other:
Can TLAC provide certification to this application, with the stated product scheme? (e.g. check if the accreditation is still valid, availability of auditors at the requested audit dates)	<input type="checkbox"/> Yes <input type="checkbox"/> No, other justification:
Is it necessary to employ a Technical Expert (TE)?	<input type="checkbox"/> No <input type="checkbox"/> Yes, the proposed TE:
Is it necessary to outsource the testing or inspection during the certification processes?	<input type="checkbox"/> No <input type="checkbox"/> Yes, the proposed external provider:
Other Remarks:	

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### Conclusion

*(Tick the box where appropriate)*

- This Application is accepted, and TLAC needs to:
- prepare and issue a Quotation (with the TLAC Terms and Conditions) to the Applicant;  
Quotation Number: \_\_\_\_\_
  - pass the case to: \_\_\_\_\_ to follow; and to arrange to form an Audit Team:-  
Lead Auditor: \_\_\_\_\_ Auditor(s): \_\_\_\_\_
  - T.E.: \_\_\_\_\_ Other team member: \_\_\_\_\_
  - take other action: (e.g. to find a Technical Expert/ Translator)
- TLAC does not accept this application, reason:
- TLAC does not have the capability/ competence and to perform the concerned evaluation (auditing) activities;
  - Other: \_\_\_\_\_
  - TLAC needs to take following actions:
    - Contact the Applicant immediately;
    - Other required action \_\_\_\_\_

Other Remarks:

Prepared by : \_\_\_\_\_ Approved by : \_\_\_\_\_

Date : \_\_\_\_\_ Date : \_\_\_\_\_