



# Application /Request for Quotation

Please complete this questionnaire and forward it to ACM Limited who will then provide you with a written proposal. Any information will be treated as confidential and will not be disclosed or discussed with any third party.

Company Name			
Address			
City			
Post Code		Country	
Tel Number		Contact Name	
Fax Number		Position	
Web Site		E-mail	
Standard(s) to be assessed		9001 exclusions	
Scope: Please describe what activities your organisation carries out.			
Please list any additional sites to be included in the scope of registration			
Please list the number of employees in each area/ site (use additional page if required)		Full Time	Part Time
		Shifts	Full Time (Site 2)
			Part Time (Site 2)
			Shifts (Site 2)
Manufacturing/Service area			
Quality Control/Technical			
Administration			
Storage/Warehouse			
Other			
Management			
Total Employees (Full time equivalent)			
Approx number of sub contractors used on average if applicable.		Describe the type of work subcontracted if applicable.	
Approximately, what % of you total work is subcontracted out?		Approximately, what % of work is carried out at clients' sites?	
Do you currently hold any other third party registrations?			
When will you be ready for stage one review?		Date	
How did you hear of ACM Limited?			
Were you assisted by a consultant in developing your Management System?		Name	
		Website	
For ISO 14001 and OHSAS 18001 please also supply a list of applicable regulations, environmental aspects, and list of any permits, licences or consents.			
Signature		Date	
Please return this form to ACM Limited, 4 Navigation Court, Harris Business Park, Hanbury Road, Stoke Prior, Bromsgrove, United Kingdom, B60 4FD. - Fax +44 (0) 1527 833483 E-mail info@acmcert.com			