



## Factory Assessment Application Form for Registration of Voluntary Product Certification

### 1. Applicant:

Private Label     Authorized by producer

Application Number: \_\_\_\_\_

Name: \_\_\_\_\_

Office address: \_\_\_\_\_

\_\_\_\_\_

Telephone no.: \_\_\_\_\_ Fax no.: \_\_\_\_\_

Destination of report: \_\_\_\_\_

Person in charge: \_\_\_\_\_ (Signature)

Date of signature: \_\_\_\_\_

### 2. Factories which are assessed

Name and Address of factories:

1. \_\_\_\_\_

Contact person: \_\_\_\_\_

Telephone no.: \_\_\_\_\_ Fax no.: \_\_\_\_\_

2. \_\_\_\_\_

Contact person: \_\_\_\_\_

Telephone no.: \_\_\_\_\_ Fax no.: \_\_\_\_\_

3. \_\_\_\_\_

Contact person: \_\_\_\_\_

Telephone no.: \_\_\_\_\_ Fax no.: \_\_\_\_\_

4. \_\_\_\_\_

Contact person: \_\_\_\_\_

Telephone no.: \_\_\_\_\_ Fax no.: \_\_\_\_\_