

Audit Application IRF Trusted Mark Certification



South Asia

Company details				
Name of the organization / Outlet name			Contact:	
Address:			Position:	
Postal/zip code / City:			Tel.:	
E-Mail:			Fax:	
Consultant enquiry:			e-mail:	
			Mobile:	
Audit type		Applied Trusted mark		
<input type="checkbox"/> Certification audit <input type="checkbox"/> Surveillance audit <input type="checkbox"/> Re-certification audit		<input type="checkbox"/> Trusted Shop <input type="checkbox"/> Trusted Spa <input type="checkbox"/> Trusted Saloon <input type="checkbox"/> Trusted Shopping Centre <input type="checkbox"/> Trusted Restaurant <input type="checkbox"/> Trusted Cineplex <input type="checkbox"/> Trusted Saloon <input type="checkbox"/> Trusted care <input type="checkbox"/> Trusted Funzone <input type="checkbox"/> Trusted Pharmacy <input type="checkbox"/> Trusted Jewellery <input type="checkbox"/> Trusted eShop		
		Certificate transfer (please enclose copies of the current certificates) <input type="checkbox"/> A (valid) certificate is to be taken over from the previous certification body		
Name of Brand/ Shopping Centre				
Number of Staff at Head Office				
Scope / Activity				
Carpet area of the biggest store in Sq. ft./ Carpet area of Shopping Centre				
No. of locations under Control of HO.				
Address of Locations under Control of HO.		1.		
		2.		
		3.		
		4.		
To help us give you estimate of Trusted Mark Certification please share the following details Annual Turnover= Rs. _____				
No. of Staff/Site	Carpet Area of Site <2000 Sq. Ft.	Carpet Area of Site 2001-10000 Sq. Ft.	Carpet Area of Site 10001-25000 Sq. Ft.	Carpet Area of Site >25000 Sq. Ft.
1-50				
51-100				
101-250				
251-500				
>501				
Place, date		Signature / company stamp		