



Application Form

In order to provide you with an accurate Quotation, please complete the following form. A Quotation will be provided within five business days. If you have any questions, please do not hesitate to contact us on 0447 011 225 or by email to admin@interisk.com.au.

1. Organisation Details			
Registered Company/ Organisation	Name:		
	ACN/ABN:	Type: <input type="checkbox"/> Company <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Trader <input type="checkbox"/> Other	
Additional Trading Names to appear on the certificate (please provide an attachment if more space required)	<hr/> <hr/>		
Management representative (person who has the applicant's authority in relation to the certification process and approval of invoices)	Name:		
	Position:	Phone:	
	Email:		
Mailing Address	Unit/Street Number:	Street Name:	
	Suburb:	State:	Country: Postcode:
Contact For Accounts Payable	Name:		
	Position:	Phone:	
	Email:		
	Address:		
	Preferred Invoice Delivery Method:		

2. Scope required	
Please indicate which certifications are being sought / applied for:	Quality <input type="checkbox"/> Quality Management system (ISO-9001)
	Environment: <input type="checkbox"/> Environmental Management system (ISO-14001)
	Health & Safety: <input type="checkbox"/> Occupational Health & Safety Management system (ISO 45001)
	Combined, Joined, Integrated
	<input type="checkbox"/> Integrated Management system
	Other:



3. Site Information

Main Site: Location where audit will take place

Unit/Street Number:	Street Name:		
Suburb:	State:	Country	Postcode:
Contact Name:	Phone:	Email:	
Number Of Employees:			

Additional Sites: To be audited/covered by the Certification or Assessment. (additional applications must be completed if any contact information under "Organisation Details" are different). If more than 2 additional locations please provide details on a separate sheet.

Total Additional Sites:

Additional Site 1:

Unit/Street Number:	Street Name:		
Suburb:	State:	Country	Postcode:
Contact Name:	Phone:	Email:	
Number Of Employees:			

Additional Site 2:

Unit/Street Number:	Street Name:		
Suburb:	State:	Country	Postcode:
Contact Name:	Phone:	Email:	
Number Of Employees:			

Employee Information: Please provide a list of staff by position/title or employment category (eg. drivers, accounts/admin, managers)

Position/Title/Department	Full Time	Part Time	Casual	Contractor
Total Number Of Employees/Contractors Main Office:				
Total Number Of Employees/Contractors Additional Sites:				



Total Number Of Employees/Contractors working Remote/offsite:				
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4. General Business Information

Please the range of products/services that your organisation provides	
Please provide a list of the main functions within your organisation (eg; design, production, management)	
Please provide a list of any processes/functions in your organisation that are outsourced and your onboarding process?	
Does your business conduct, or is it responsible for the design of product/services supplied to your customer? If yes please provide examples.	
What type of equipment do you use? (eg; computer/printers, forklifts, ladders)	
Do you have any continuous improvement methods implemented? If yes are the results available?	
Do you require information about any other services which will support your business objectives?	

5. Management Systems Information

When do you expect the management system to be ready for the first Audit?	Date:
Is the system you seek certification or assessment of integrated with any other management systems?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes please describe <hr/>
Do you currently have any systems certified by a certification body?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, by which body? <hr/>
Are you using a consultant to develop your system?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please advise consultants name and contact information? <hr/>



6. Application Fees		
Service Site:	Service Description	Fee Excl. GST
Application Fee for Main Site:		
Application Fee Additional Sites:		
Additional Services:		
TOTAL APPLICATION FEE:		
Payment Details: Direct Deposit Account Name: InteRisk Pty Ltd BSB: 646 000 Account Number: 100038885 Please forward payment confirmation to: accounts@interisk.com.au		

7. Terms And Conditions		
1. The applicant warrants that the information provided in this form is correct 2. The applicant acknowledges that it has received and agrees to abide by the following contractual documents: a. InteRisk Pty Ltd terms and conditions for Certification, Assessment Services b. Certification procedures relevant to the services requested, and c. Terms and Conditions for the Certification Mark License (where relevant). 3. The applicant agrees that: a. That when InteRisk accepts this application in writing; or b. If the application is not accepted in writing but InteRisk starts to supply Certification or Assessment Services to the applicant; there is a contract for the supply of Certification or Assessment Services upon the terms and Conditions of Certification Services, including the applicant's obligation to pay all fees due in respect of the certification services as calculated in accordance with the agreement reached with InteRisk. 4. The Applicant agrees that if InteRisk issues a certificate and license to the applicant for the use of any Trade Marks (such as Standards Mark) the applicant will use the Mark/s in accordance with the Certification Mark License terms 5. This application remains valid for twelve months from the date which the application was made, after which period the application will expire. 6. The Applicants that they are currently and agree to abide by All Acts, Standards, Regulatory requirements & approved codes of practices. 7. The applicant agrees that they have not been in receipt of any Management system Consultancy provided by InteRisk in the previous 24 months 8. All fees paid are non-refundable.		
Signed for and on behalf of applicant.	Full Name: (Block Letters)	Date:
	Signature of applicant or authorised person:	Position:

Your Privacy

InteRisk Pty Ltd respect stakeholders' privacy at all times. When processing your order or application we collect personal information about you for the primary purpose of providing you with a high level of customer service. We may also use this information to inform you of other related products and services available from InteRisk and contact you in relation to these products and services. As we value your privacy, we do not make your personal information available to other organisations without your explicit consent, and you have the right to gain access to this information. For more information please see our Privacy Policy on our website www.interisk.com.au
 Please direct privacy related enquiries to admin@interisk.com.au