



## Application Form

|   |   |      |  |
|---|---|------|--|
| Company Name<br>(English):              |   |      |  |
| Company Name<br>(Chinese):              |   |      |  |
| Contact Person/Title:                   |   | Tel: |  |
| E-mail:                                 |   | Fax: |  |
| Corresponding Address<br>(English):     |   |      |  |
| (Chinese):                              |   |      |  |
| Certification Applied:                  | ISO 9001:2015 ( ) ISO 14001:2015 ( ) ISO 45001:2018 ( ) |      |  |
| Scope of Cert. (English):               |   |      |  |
| Scope of Cert.<br>(Chinese):            |   |      |  |
| Boundaries of the<br>management system: |   |      |  |
| Number of staff:                        |   |      |  |
| Number of shift:                        |   |      |  |

We enclose herewith the following documentation to complete our application:  
**Copy of Business Registration.**

For and on behalf of  
 (Authorized Signature and Company Chop)

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

Please complete the form and email it to: [enquiry@acclaim.hk](mailto:enquiry@acclaim.hk)

**AAL internal use only**

|                                     |  |                                    |                                   |
|-------------------------------------|--|------------------------------------|-----------------------------------|
| <input type="checkbox"/> New Client | <input type="checkbox"/> Scope Extension | <input type="checkbox"/> Triennial | <input type="checkbox"/> Transfer |
| Client                              |  |                                    |                                   |
| Standard                            |  | EAC Code                           |                                   |

(AAL representative)

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