

Chain Of Custody of Forest and Tree based Products
PEFC™ COC

PLEASE COMPLETE THIS QUESTIONNAIRE AND ENCLOSE ANY SUPPORTING INFORMATION, SUCH AS, FOR EXAMPLE, ADVERTISING MATERIAL DESCRIBING THE COMPANY'S ACTIVITIES. UPON RECEIPT OF THE QUESTIONNAIRE, AJA EUROPE SRL WILL PREPARE A QUOTATION TO BE SUBMITTED FOR YOUR APPROVAL.

SESSION 1 - COMPANY DETAILS

TYPE OF APPLICATION	NEW <input type="checkbox"/>	RENEWAL <input type="checkbox"/>	TRANSFER <input type="checkbox"/>
<i>IN CASE OF TRANSFER FROM ANOTHER CERTIFICATION BODY, PLEASE SUBMIT A COPY OF A VALID CERTIFICATE</i>			
<i>IN CASE OF TRANSFER FROM ANOTHER CERTIFICATION BODY, THE ORGANIZATION STATES NON TO HAVE ANY LIABILITY / PENDING PROCEEDINGS</i>			
	<input type="checkbox"/> YES		<input type="checkbox"/> NO
COMPANY NAME			
LEGAL REPRESENTATIVE NAME			
WEBSITE		VAT No.	
PHONE NUMEBR		EMAIL	
REGISTERED OFFICE (ADDRESS, ZIP CODE, TOWN, COUNTRY)			

SESSION 2 - PROCESSES

ACTIVITY PERFORMED BY THE ORGANIZATION			
PRODUCTS COVERED BY THE CERTIFICATION			
ACTIVITY OBJECT OF CERTIFICATION			
CERTIFICATION	SINGLE <input type="checkbox"/>	GROUP <input type="checkbox"/>	MULTISITE <input type="checkbox"/>
ORGANIZZAZIONE	SINGOL PRODUCTION UNIT <input type="checkbox"/>		MULTIPLE PRODUCTION UNITS <input type="checkbox"/>
METHOD APPLIED	PHYSICAL SEPARATION <input type="checkbox"/>	PERCENTAGE: SIMPLE <input type="checkbox"/> MOBILE <input type="checkbox"/>	CREDIT SYSTEM <input type="checkbox"/>
<i>THE COMPANY HAS ALREADY PURCHASED OR PLANS TO PURCHASE CERTIFIED MATERIAL RELATING TO PRODUCTS SUBJECT TO REQUEST FOR CERTIFICATION BEFORE STARTING THE CERTIFICATION COURSE?</i>			
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
<i>THE COMPANY HAS ALREADY PREPARED APPROPRIATE PROCEDURES FOR CHAIN OF CUSTODY?</i>			
		<input type="checkbox"/> YES	<input type="checkbox"/> NO



SESSION 3 – OPERATIONAL SITES

DUPLICATE THIS PAGE FOR ANY ADDITIONAL SITE

COMPANY ADDRESSES TO BE CERTIFIED – DETAILS			
TOTAL NUMBER OF SITES		SITE N.	
ADDRESS, ZIP CODE, TOWN, COUNTRY			
ACTIVITIES CARRIED OUT			
POINT OF CONTACT			
NAME		ROLE	
EMAIL		PH. NUMBER	
CATEGORIES OF SITE			
METHOD APPLIED (specify if different methods are used based on sites)	PHYSICAL SEPARATION <input type="checkbox"/>	PERCENTAGE: SIMPLE <input type="checkbox"/> MOBILE <input type="checkbox"/>	CREDIT SYSTEM <input type="checkbox"/>
COMPANY TURNOVER OF LAST YEAR (APPROXIMATE)	€	EMPLOYEES	
SUPPLY TYPE			
Certified materials/products delivered by suppliers with a recognised PEFC declaration and certificate			
Supplies verified by government controls or FSC certified suppliers		Value C.I.P.	
Materials/products PROVENED FROM CONTROVERSE SOURCES*.		Value C.I.P.	
Note: Materials/products PROVENED FROM CONTROVERSE SOURCES means all materials/raw materials coming from countries with a Corruption Perceptions Index (C.P.I.) less than 50. For the value of the C.P.I. please consult the website www.transparency.it			



SESSION 4 – PRODUCTS COVERED BY THE CERTIFICATION AND SUBCONTRACTORS - DETAILS

INFORMAZIONE SUI PRODOTTI OGGETTO DELLA CERTIFICAZIONE						
N	PRODUCT TYPOLOGY	WOOD SPECIES USED (IF APPLICABLE)	METHOD APPLIED	TRANSFER OF THE CERTIFICATION % OF OUTPUT PRODUCTS	SPECIFICATIONS ON PEFC DECLARATIONS	COUNTRY OF ORIGIN OF THE SUPPLY
1						
2						
4						
<i>ADD ROWS IN CASE OF NEED</i>						

LIST OF SUBCONTRACTORS CARRYING OUT ACTIVITIES USING PEFC MATERIALS AND FALLING WITHIN THE CHAIN OF CUSTODY				
N	ADDRESS, ZIP CODE, TOWN, COUNTRY	ACTIVITIES CARRIED OUT	TYPE OF ACTIVITY U= USUAL O=OCCASIONAL	THE OUTSOURCER IS PEFC-COC CERTIFIED
1				
2				
3				
4				
<i>ADD ROWS IN CASE OF NEED</i>				

IN CASE OF ISO 9001 AND / OR ISO 14001 CERTIFICATION, IS THE PEFC COC SYSTEM INTEGRATED WITH THESE MANAGEMENT SYSTEMS?										
PLEASE INDICATE A POSSIBLE PERIOD FOR THE AUDIT PLANNING										
HOW DID YOU COME TO KNOW ABOUT AJA?										
INDICATE THE STANDARD FOR WHICH YOU ARE ALREADY CERTIFIED AND THE NAME OF THE CERTIFICATION BODY										
PLEASE SPECIFY ANY OTHER CERTIFICATION YOUR ORGANIZATION MIGHT BE INTERESTED IN										
9001		14001		45001		50001		OTHER		



SESSION 6 – SIGNATURE

LEGAL REPRESENTATIVE NAME	
SIGNATURE	
COMPANY STAMP	
DATE	

PRIVACY NOTICE

By signing this form I declare that the data shown here are correct and complete. I authorize AJA Europe S.r.l. to the processing of all personal data that will be provided during the certification process, in accordance with EU Regulation 2016/679. I authorize the communication of certificate details to PEFC Register in case of positive certification.

TO RECEIVE A COST PROPOSAL, PLEASE RETURN THIS FORM VIA E.MAIL TO
AJA Europe srl
e.mail info@acubetic.com

NB: THIS FORM MUST BE RETURNED STAMPED AND SIGNED IN ORIGINAL
BY THE LEGAL REPRESENTATIVE OF THE COMPANY

SESSION 7 - FOR AJA USE ONLY

REVIEW OF THE REQUEST (BY AJA EUROPE SRL)		YES	NO
Is the information contained in the questionnaire sufficient?		<input type="checkbox"/>	<input type="checkbox"/>
Is the scope defined?		<input type="checkbox"/>	<input type="checkbox"/>
Does AJA have at its disposal suitable and competent means and resources to provide the requested service?		<input type="checkbox"/>	<input type="checkbox"/>
Requests for clarifications/additions:			
REQUEST REVIEW	<input type="checkbox"/> POSITIVE	<input type="checkbox"/> NEGATIVE	DATE: _____
			SIGNATURE: _____