

GUYANA NATIONAL BUREAU OF STANDARDS

APPLICATION FORM FOR THE MADE IN GUYANA CERTIFICATION MARK PROGRAMME.

SECTION A: GENERAL

Application to use the Made in Guyana Certification Mark for manufactured product conformity under the authority of the GNBS Standards Act, No. 11, 1984.

Name of Company:		
	Full name of Business	7/7
Address:		
		-01
Phone #: Contact Person(s):	E-mail Address	
Is the company registered w	ith the office of registration to	o operate a business?
If "Yes", Please attach a cop	y of the registration.	R)
I/We hereby apply to use the I product(s) mentioned below.	Made in Guyana Certification N	Mark in relation to the manufactured
SECTION B: PRODUCT DI	ETAILS	
Description of Product	Brand Name	Type/Size/Grade/Style

CS1108R0F1(a)

Description of Product	Brand Name	Type/Size/Grade/Style				
SECTION C: PRODUCTION INFORMATION						
RAW MATERIALS/COMP Materials Purchased	Deleted Standards/Specifications					
Waterials Purchased	Source	Related Standards/Specifications				
SECTION D: QUALITY SYSTEM						
Do you have a quality system	? [] Yes []	No				
If "yes" please indicate compliance with [] company standard [] ISO 9001 [] HACCP [] ISO 22000						
Other standard, please specify						
Are procedures documented?	[]Yes [] No					
Are procedures fully impleme	nted?					
If no, when will procedures be	e fully documented and imple	mented?				
Month	Year					
CS1108R0F1(b)						

SECTION E: TESTING FACILITIE Are testing facilities available in the fac						
If no, where is testing being done?						
List of testing and inspection equipment available are:						
Type of Equipment	Maintenance and Calibration status					
CNBs 21						
SECTION F: MANUFACTURING E	QUIPMENT DETAILS					
Please indicate the manufacturing eq	uipment used in the production process:					
Manufacturing Equipment	Maintenance status					
SECTION G: EMPLOYEES						
Please give details of the number of employees in the following departments:						
Total in company						

CS1108R0F1(c)

Total in quality department
Total in production department
Total Guyanese staff
Total non-Guyanese staff
Is there an organizational chart in place? [] Yes [] No
SECTION H: OTHER INFORMATION Please give details of working hours.
Trease give details of working hours.
Please give details of any approval granted by other certifying bodies.
Please identify any Trade Associations of which the company is a member.
Please state if the manufacturing process is being regulated by an agency.
If yes, please indicate which agency.

SECTION J: DECLARATION

I/We agree to extend to the Guyana National Bureau of Standards (GNBS), access to all facilities at our command for carrying out inspection at our factory. We also agree to pay all expenses for inspection to be done independently, as may be required by the GNBS.

I/We agree to pay the Made in Guyana Certification Mark fee as prescribed by the GNBS, as applicable from the date of issue of the certificate.

I/We undertake to put into operation any recommendations advised by the GNBS to ensure conformity of the product to the criteria for the Made in Guyana Certification Mark.

I/We undertake to supply credible information in the Application Form. If this information is found to be inaccurate, this application may be rejected.

Should the Made in Guyana Certification Mark be granted, and as long as it will remain operative, I/we hereby undertake to abide by all terms and conditions for the maintenance and withdrawal/cancellation of the Made in Guyana Certification Mark. In the event of the Made in Guyana Certification Mark being suspended or cancelled, I/ we also undertake to cease with immediate effect to use the Made in Guyana Certification Mark on the product(s) covered by the certificate and to withdraw all relevant advertising matters as it relates to the certificate granted.

Signed:	1			
Name in block	letters:			
Position:	Δ		R	
For & behalf of	:Company	Stamp	<u>U</u>	
Dated this	day of the month of	S WIII P	, of the year	