PCS-CHK-JIS Application Form

Form 1 - EWPA JIS Mark Certification Scheme Application Form

Please read the JIS Mark Rules before completing this form.

Name of Organisation	
Plant Name	
Mailing Address	
Registered Business Address	
Registered Business Number	
Contact Person – Name & Title	
Contact Person Phone No & email	
Company capital value	☐ ≤50 million yen ☐ >50 ≤100 million yen ☐ >100 ≤300 million yen ☐ >300 million yen ≤1 billion yen ☐>1 ≤10 billion yen ☐>10 billion yen
No. of Employees on Site	☐ ≤20 ☐ >20 ≤50 ☐ >50 ≤100 ☐ >100 ≤300 ☐ >100 ≤300 ☐ >300 ≤1000 ☐ >1000
Company website	
Phone number for public JIS enquiries	
Email for public JIS enquiries	

Products to be Certified (type or class)	JIS Product Standard	Frequency of Production Runs	Annual Output of each Product m^3
Type of quality control system conformance – ☐ A or ☐ B			

Number of factory production lines?	☐ 1 ☐ 2 ☐ 3 ☐ No. of lines:
Number of production lines that will manufacture JIS product?	☐ 1 ☐ 2 ☐ 3 ☐ No. of lines:

DO Product information only

Identify each colour of DO overlay paper to be used on JIS product	☐ White ☐ Black ☐ Grey ☐ Other:
How many suppliers do you purchase overlay paper from? *Paper used on JIS product only.*	☐ 1 ☐ 2 ☐ 3 ☐ No. of suppliers:

APPROVED CONTACT LIST FOR JIS CERTIFICATION MATTERS

The Principal contact or Mill Manager can update the approved contact list at any time by emailing the EWPAA or requesting changes during audits.

Principal Contact(s): Main contact point for EWPAA certification matters and audit scheduling. Main recipient for audit notices and reports.			
Name	*Position*	*Email*	*Phone*

CC Contact(s): Additional contact point – CC for audit scheduling emails, audit notices and audit reports.			
Name	*Position*	*Email*	*Phone (optional)*

TEST REPORT APPROVED CONTACT LIST

The Principal contact or Mill Manager can update the approved contact list at any time by emailing the EWPAA or requesting changes during audits.

Principal Contact: Test report will be addressed to the Principal Contact.			
Name	Position	Email	Phone

CC Contact(s): Test reports will also be issued to CC contacts as requested.			
Name	Position	Email	Phone (*optional)*

Please forward with this application, the following information.

- names and details of key personnel and organizational chart (production, technical, quality),
- description of the quality control system as outlined in the Quality Control Requirements section of the JIS rules

We acknowledge that in making this application for Certification, we will comply with all requirements of the Scheme, and supply any samples, information and access as required to enable proper evaluation to be conducted. Access must be made available for both EWPA staff and METI staff for witnessing purposes.

Signed: **Date:**

Name:

(Plant Manager)