The information provided in this Application will help SCS to determine eligibility and scope of service. No charges will be incurred or work conducted until a Work Order is executed.

Section 1: Company/ Organization Information

1. COMPANY NAME

Company Name (*as it would appear on a contract*)**:**

Street:

City:	State/Province:	Postal Code:

Country:

Main Phone:	Website:

Has the company worked with SCS previously? ☐ **Yes**   ☐ **No**
Which service(s) did you use?

2. PRIMARY CONTACT PERSON

First Name:	Last Name:

Title:	Direct Phone:	Email:

3. GENERAL DESCRIPTION
Provide a general description of inputs and outputs (e.g. type of feedstock(s) and final product produced, as well as a general description of your organizational structure and type of business. If there are multiple business structures, please send a flow chart as an attachment which maps the flow of materials between different entities.

Section 2: Preparation for Audit

Please indicate which of the following ISCC Standards you have reviewed :
☐ ISCC EU 201 (Basics)   ☐ ISCC EU 201-01 (W/R)   ☐ ISCC EU 203 (CoC)   ☐ ISCC EU 208 (Logos)   ☐ ISCC PLUS
Available for Download: https://www.iscc-system.org/process/audit-and-certification-process/iscc-system-documents/

☐ The person charged to implement ISCC has taken an ISCC training course or plans to take an ISCC training course soon.
Course Date: Location:

☐ We have conducted an ISCC Internal Audit or plan to conduct an ISCC Internal Audit soon.
Date of ISCC Internal Audit: ☐ I am not sure what an ISCC Internal Audit is.

☐ I have reviewed the standards pertinent to my operations and fully understand the ISCC system requirements.

Section 3: Processing Unit / Production Plants

Please describe the Processing Unit that will be in the scope of the ISCC certification. Please fill out all information below. Please only list one Processing Unit per ISCC application form.

Facility Name	Type (e.g. Pyrolysis, LDPE/HDPE plant, Compounder, Other)	Location Address of Processing Unit	Certified Inputs	Certified Outputs

Additional Notes	GPS Coordinates (if available)	Does the facility have legal ownership of the certified Inputs?	Does the facility have legal ownership of the certified Outputs?

Section 4: Storage Locations / Warehouses

Please list warehouses that will be used to store certified product *Only list those storage sites OFFSITE of the production plant*
A sample of offsite storage sites will be assessed during the audit.

Name of Storage Site (if relevant)	Type (e.g. warehouse)	Material Stored	Location Address of Storage Site	GPS Coordinates (if available)	Ownership status (Owned by you, rented to you, or owned and operated by subcontractor)
Attach Additional Pages if Necessary					

Section 5: Sources of Waste Material (ONLY FILL THIS SECTION IF CERTIFYING WASTES/ RESIDUES)

5a: Points of Origin (Waste generation sites)

Please list all sources of waste material GREATER THAN 10 METRIC TONS per month.
A sample of waste providers over 10MT/month will be assessed during the audit.

Facility Type	Products (Mixed Plastic Waste, other)	Average Volume Per Month In metric tons	Location Address of Storage Site	GPS Coordinates (if available)	Independently Certified? *Does the point of origin have its own ISCC certificate?* (yes/no)

| Attach Additional Pages if Necessary |

5b: Collecting Points

Please list any entities that collect waste material on behalf of another entity

Name of Company	Products (Mixed Plastic Waste, other)	Location Address of Storage Site (or GPS)	Contact Info	Who holds the contracts with the Points of Origin? You or the Collecting Point?	Does the Collector take legal possession of the product they collect? (yes/no)

Section 6: Standards to be Applied

What ISCC standard(s) do you want to be certified to?

☐ PLUS (for Circular Economy)   ☐ PLUS add-ons (not common)   ☐ ISCC EU (only relevant for biofuels)

Section 7: Certification History

Are you currently or have you ever previously been certified to ISCC?

☐ Yes   ☐ No

If yes, please list to which ISCC standard (s), year of certification, and certification body.

Are you currently or have you ever previously been certified to another certification scheme?

☐ Yes   ☐ No

If yes, please list the certification schemes applicable and the year of certification.

Section 8: The following section is used to determine your ISCC fees, please fill out either Section 8

Conversion Unit: Any facility that involves chemical change or manipulation
Point of Origin: waste material created on premises

Trader: Only trades material
Collecting Point: collector of waste materials
Warehouse: Storage facility
Logistic Center: a network organizer of warehouses

8: Please indicate Total Annual Turnover in Euros

Please indicate the annual revenue level for the business unit in Euros. *TOTAL REVENUE AT THE CERTIFIED LOCATION, NOT ONLY FOR SUSTAINABLE MATERIAL*	
Level and Annual Revenue (Million Euro)	**Please Check**
1 (0€ -3€)	☐
2 (3€ - 60€)	☐
3 (60€ - 150€)	☐
4 (150€ - 500€)	☐
5 (500€ - <)	☐

Section 9: General Information

1. How did you learn about SCS Global Services? Who referred you to SCS Global Services?

2. Would you like information on any other certification services?

Sustainability	Food Safety	Climate
☐ *RSPO*	☐ *HAACP*	☐ *Carbon Offset*
☐ *Bonsucro*	☐ *BRC*	☐ *Carbon Footprint*
☐ *RSB*	☐ *SQF*	
☐ *Non-GMO Verified*	☐ *Global Gap*	

Section 10: Assessment Planning

Desired date/time frame for on-site assessment:		
Desired date/time frame for achieving certification:		
Nearest major airport & distance from your project	Airport:	Distance:
Please list any other companies in your supply chain that may wish to pursue certification:		
Additional Information or Comments:		

Section 11: Affirmation

I affirm that the information provided herein is true and correct to the best of my knowledge, and that I am duly authorized to sign this application. Should our company decide to pursue certification, I agree to supply any information that is deemed necessary for the audit of the operation and/or products to be certified.

Print Name:

Title:	
Signature (*electronic or typed accepted*):	
Date:	
Please email to: Matthew Rudolf, Managing Director, International Operations mrudolf@scsglobalservices.com Phone: +1 919-533-4886	Fax: +1 510-452-8001 We will be in touch as soon as possible. **Thank you for choosing SCS.**	