

## calCOMPliant v2-3

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 INFORMATION							
Company Name (as it would appear on	a contract):						
Street:							
City:	State/Province:	Postal Code:					
Country:							
Main Phone:	\	Website:					
Brief Company Description:							
2. PRIMARY CONTACT PERSON							
First Name:	Last Name:	Title:					
Direct Phone:	Email:						
3. COMPANY AFFILIATIONS WITH OTHE	R LEGAL ENTITIES (parent co	, subsidiaries)					
Company Name:	(	Corporate Relationship:					
Has the company worked with SCS previously?							
Yes No							
Which service, or services, did you use?							
4. COMPANY LEGAL STATUS (e.g. INC., L	.LC., GMBH, LTD., NGO)						
What is the legal status of your company?							
Section 2: Composite Wood Produc	t Type: (Check all that ap	ply)					
Hardwood Plywood Composite Core (HWPW-CC)		Hardwood Plywood Veneer Core (HWPW-VC)					
Particleboard (PB)		Medium Density Fiberboard (MDF)					
Thin Medium Density Fiberboard (tMDF)							
Indicate the resin type used in your pro	duct:						
Contains Formaldehyde		Ultra Low Emitting Formaldehyde (ULEF)					
No-Added Formaldehyde (NAF)							



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Section 3: Mill Facilities							
MILL #1							
Products Manufactured in this Facility:							
Type of Operations Performed:							
Street Address:							
City:	State/Province:	Postal Code:					
Country:							
CONTACT PERSON							
First Name:	Last Name:						
Phone:	Fax:	Email:					
Does your mill have CARB-approved Quality	ty Control testing facilities onsite?						
Yes No							
If yes, which type?							
MILL #2							
Products Manufactured in this Facility:							
Type of Operations Performed:							
Street Address:							
City:	State/Province:	Postal Code:					
Country:							
CONTACT PERSON							
First Name:	Last Name:						
Phone:	Fax:	Email:					
Does your mill have CARB-approved Quality Control testing facilities onsite?							
Yes No							
If yes, which type?							

Use additional sheets as necessary.



## **Section 4: General Information**

<ol> <li>What factors contributed to your interest in SCS Global Services</li> </ol>	1.	What	factors	contributed	to	vour	interest	in	SCS	Global	Services	?
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Compliance Strategy

Customer Interest Buyer Requirement

Supplier Programs Other

2. Would you like information on any of our other services?

Climate Responsible Forestry

(Carbon Offset, Carbon Footprint, etc.) (FSC, PEFC, Chain of Custody, Timber Legality, etc.)

Environmental Claims Sustainable Seafood

(Product Certification, Life Cycle Assessment, etc.) (MSC, ASC, Chain of Custody, Seafood Safety, etc.)

Food and Agriculture Sustainability Services

(Safety, Testing, Sustainability, etc) (Consulting, Supply Chain, Sustainability Metrics, etc.)

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

## **Section 5: 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.

Title:

**Signature** (electronic or typed accepted):

Date:

Please press SUBMIT to email this application or save and email to:

IAQcertified@scsglobalservices.com

Phone: 510-452-8000 | Fax: 510-452-6883

We will be in touch as soon as possible.

Thank you for choosing SCS.