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.

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| **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: | | |
| **2. PRIMARY CONTACT PERSON** | | | | | |
| First Name: | | Last Name: | | | Title: |
| Direct Phone: | | Email: | | | |

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| **Section 2: Brand Information** |
| Please provide the following information for the products you would like to have assessed for certification.  **Brand:** Trade name or logo or product label design or combination of these, employed in marketing a product or family of products that may include a number of colors or various formulations to cover a range of surface applications for commercially available paints.  **Type of Diluent:** A paint using water or oil (one or combination of organic solvents) as the main diluent.  **Product:** A finishedpaint product with a unique formulation marketed under a brand name within an individual paint category and color. |
| **BRAND #1 :** |
| Brand Name: |
| Type of Diluent (Oil/Water): |
| Number of products seeking certification:  Annual Production Volume (L/Year) |
| Site(s) where manufactured: |
| **BRAND #2 :** |
| Brand Name: |
| Type of Diluent (Oil/Water): |
| Number of products seeking certification:  Annual Production Volume (L/Year) |
| Site(s) where manufactured: |

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| **BRAND #3 :** |
| Brand Name: |
| Type of Diluent (Oil/Water): |
| Number of products seeking certification:  Annual Production Volume (L/Year) |
| Site(s) where manufactured:   |  | | --- | | **BRAND #4 :** | | Brand Name: | | Type of Diluent (Oil/Water): | | Number of products seeking certification:  Annual Production Volume (L/Year) | | Site(s) where manufactured: | |
| ***Use additional sheets as necessary.*** |

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| Section 3: Manufacturing Facilities | | |
| Please identify all manufacturing facilities and the products from each facility that you would like to have assessed for certification. | | |
| **FACILITY #1** | | |
| Products Manufactured in this Facility: | | |
| Street Address: | | |
| City: | State/Province: | Postal Code: |
| Country: | | |
| **FACILITY #2** | | |
| Products Manufactured in this Facility: | | |
| Street Address: | | |
| City: | City: | City: |
| Country: | | |
| |  |  |  | | --- | --- | --- | | **FACILITY #3** | | | | Products Manufactured in this Facility: | | | | Street Address: | | | | City: | State/Province: | Postal Code: | | Country: | | | | **FACILITY #4** | | | | Products Manufactured in this Facility: | | | | Street Address: | | | | City: | City: | City: | | Country: | | | | | |

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

[nmunoz@scsglobalservices.com](mailto:nmunoz@scsglobalservices.com)

Phone: +1.510.452.8000 | Fax: +1.510.452.6883

We will be in touch as soon as possible.

**Thank you for choosing SCS.**