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**  |
| **1.1 COMPANY INFORMATION**  |
| Company Name (*as it would appear on a contract*):       |
| Street:       |
| City:       | State/Province:       | Postal Code:       |
| Country:       |
| Main Phone:       | Website:       |
| Brief Company Description (including mill and supply base):       |
| Date of company establishment (MM/YYYY):       |
| **1.2 PRIMARY CONTACT PERSON** |
| First Name:       | Last Name:       | Title:       |
| Direct Phone:       | Email:       |
| **1.3 COMPANY LEGAL STATUS *(e.g. INC., LLC., GMBH, LTD., NGO)*** |
| What is the legal status of your company?      |
| **1.4 COMPANY AFFILIATIONS WITH OTHER LEGAL ENTITIES *(parent co, subsidiaries)*** |
| **1.4.1** List any affiliated companies of which the applicant company is the sole owner or majority shareholder. |
| **Company Name** | **Corporate Relationship** (parent co., subsidiary, branch, etc.) | **Location** (city/state/province/country) | **Contact Person** |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
| **1.4.2** List any companies with which the applicant company is affiliated but is not the majority shareholder. |
| **Company Name** | **Corporate Relationship** (parent co., subsidiary, branch, etc.) | **Location** (city/state/province/country) | **Contact Person** |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |

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| Section 2: Certification Information  |
| How would you assess your company’s level of preparedness for an RSPO ISH assessment? |
| [ ]  | New to this process | [ ]  | Previously certified/audited |
| Comments**:**       |
| Have any of the affiliated companies listed above obtained RSPO certification?      Have any of the affiliated companies listed above obtained other relevant certifications? (e.g., ISO 9001, ISO 14001):       |
| Desired date /time frame for certification assessment:       |
| Desired date / time for award of certification (if warranted):       |

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| Section 3: Certification Unit Information  |
| **3.1 GENERAL INFORMATION** The unit of certification under RSPO ISH is Group Manager and all individual members. The certificate holder is the Group. Please describe each independent smallholder (May not be scheme smallholder). Total size of oil palm production is < less than or equal to 50 hectares- if no threshold is defined in a NI.  |
| **Total Number of ISH Members** | **Number of ISH in Phase****Eligibility** | **Number of ISH in MS A** | **Number of ISH in MS B** | **Area****(Total hectare)** | **Year to meet Milestone B** |
|       |       |       |       |       |       |

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| **3.2 GROUP MANAGER INFORMATION** For the group manager certification under this application, complete the following tables: |
| 1. **Group Manager Information**

***Must be part of or managed by an officially registered or a legally formed entity.*** |
| Name of Group  |       |
| Contact Person-Group Manager |       |
| RSPO Membership |       |
| Registration with IT trading platform |       |
| FFB Tracking Mechanism (ERP) |       |

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| Section 4: General Information |
| **4.1 What factors contributed to your interest in SCS services?** |
| [ ]  Compliance[ ]  Customer Interest[ ]  Supplier Programs | [ ]  Strategy[ ]  Buyer Requirement[ ]  Other       |
| **4.2 Would you like information on other SCS Services?** |
| [ ]  Climate *(Carbon Offset, Carbon Footprint, etc.)*[ ]  Food and Agriculture *(Safety, Testing, Sustainability, etc.)* [ ]  Environmental Claims *(Product Certification, Life Cycle Assessment, etc.)* | [ ]  Responsible Forestry *(FSC, PEFC, Timber Legality)*[ ]  Sustainable Seafood *(MSC, ASC, Seafood Safety)*[ ]  Sustainability Services *(Consulting, Supply Chain, Sustainability Metrics)* |
| **4.3 How did you learn about SCS Global Services? Who referred you to SCS?**      |

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| 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. |
| **Print Name:**  |
| **Title:** |
| **Signature** (*electronic or typed accepted*):  |
| **Date:** |

Please email to:

Berliot Bolaños, Director, Sales and Business Development

bbolanos@scsglobalservices.com

Phone: +1 510-216-5651 | Fax: 510-452-6882

We will be in touch as soon as possible.

**Thank you for choosing SCS.**