|  |  |  |
| --- | --- | --- |
| **General information (conform Chamber of Commerce, CoC)** | | |
| Manufacturer |  | |
| Contact person | Mr. / Mrs. | |
| Function |  | |
| E-mail |  | |
| Address production location |  | |
| PO Box, City |  | |
| Telephone |  |  |
| E-mail (general) |  | |
| Website |  | |
| Nr. Chamber o.C. |  | |
| VAT/TVA n° |  | |
| Exteral advisor | none  Company : ………………….. Name advisor:……………………………… | | |
| How do you know about Kiwa? | Website  Social media etc.  Advisor  Otherwise: …………………... | | |

|  |  |
| --- | --- |
| **Availability ETA** | |
| ETAG no: |  |
| ETA available? | Yes, ETA nr: |
|  | No, request ETA quotation includes drawing up ETA based on ETAG |

|  |  |
| --- | --- |
| **Specific product information /product type(s)** | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  |  |  |
| **Other** | |
| Please inform Kiwa on additional production locations, valid additional certifcates etc. | |
|  | |

|  |  |
| --- | --- |
| **Planning** | |
| Audit to be planned in which period? |  |

Please sent this filled out form by mail to Mr. Eric Hendriks, eric.hendriks@kiwa.nl.

After receipt we will contact/inform you as soon as possible.