

# Application for GOTS Certification



Country:		Page:	1 / 4
Name of the client:		Project:	

**Please fill out completely – this application serves as a basis for the calculation of your offer – it is NOT A CONTRACT**

## 1. Company informationen

<b>Address of the company</b> ➔ contract holder		<b>Address of inspected site</b> ➔ processing unit	
Company name		Company name	
P.O. Box / Street		P.O. Box / Street	
ZIP Code / Town		ZIP Code / Town	
Province / State		Province / State	
Country		Country	
<b>Contact owner</b>		<b>Contact responsible person</b> ➔ if not the owner	
Name		Name	
Phone		Phone	
Mobile		Mobile	
Fax:		Fax:	
E-mail		E-mail	
<b>Address of inspected site</b> ➔ store house, processing unit		<b>Address of inspected site</b> ➔ store house, processing unit	
Company name		Company name	
P.O. Box / Street		P.O. Box / Street	
ZIP Code / Town		ZIP Code / Town	
Province / State		Province / State	
Country		Country	
<b>Contact responsible person</b> ➔ if not the owner		<b>Contact responsible person</b> ➔ if not the owner	
Name		Name	
Phone		Phone	
Mobile		Mobile	
Fax:		Fax:	
E-mail		E-mail	
<b>Note: If applicant is not legal owner of all facilities (<input type="checkbox"/> sub-units), please fill in Annex "List of Sub-units and Structogram".</b>			

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## 2. Scope of Certification

	Code	Process Categories		Code	Process Categories
<input type="checkbox"/>	PR0001	Boiling	<input type="checkbox"/>	PR0019	Non-woven manufacturing
<input type="checkbox"/>	PR0003	Biological recycling	<input type="checkbox"/>	PR0020	Packaging
<input type="checkbox"/>	PR0035	Brand	<input type="checkbox"/>	PR0021	Pre-treatment
<input type="checkbox"/>	PR0004	Chemical recycling	<input type="checkbox"/>	PR0022	Preparatory
<input type="checkbox"/>	PR0005	Collecting	<input type="checkbox"/>	PR0023	Printing
<input type="checkbox"/>	PR0008	Dyeing	<input type="checkbox"/>	PR0024	Pulp making
<input type="checkbox"/>	PR0009	Embroidery, embellishment	<input type="checkbox"/>	PR0025	Retail sales
<input type="checkbox"/>	PR0012	Finishing	<input type="checkbox"/>	PR0039	Retting
<input type="checkbox"/>	PR0013	Ginning	<input type="checkbox"/>	PR0040	Scouring
<input type="checkbox"/>	PR0015	Knitting	<input type="checkbox"/>	PR0027	Spinning
<input type="checkbox"/>	PR0016	Manufacturing	<input type="checkbox"/>	PR0029	Top making
<input type="checkbox"/>	PR0033	Weaving	<input type="checkbox"/>	PR0030	Trading
<input type="checkbox"/>			<input type="checkbox"/>	PR0031	Warehousing, distribution
<input type="checkbox"/>			<input type="checkbox"/>	PR0032	Washing, laundering
<input type="checkbox"/>			<input type="checkbox"/>	PR0034	Other
<input type="checkbox"/>			<input type="checkbox"/>		
<input type="checkbox"/>			<input type="checkbox"/>		

## 3. Information about the Certification Project

<b>Short description of your project:</b> <b>(Please list the facilities involved in project, please refer to page 1)</b>			
Note: If applicant is not legal owner of all the facilities (= sub-units), please complete Annex "List of Sub-units and structogram".			
<input type="checkbox"/>	Processing facility(ies) Number of facilities:		<input type="checkbox"/> Packing facility(ies) Number of facilities:
<input type="checkbox"/>	Storage facility(ies) Number of facilities:		
Total number of facilities:			Facilities used for conventional and certified products:
<b>Information about employees</b>			
Number of employees in total:			Number of employees - excluding those in administration:
<b>Annual turnover</b>			
Total annual turnover			Annual turnover of certified products

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## 4. Information about the Certification Project

Is this the first certification?	Yes <input type="checkbox"/>	If certified before, since when:	Month	Year
	No <input type="checkbox"/>			
Previously certified by				
According to which standard(s)?				
Outcome of certification, including – if appropriate – copies of any notifications of non-compliance or denial of certification:				
<b>If previously certified: Please provide a description and evidence (► copies of letters from the certification body, etc.) of all corrective measures implemented.</b>				
Do you process (and/or export) conventional products and certified products in same facility(ies)?			Yes <input type="checkbox"/>	No <input type="checkbox"/>

## 5. Products to be certified

	Product (description/designation: T-shirt, towel, etc.)	Material composition		Standard
		Material	% of total weight	
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

## 6. Location(s) of the facility(ies)

Next (inter-)national airport:	
Estimated distances and travel times between airport and main project (km and hours):	
Accessibility, distances and travel times between individual facilities / sub-units:	

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## Declarations

1)  
I, the applicant for the above mentioned facility(ies), declare to be legally entitled to request certification of products according to the scope of certification as mentioned in item 2 of this application.

2)  
Furthermore I, the applicant, confirm that my organization is not banned from the certification by the scheme-owner. The list of banned organizations is available under the following link:

[Certification Bans - GOTS - Global Organic Textile Standard \(global-standard.org\)](http://global-standard.org)

\_\_\_\_\_  
Place / Date

\_\_\_\_\_  
Signature of Owner / Responsible person

**This part is for Kiwa BCS internal use only.**

Application checked and approved:

<input type="checkbox"/>	<b>Yes</b>	<input type="checkbox"/>	<b>No</b>
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*If no, reason for non-approval / denial:*

Nuremberg,

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature