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|  **TÜV Rheinland InterCert d.o.o. – Business stream systems**  |  |
| **11000 Beograd** | **phone.: (+381) 011 36 16 156** |
| **Kosovska 10** | **e-mail: Ivana.Dimitrijevic@tuv.com;** **jovana.spasojevic@rs.tuv.com** |
| **Contact persons: Ivana Dimitrijević, Jovana Spasojević** | **Web site:** [**www.tuvrheinland.rs**](http://www.tuvrheinland.rs) |

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| **Registered office (head office)** **Sedište preduzeća** |
| **Company name****Naziv preduzeća** |  |
| **Address****Adresa** |  |
| **Postal code, city****Poštanski broj, mesto** |  |
| **VAT number****PIB broj** |  |
| **Managing director**Last name, first nameDirektor (prezime, ime) |  |
| **Phone** |  |
| **E-mail** |  |

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| **Type of Company** (please send the respective proof)**Vrsta kompanije (pošaljite odgovarajući dokaz)** |
|  | **Sole Proprietorship / Samostalno preduzeće** |
|  | **Limited liability company / Društvo sa ograničenom odgovornošću** |
|  | **Partnership / Partnerstvo**  |
|  | **Other (please specify) / Ostalo (navesti)** |

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| **Primary contact** **Primarni kontakt** |
| **Last name, first name****Prezime, ime** |  |
| **Position****Pozicija** |  | **Phone** |  |
| **E-mail** |  | **Mob.** |  |
| **Web Page****Web stranica** |  |

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| **Please mark required standards** (please add standard if not listed)**Molimo Vas obeležite željeni standard** (molimo dodajte standard, ukoliko nije na listi) |
|  | **ISO 9001** |  | **SCC\*/SCC\*\*/p** |  | **EN 9100** |  |  |
|  | **ISO 14001** |  | **SCP** |  | **ISO 28000** |  |  |
|  | **ISO 50001** |  | **ISO/IEC 27001** |  | **ISO 29990** |  |  |
|  | **ISO 45001** |  | **ISO/IEC 20000** |  | **AZAV** |  |  |

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| **Questions for combined audits only** (e.g. ISO 9001 + ISO 14001)**Pitanja koja se odnose samo na kombinovanu proveru** (npr. ISO 9001 + ISO 14001) |
| Combined audits may only be carried out simultaneously if the following aspects of the combined standards (e.g. ISO 9001 + ISO 14001) are integrated and/or their implementation is combined: System documentation/planning, corporate policy, objectives and programmes, internal audits, measures for improvement, management review. The authorized representative (responsible for the system) must also be the same for all standards. If any of these criteria are **not** fulfilled, please provide details below:Kombinovane provere mogu se istovremeno obavljati samo ako su integrisani sledeći aspekti kombinovanih standarda (npr. ISO 9001 + ISO 14001) i / ili je njihova primena kombinovana:Dokumentacija / planiranje sistema, korporativna politika, ciljevi i programi, interne provere, mere za poboljšanje, preispitivanje od strane rukovodstva. Ovlašćeni predstavnik (odgovoran za sistem) takođe mora biti isti za sve standarde.Ako bilo koji od ovih kriterijuma **nije** ispunjen, molimo navedite dole detalje: |
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| **What is the required scope (wording) of the certificate?**Please provide a brief description of the company's purpose and primary fields of activity (products and services)**Koja je zahtevana oblast sertifikacije (formulacija na sertifikatu)?**Navedite kratak opis svrhe kompanije i osnovne oblasti aktivnosti (proizvodi i usluge) |
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| (E.g. manufacture and sale of XXX products, as well as assembly and consultancy services in the field of YYY)(Npr. proizvodnja i prodaja XXX proizvoda, kao i usluge montaže i konsultacija na polju YYY) |
| **Responsibility for development/design****Odgovornost za razvoj / projektovanje** |
| 1. **Is your company responsible for the development of the products/services?**

 **Da li je vaša kompanija odgovorna za razvoj proizvoda / usluga?** |  yes / da | no / ne |

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| 1. **Who determines requirements regarding products/services to ensure that they are suitable for the subsequent production process/provision of services?**

**Ko određuje zahteve koji se odnose na proizvode / usluge kako bi se osiguralo da su oni pogodni za proizvodni proces / pružanje usluga?****The company / Preduzeće** **The customer/other stakeholders / Kupac/druge zainteresovane strane** **The customer and the company / Kupac i preduzeće** |

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| **Outsourced processes****Autsors procesi** |
| 1. **Are any processes outsourced (e.g. procurement, sales, manufacturing processes)?**

**Da li su neki procesi obezbeđeni iz autsorsa (npr. nabavka, prodaja, proizvodni procesi)?** | yes / da | no / ne |
| **If yes, which?****Ako jesu, koji?** |  |
| 1. **Do the outsourced processes have a direct effect on the provision of products/services?**

**Da li autsors procesi imaju direktan uticaj na pružanje proizvoda / usluga?** | yes / da | no / ne |

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| 1. **How/where, is the execution of outsourced processes monitored?**

**Kako / gde se nadgleda izvršenje autsors procesa?** **At the supplier / Kod isporučioca** **At our company / U preduzeću** **Both / Na oba mesta** |

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| **Transfer of certificates** (only relevant if you already have an existing and valid certificate)**Prenos sertifikata** (relevantno samo ako već imate postojeći i važeći sertifikat) |
| **Advanced level of the management system**(the last 3 audits were without deviations)Please send us the respective audit reportsNapredni nivo sistema menadžmenta(poslednje 3 provere su bile bez neusaglašenosti)Pošaljite nam odgovarajuće izveštaje sa provera | yes / da | no / ne |

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| **Shift work****Smenski rad** |
| **Does the company use shifts?****Da li se u preduzeću radi u smenama?** | yes / da | no / ne |
| **Type of shift**  early shift  late shift  night shift weekendTip smene rana smena kasna smena noćna smena vikend |
| **If yes, please indicate the number of shifts****Ako je odgovor da, navedite broj smena** | \_\_\_\_\_\_\_\_ number / broj |
| **If yes, please indicate the number shift workers:****Ako je odgovor da, navedite broj radnika u smeni:** | \_\_\_\_\_\_\_\_ number / broj |
| **Are they rolling shifts?****Da li se smene menjaju?** |  yes / da | no / ne |
| **Are the same activities carried out by all shifts?****Da li se iste Aktivnosti obavljaju u svim smenama?** | yes / da | no / ne |

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| **Which legal requirements apply?**Where appropriate, please list any legal requirements that apply to the products and/or contracts with your customers.**Koji zakonski zahtevi se primenjuju?**Prema potrebi, navedite sve zakonske zahteve koji se odnose na proizvode i / ili ugovore sa vašim kupcima |
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| **Is a security clearance required to view documents?**If applicable, please state legal obligations regarding the classification of their documents.**Da li je za pregled dokumenata potrebna bezbednosna dozvola?**Ako je primenjivo, navedite zakonske obaveze u vezi sa klasifikacijom njihovih dokumenata. |
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| **Did a consultant/consultancy provide support for the development or implementation of the management system?**If yes, please name the consultant/consultancy**Da li je konsultant pružio podršku razvoju ili primeni sistema menadžmenta?**Ako je odgovor da, molimo navedite ime konsultanta / konsultanta |
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| **Existing system certifications at the location****Postojeće sertifikacije sistema na lokaciji** | **Certification body****Sertifikaciono telo** | **Valid until****Važi do** |
|  **ISO 9001** |  |  |
|  **ISO 14001** |  |  |
|  **IATF 16949** |  |  |
|  **ISO/IEC 27001** |  |  |
|  **ISO/IEC 20000** |  |  |
|  **ISO 50001** |  |  |
|  **ISO 45001** |  |  |
|  **Ostalo** |  |  |
| Please attach copies of current certificates.Molimo priložite kopije trenutnih sertifikata. |

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| **Total number of employees at the location****Ukupan broj zaposlenih na lokaciji** |  |
| **of which:****od kojih:** |
| **Marginally employed staff** (e.g. max. 15 hours) or auxiliary staff (simple tasks, e.g. seasonal workers for harvests)**Marginalno zaposleno osoblje** (npr. najviše 15 sati) ili pomoćno osoblje (jednostavni zadaci, npr. sezonski radnici za žetvu) |  | **Other part-time staff** (max. half day)**Ostalo osoblje sa skraćenim radnim vremenom** (maks. pola dana) |  |
| **Trainees****Praktikanti** |  | **Disabled staff** (if sheltered workshop)**Osoblje sa invaliditetom** (ako je odvojena radionica) |  |
| **Drivers****Vozači** |  | **Field staff** (messengers, salespeople etc.)**Terensko osoblje** (glasnici, prodavci itd.) |  |

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| **Desired audit date (CW)****Željeni datum provere (KN)** |  |
| **Date and signature confirming the accuracy of the information provided****Datum i potpis koji potvrđuju tačnost datih informacija** |  |
| **Recorded by TÜV Rheinland employee****Zapisano od strane TÜV Rheinland zaposlenika** |  |
| **Discussed with** (name of customer)**Razgovarano sa** (ime kupca) |  |
| **How did you hear about TÜV Rheinland?****Kako ste čuli za TUV Rheinland?** |  |