



ENVIRONMENTAL MANAGEMENT SYSTEM QUESTIONNAIRE (14001)

Please complete this questionnaire and attach any relevant supporting information describing the Company's scope of operation, e.g. Company brochures or publicity material.

- 1) Company Name
- Address
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- Telephone Fax E-Mail
- Contact
- Management Representative

- 2) What is the total number of employees:
Directors / Partners
- Managers
- Staff
- Total Workforce
- Trainees
- Contractors
- Relationship with larger corporation if any
- Note: Please advise any shift arrangements
- (Please attach company organization chart)

- 3) The desired scope of the certification and standard seeking certification:
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4) Use of consultancy to set up the management system? YES / NO
If yes, please specify name of the consultant:

5) Are there any activities covered by your scope carried out away from the registration address(es), e.g. depots, warehouses, temporary sites or offices, which is covered in the system? YES / NO

If there are, please give a list of permanent/ temporary sites describe activities, address(es) as appropriate and staff numbers.

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6) Please give a list of key processes on site including plant & equipment typically used on site, and any outsourced processes/activities that affect the management system.

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7) Please give a list of significant EMS aspect/impact typically present on site.

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8) Please give a list of applicable EMS legislation and other requirements to comply with.

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9) List any licences and authorizations applicable to the facility, i.e. Process Authorisation, Discharge, Consents, etc.

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10) Have you completed a management review? YES / NO

11) Have you completed an Internal Audit? YES / NO

12) Is your EMS integrated with:

(a) QMS YES / NO

(b) OHSMS YES / NO

Other

13) Effective implementation date of the EMS

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14) Please list any attachments, i.e. Policy, Company Brochures, and Manual etc.

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Position in Company Date

Signed Print Name