

International Federation of Inspection Agencies

Application form for Associated Membership



Applicants for IFIA Associated Membership:

Please complete the attached questionnaire and return it by email to:

secretariat@ifia-federation.org



Application for Associated Membership

All information given in responding to this questionnaire will be treated in confidence

The Articles of Association of IFIA and Council Regulations set out the criteria to be met in order to be considered for membership of IFIA. In order to assist us to process your application, would you please complete the questionnaire below and return it to IFIA.

IFIA Council Regulation 5, which sets out the Associated Membership criteria, and IFIA Council Regulation 1, which is referenced, are both available to be downloaded from the IFIA website.

Notes to assist the IFIA Associated Membership Application Process

If you wish to apply for associated membership, the application process is in three steps:

- 1. The first is completion of the Application Form. Please complete and sign the Application Form and attach extra sheets if necessary to contain all relevant information. Then please return the completed Application Form and relevant documents to IFIA via email (secretariat@ifia-federation.org). On receipt of the Application Form an invoice for an application fee of 1000€ will be issued. This Fee is to cover the expense of IFIA in reviewing and processing your application. This is a non-returnable application fee.
- Your application will then be reviewed by the Director General and Secretary of IFIA to ensure that the intent of the associated membership regulations is satisfied. Normally this will include a face to face meeting between the Director General and a representative of the applicant's senior management team (Council Regulation 5 paragraph 8.2)
- 3. When the Director General is satisfied that you fully meet the IFIA associated membership criteria he will submit your application to the Council of IFIA for approval. (Council Regulation 5 paragraph 8.3)

Note 1. IFIA has a group membership structure, which means that if your testing/inspection/ certification business operates as a group of subsidiary or associated companies or similar entities the group as a whole has to become the Member of IFIA, subject to all group members meeting the membership criteria. In this case one entity (usually the group holding company or principal operating company) is designated as the IFIA Member or Associated Member and represents the other group entities.

For further assistance, please contact the Director General.



International Federation of Inspection Agencies <u>Questionnaire for completion by applicants for Associated Membership</u>

PART 1 DETAILS OF THE APPLICANT

1.	Applicant's details [If the application covers a group of organisations, these details should relate to the group head office or other entity which will be nominated as the group's representative in the event of admission to membership of IFIA]					
	1.1	Full name of applicant entity				
	1.2	Name of national government, Government agency or government controlled entity to which the applicant is related				
	1.3	Registered address of applicant				
	1.4	Operational address if different from 1.3				
	1.5	Telephone number				
	1.6	Fax number				
	1.7	E-mail address				



1.8

Website address

2.	Category of Associated Membership (based on full membership categories in Council Regulation 1 paragraph 1.2)
the p (plea turno	t is the annual turnover of the applicant's business in provision of testing/inspection/certification services? se specify currency) Please note that the annual over for organisations applying for Associated abership should be in excess of €100 million.
Whic	h category of IFIA associated membership are you applying for:
A1	Greater than 800 million Euros?
A2	Between 500 million and 800 million Euros?
B1	Between 300 million and 500 million Euros?
B2	Between 100 million and 300 million Euros?
3.	Legal Status of the Applicant (Council Regulation 5 paragraph 2)
Wha	t is the legal status of the applicant? [Complete either A, B, C, D or E]
A.	Limited private company
	A1. Names of controlling shareholders
B.	Unincorporated Firm or Partnership
	B1. Full names of all the partners or proprietors



C.	Trust, Foundation or other legal entity					
	C1. Please describe the structure					
D.	Part of Government					
	D1. Please describe the structure					
E.	Other					
	E1. Please describe (eg company listed on stock exchange)					
	To be answered by applicants for group associated membership only. Please see Note 1 on page 2 above for the explanation of group membership					
	Please provide a list of the names and/or countries of operation of all companies or other legal entities included in your application for group membership:					



	Is every entity included in this list either a subsidiary or associated entity of the group holding entity (or a related firm in the case of partnerships), that is, either at least 50% owned or under effective management control or the subject of substantial long term investment giving significant influence to the investing entity?							
	Υe	es			No			
PART			WITH IFIA'		ATED MEM	BERSHI	P REQUIRE	MENTS
1.	Fields of A		of the Applic	ant and its	Organisatio	n (Counci	Regulation 1	
1.1	Please give a brief explanation of the business of your organisation and the sectors of testing/inspection/certification business in which it is active. Please attach a copy of your Annual Report and any group directory if available:							
-								
-								
1.2	In respect Requireme		es falling with	in the Profe	ession (as def	ined in Co	ouncil Regulat	ion 1
	testi see	ng/inspe		tion busines	s in which ye	_	the sect iisation is acti ees' for deta	
	Testing/ins	spection (of Agricultura	Products				
	Testing/ins	spection (of Mineral Pro	ducts				
	Testing/ins	spection (of Petroleum/	Petrochemic	cal Products			
	Inspection	of impor	ts for Govern	ments				
	Inspection	of Indust	rial Services					



	Testing/inspection/certification of Consumer/Industrial Products							
	Testing/inspection/certification of Food Products							
	Social Compliance Auditing]		
	Other t	esting/inspe	ection/certificat	tion service	es. Please s	specify:		
	1.2.2	employed on a perma	e total number by the applica anent, contrac in these activi	nt either t or part	nel			
	1.2.3		of these pers anent employe		full			
1.3	Please list any companies, firms or other bodies under the applicant's effective legal management control which are engaged in activities falling outside the Profession (a defined in Council Regulation 1 Requirement 2.1) and briefly describe the fields business in which they are active:				fession (as			
2.			ement in the					
3.	Manag	jement (Cou	uncil Regulatio	on 1 Requi	rement 2.3))		
			or Officer of tagement of an				convicted of a	any offence
		Yes			No			



4.	Financial Resources (Council Regulation 5 Requirement 4.1.2)				
Please provide information on how the applicant of testing/inspection/certification activities are financed, and what financial resolve available to meet liabilities in the event of the winding up of the business					
5.	Professional Negligence (Council Regulation 5 Requirement 4.1.3)				
	Please describe how the applicant organisation makes provision to meet damages etc for liabilities incurred from professional negligence and what risk assessment analysis it has undertaken for this purpose				
ô.	Subsidiary Company (Council Regulation 1 Requirement 2.6)				
	Is the Applicant for IFIA membership a subsidiary or division of a larger entity?				
	Yes No				
	If the answer to this question is Yes, are all of the entity's worldwide activities in the business sector(s) identified in Part 2 Q1 above undertaken by, or under the control of, this subsidiary or division?				
	Yes No				



7.	Impartiality, Independence and freedom from conflicts of interest Council Regulation 5 Requirement 4.1.4)					
	Please describe how the applicant organisation manages to maintain its impartiality, independence and freedom from conflicts of interest, and in particular					
	in respect of its relationship with its governmental owner					
	Is the applicant and/or its personnel the designer, manufacturer, supplier, installer, purchaser, owner, user or maintainer or authorised representative of any of these with respect to any goods, services or materials that are subject to the applicant's testing/ inspection/certification activities?					
	Yes No					
8.	Quality Management System Certification (Council Regulation 5 Requirement 4.1.5)					
	Please describe how the applicant organisation manages quality within its organisation and provide information on any relevant accreditations (i.e. to ISO/IEC 17020, 17021, 17024, 17025, 17065) or ISO 9001 accredited certifications					
9.	Health and Safety Management Programme (Council Regulation 1 Requirement 2.11)					
	Does the applicant have a formal Health and Safety Management Programme currently in operation?					
	Yes No					
	If the answer to the above is 'No' please answer the following question.					



	demonstrate in throughout you	nplementation of a H	lealth and Sa quired by Red	afety Management Programme quirement 2.11 of IFIA Counciled membership?
	Yes		No	
10.	-	rogramme (Council Recant organisation have	· ·	equirement 4.1.1) apliance Programme currently in
	Yes		No	
	demonstrate in Organisation, a	mplementation of the	e IFIA Comp ment 2.12 of II	do you expect to be able to diance Code throughout your FIA Council Regulation 1, within
	Yes		No	
	implementation your application elements of su necessary to as your company approved vers organization is the time scale	of an approved Com n for associated mem ich a programme in p ssure the IFIA Council, be accepted into full ion of the Code an in progress. Paragra	pliance Prograbership. You blace at the tiles as and when IFIA members d that its imph 1.4 of Coulal auditor's Research	d timescale of your company's amme when you are preparing will probably not have all the me of application but it will be a recommendation is made that ship, that you have adopted an applementation throughout your uncil Regulation No. 1 specifies eport will be required under the
11.	Personnel Qua	alifications (Council R	egulation 1 Re	equirement 2.13)
11.1	•	•		lved with the with Council Regulation 1
	Yes		No	
	C.			



11.2 Do you have any form of Training Programme currently in operations ongoing compliance with the above requirements?				irrently in operation to ensure			
	Yes		No				
12.	Sector Specifi	ic Requirements (Co	uncil Regulation	1 Requirement 2.14)			
	If the applicant organisation is active in a sector which has additional membership criteria or codes of practice, would you be willing to implement fully these sector specific requirements upon becoming a full member of IFIA?						
	Yes		No				
		Committees section of the pership criteria and code		r the current status of all relevant			
13.	National Prohibitions						
	Please provide information on any governmental or judicial act that, either currently or within the last three years, has prohibited any part of your organisation from working in any country.						
	Signed:		Date:				
	Print Name:						
	Position (Job Title):						

