



INSTRUCTIONS:

Please completely fill in all applicable information (section 1-10) and send applications to IDFL at audits@idfl.com. If known, please also copy regional certification manager / auditor.

Section 1 Applicant Information
Section 2 Payer Information
Section 3 Standard
Section 4 Products
Section 5 Facilities and Processes

Section 6 Slaughterhouse (Meat Processor) Facilities***
Section 7 Individual Farm Certification***
Section 8 Farm Group Certification***
Section 9 Farm Area Certification***
Section 10 Post-Production Brand Certification (*Brand / Retailers Only*)

*** *Only applicable to those with slaughterhouse or farms in scope of certification.*

SECTION 1. APPLICANT INFORMATION

Company Name:	
Company Name (English):	
Address:	
City:	
Country:	
Contact Person:	
Title:	
Phone No.:	
Email:	

SECTION 2. PAYER INFORMATION

Payment Currency	<input type="checkbox"/> USD <input type="checkbox"/> RMB <input type="checkbox"/> EURO <input type="checkbox"/> TWD
<i>NOTE: If the payer company is different than the applicant company, please provide the below information:</i>	
Company Name:	
Company Name (English):	
Address:	
City:	
Country:	
Contact Person:	
Title:	
Phone No.:	
Email:	

SECTION 3. STANDARD

Standard	<input type="checkbox"/> Responsible Down Standard (RDS)
Certification Status	<input type="checkbox"/> Initial Certification
	<input type="checkbox"/> Renewal Certification



SECTION 4. PRODUCTS

INSTRUCTIONS:

Please provide the following information:

- **Product Category**
 - Examples: Men’s apparel, Women’s apparel, Babies’ apparel, Children’s apparel, Unisex apparel, Home textiles, Bedding, Footwear, Outdoor, Filling/stuffing, Processed materials, Unprocessed materials.
- **Product Detail**
 - Examples: Overcoats, jackets, vests, blankets, bedspreads, quilts, upholstery, pillows, cushions, gloves, mittens, mattresses, sleeping bags, white duck down and feather, grey duck down and feather, white goose down and feather, grey goose down and feather.
 - For products with blended goose and duck, use the following details: white goose/duck down and feather, grey goose/duck down and feather.
- **Composition**
 - List the composition for each product, without percentages. Use the plus (+) sign to add more than one composition.
 - For certified materials, use the attribute “Responsible”. For non-certified materials, no attribute is needed.

Example 1: Responsible Down + Responsible Feather
Example 2: Responsible Down + Down + Feather
- **Certified RDS Content Percentage Scope**
 - RDS products may contain a minimum of 5% certified content. For products with 5-99% certified RDS content, choose RDS (5-99%). For products with 100% certified RDS content, choose RDS (100%).
 - The RDS logo / label can only be used on products with 100% certified RDS content, pending IDFL approval.

Product Category	Product Detail	Composition	Certified RDS Content Percentage Scope <i>(Choose all that apply)</i>
			<input type="checkbox"/> RDS (100%) <input type="checkbox"/> RDS (5-99%)
			<input type="checkbox"/> RDS (100%) <input type="checkbox"/> RDS (5-99%)
			<input type="checkbox"/> RDS (100%) <input type="checkbox"/> RDS (5-99%)
			<input type="checkbox"/> RDS (100%) <input type="checkbox"/> RDS (5-99%)
			<input type="checkbox"/> RDS (100%) <input type="checkbox"/> RDS (5-99%)
			<input type="checkbox"/> RDS (100%) <input type="checkbox"/> RDS (5-99%)
			<input type="checkbox"/> RDS (100%) <input type="checkbox"/> RDS (5-99%)
			<input type="checkbox"/> RDS (100%) <input type="checkbox"/> RDS (5-99%)
			<input type="checkbox"/> RDS (100%) <input type="checkbox"/> RDS (5-99%)
			<input type="checkbox"/> RDS (100%) <input type="checkbox"/> RDS (5-99%)
			<input type="checkbox"/> RDS (100%) <input type="checkbox"/> RDS (5-99%)
			<input type="checkbox"/> RDS (100%) <input type="checkbox"/> RDS (5-99%)

If additional space is needed, please use other document sheets (preferably excel or word) to submit the above information.



SECTION 5. FACILITIES AND PROCESSES

INSTRUCTIONS:

Please provide the following information for all facilities that trade / handle / process certified products in this scope of certification. This includes the applicant information and may include other facilities' information such as offices, sub-contractors, distribution centers, and/or suppliers that will be included in the same scope of certification.

NOTE: For slaughterhouse or farm certifications, see Section 6-8

- **List of Activities / Processes:** Examples - Collecting, Down Processing (Sorting, Washing, Mixing, Blending), Manufacturing, Printing, Trading (buy and sell, no processing), Storing, Importing, Exporting, Administration, Subcontractor, etc.

Are there any subcontractor facilities that trade / handle / process certified products in this scope of certification? If so, please indicate by noting in the List of Activities / Processes.

YES NO

Facility Name	Facility Address	Responsible Contact	List of Activities / Processes	Certified Previously (Y/N)

If additional space is needed, please use other document sheets (preferably excel or word) to submit the above information.



SECTION 6. SLAUGHTERHOUSE (MEAT PROCESSOR) FACILITIES

INSTRUCTIONS: ****Only applicable to those with slaughterhouse in scope of certification.*

Please provide the following information for all individual slaughterhouse facilities that will handle certified waterfowl and products in this scope of certification.

- **Waterfowl:** Please list all waterfowl types that the slaughterhouse will be handling. Examples – White Duck, Grey Duck, White Goose, Grey Goose.
- **Number of Waterfowl Slaughtered per year:** Please provide an estimated number of waterfowl slaughtered annually for each waterfowl type.
- **List of Activities / Processes:** Examples – Slaughtering, Transport, Down Processing, etc.

Facility Name	Facility Address	Responsible Contact	Waterfowl Type	Number of Waterfowl Slaughtered per year	List of Activities / Processes	Certified Previously (Y/N)

If additional space is needed, please use other document sheets (preferably excel or word) to submit the above information.



SECTION 7. INDIVIDUAL FARM CERTIFICATION

INSTRUCTIONS: ***Only applicable to those with individual farms in scope of certification.

Please provide the following information for all individual farms that will handle certified waterfowl in this scope of certification.

- **Waterfowl Type / Species:** Please list all waterfowl types that the farm will be raising. Examples – White Duck, Grey Duck, White Goose, Grey Goose. If possible, please provide the species as well.
- **Number of waterfowl raised per year:** Please provide an estimated number of waterfowl raised annually for each waterfowl type.
- **List of Activities / Processes:** Examples – Farm Production (Growing), Farm Production (Breeding), Hatching, Transport, Slaughtering, etc.

Farm Name	Farm Address	Responsible Contact	Waterfowl Type/Species	Number of waterfowl raised per year.	List of Activities / Processes	Parent Farm (Y/N)	Certified Previously (Y/N)

If additional space is needed, please use other document sheets (preferably excel or word) to submit the above information.



SECTION 8. FARM GROUP CERTIFICATION

INSTRUCTIONS: ****Only applicable to those with farm groups in scope of certification.*

Please provide the following information for all individual farm groups that will handle certified waterfowl in this scope of certification.

- **Farm Group Name:** Please provide a name for this farm group. Example – “ABC Company Farm Group (White Duck)”
- **Waterfowl Type / Species:** Please list all waterfowl types that the farm group will be raising. Examples – White Duck, Grey Duck, White Goose, Grey Goose. If possible, please provide the species as well.
- **Number of waterfowl raised per year:** Please provide an estimated number of waterfowl raised annually for each waterfowl type.
- **Number of Waterfowl Slaughtered per year:** Please provide an estimated number of waterfowl slaughtered annually for each waterfowl type.
- **List of Activities / Processes:** Examples – Farm Production (Growing), Farm Production (Breeding), Hatching, Transport, Slaughtering, etc.

Farm Group Name	Responsible Contact	Number of Farm Group Members	Number of Parent Farms in group, if any	Waterfowl Type/ Species	Number of waterfowl raised per year.	Number of waterfowl slaughtered per year, if any.	List of Activities / Processes	Certified Previously (Y/N)

If additional space is needed, please use other document sheets (preferably excel or word) to submit the above information.



SECTION 9. FARM AREA CERTIFICATION

INSTRUCTIONS: ****Only applicable to those with farm areas in scope of certification.*

Please provide the following information for all individual farm groups that will handle certified waterfowl in this scope of certification.

- **Farm Area Name:** Please provide a name for this farm area. Example – “ABC Company Farm Area”
- **Waterfowl Type / Species:** Please list all waterfowl types that are collected within the area. Examples – White Duck, Grey Duck, White Goose, Grey Goose. If possible, please provide the species as well.
- **List of Activities / Processes:** Examples – Collecting, Down Processing, etc.

Farm Area Name	Responsible Contact	Number of Collectors	Name of Areas or Region	Waterfowl Type/Species	List of Activities / Processes	Estimate amount of material collected per year	Certified Previously (Y/N)

If additional space is needed, please use other document sheets (preferably excel or word) to submit the above information.



SECTION 10. POST-PRODUCTION BRAND CERTIFICATION		<i>(BRANDS / RETAILERS ONLY)</i>	
INSTRUCTIONS: For brands and retailers, please complete the following questions regarding your distribution of certified products. If you would like to request a post-production exemption, please indicate below. For details on the Post-Production Brand Certification Exemptions, please reference the Content Claim Standard (CCS) – Section D.			
Where is the brand headquarters located? Please provide the address.			
How does the brand sell certified products? (Choose all that apply)	<input type="checkbox"/> Direct to Consumer <input type="checkbox"/> Direct to Retailer <input type="checkbox"/> Licensees	<input type="checkbox"/> Distribution Centers (DC) <input type="checkbox"/> Wholesalers	
If you chose Distribution Centers (DC), please answer the following questions:	How many distribution centers (DC's)?		
	Are the DC's brand-owned, or independently contracted?		
	Do any of the DC's purchase certified products from the brand?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
If you chose Wholesalers or Licensees, please answer the following questions:	How many Wholesalers?		
	How many Licensees?		
Do any post-brand facilities re-package certified products?	<input type="checkbox"/> YES <input type="checkbox"/> NO		
How does the brand ship certified products? (Choose all that apply)	<input type="checkbox"/> Manufacturer to Customer Directly	<input type="checkbox"/> Distribution Center / Warehouse to Customer	
	<input type="checkbox"/> Other (please describe):		
Does the brand plan to sell non-certified products of the same type?	<input type="checkbox"/> YES <input type="checkbox"/> NO		
Does the brand have regional offices that trade / handle certified products?	<input type="checkbox"/> YES <input type="checkbox"/> NO		
	If so, how many and where are they located?		
	Are regional offices certified?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Does the brand plan to apply for any Post-Production Brand Certification Exemptions? (Choose ONE only)	<input type="checkbox"/> 100% Claimed Material Exemption <input type="checkbox"/> Batch Code Label Exemption <input type="checkbox"/> Brand Network Certification (BNC) Exemption		
<i>Note: If BNC is chosen, please provide a list of all post-production sites, addresses, and related activities.</i>			



APPLICATION
Responsible Down Standard (RDS)

Undersigned confirms that all information in the application form is completely truthful. Knowingly making a false statement on this application may lead to the termination of the certification.	
Name of Company:	Company's Registered Seal/Stamp:
Authorized Signature:	
Name and Title of the Signatory:	
Date:	
If another company is helping with the application, please provide the following information:	
Application Representative Company:	
Application Representative Contact Name:	
Application Representative Contact Email:	