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| **INSTRUCTIONS:**  Please completely fill in all applicable information (section 1-12) and send applications to IDFL. | |
| **Required Sections** | **Standard Specific Sections for Applicable Scopes** |
| * Section 1 Applicant Information * Section 2 Payment Information * Section 3 Standards * Section 4 Products * Section 5 Facilities and Processes * Section 6 Certification Information * Section 7 Authorization / Signature | * Section 8 (GRS/RCS) Material Recycling * Section 9 (RDS) Slaughterhouse (Meat Processor) * Section 10 (RDS) Farm Group Certification * Section 11 (RDS) Individual Farm Certification * Section 12 (RDS) Farm Area Certification |

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| **SECTION 1. APPLICANT INFORMATION** | |
| Company Name: | Click here to enter text. |
| Company Name (English): | Click here to enter text. |
| Address: | Click here to enter text. |
| City: | Click here to enter text. |
| Country: | Click here to enter text. |
| Contact Person: | Click here to enter text. |
| Title: | Click here to enter text. |
| Phone No.: | Click here to enter text. |
| Email: | Click here to enter text. |

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| **SECTION 2. PAYMENT INFORMATION** | | | | | | | | | | | | |
| Payment Currency | USD | RMB | | EURO | TWD | | TRY | CHF | | INR | | BDT |
| JPY | PKR | | KRW | IDR | | VND | OTHER | | | Click here to enter text. | |
| Tax ID # | Click here to enter text. | | | | | | | | | | | |
| **Rush Service Fees**  Rush Services are only applicable to certain phases of the audit and can only be applied if prior phases have been completed. Rush Services are dependent on office capacity and may not always be available. | | | | | | | | | | | | |
| RUSH Site Visit / Evaluation (within 7 business days) |  | Note: IDFL will only schedule the on-site visit / evaluation after payment has been received and all the pre-audit documentation has been submitted and approved. RUSH fees may incur higher travel expenses due to short notice booking. | | | | | | | | | | |
| RUSH Certification Decision (within 3 business days) |  | Note: IDFL will only complete the certification decision after evaluation and approval of corrective actions. | | | | | | | | | | |
| **PAYER COMPANY INFORMATION** | | SAME AS APPLICANT | | | | | | | | | | |
| Company Name: | Click here to enter text. | | | | | | | | | | | |
| Company Name (English): | Click here to enter text. | | | | | | | | | | | |
| Address: | Click here to enter text. | | | | | | | | | | | |
| City: | Click here to enter text. | | | | | | | | | | | |
| Country: | Click here to enter text. | | | | | | | | | | | |
| Contact Person: | Click here to enter text. | | | | | | | | | | | |
| Title: | Click here to enter text. | | | | | | | | | | | |
| Phone No.: | Click here to enter text. | | | | | | | | | | | |
| Email: | Click here to enter text. | | | | | | | | | | | |
| **SECTION 3. STANDARDS** | | | | | | | | | | | | |
| *IMPORTANT TRANSACTION CERTIFICATE POLICY FOR SCOPE CERTIFICATE TRANSFERS: IDFL MAY NOT issue a transaction certificate for shipments made before the validity date of an IDFL scope certificate.* | | | | | | | | | | | | |
| **STANDARD** | | | **CERTIFICATION STATUS** | | | | | | | | | |
| Organic Content Standard (OCS)  *OCS products must contain a minimum of 5% certified content. OCS 100% must contain a minimum of 95% certified organically grown content.*  Note: IDFL may **not** issue an OCS scope certificate to an organization which holds a **GOTS** scope certificate with another certification body, unless the GOTS scope certificate is in the process of being transferred to IDFL. | | | Initial Certification  Renewal Certification | | | Previously/Currently OCS certified with another Certification Body (CB)\* | | | | | | |
| Previously/Currently GOTS certified with another Certification Body (CB)\* | | | | | | |
| Previous Project / License No.: | | | Click here to enter text. | | | |
| Previous Certification Body: | | | Click here to enter text. | | | |
| Certification Expiration Date: | | | Click here to enter text. | | | |
| Global Organic Textile Standard (GOTS)  *GOTS products must contain a minimum of 70% organic material. GOTS has restrictions on additional fiber materials that can be mixed with organic fiber, such as Conventional Cotton or Virgin Polyester. For more information see GOTS Standard.*  Note: IDFL may **not** issue a GOTS scope certificate to an organization which holds an **OCS** scope certificate with another certification body, unless the OCS scope certificate is in the process of being transferred to IDFL. | | | Initial Certification  Renewal Certification | | | Previously/ Currently GOTS certified with another Certification Body (CB)\* | | | | | | |
| Previously/ Currently OCS certified with another Certification Body (CB)\* | | | | | | |
| Previous Project / License No.: | | | Click here to enter text. | | | |
| Previous Certification Body: | | | Click here to enter text. | | | |
| Certification Expiration Date: | | | Click here to enter text. | | | |
| Naturtextil IVN BEST  *IVN BEST products must contain 100% organic fibre of the product – excluding accessories. Must be of certified organic origin.* | | | Initial Certification  Renewal Certification | | | Previously/ Currently IVN certified with another Certification Body (CB)\* | | | | | | |
| Previously/ Currently GOTS certified with another Certification Body (CB)\* | | | | | | |
| Previous Project / License No.: | | | Click here to enter text. | | | |
| Previous Certification Body: | | | Click here to enter text. | | | |
| Certification Expiration Date: | | | Click here to enter text. | | | |
| Global Recycled Standard (GRS)  *GRS products must contain a minimum of 20% certified recycled content. GRS Logo can only be used on products with minimum 50% certified recycled content.*  Note: IDFL may **not** issue a GRS scope certificate to an organization which holds an **RCS** scope certificate with another certification body, unless the RCS scope certificate is in the process of being transferred to IDFL. | | | Initial Certification  Renewal Certification | | | Previously/ Currently GRS certified with another Certification Body (CB)\* | | | | | | |
| Previously/ Currently RCS certified with another Certification Body (CB)\* | | | | | | |
| Previous Project / License No.: | | | Click here to enter text. | | | |
| Previous Certification Body: | | | Click here to enter text. | | | |
| Certification Expiration Date: | | | Click here to enter text. | | | |
| Recycled Claim Standard (RCS)  *RCS products must contain a minimum of 5% certified content. RCS 100% must contain a minimum of 95% certified recycled content.*  Note: IDFL may **not** issue an RCS scope certificate to an organization which holds an **GRS** scope certificate with another certification body, unless the GRS scope certificate is in the process of being transferred to IDFL. | | | Initial Certification  Renewal Certification | | | Previously/ Currently RCS certified with another Certification Body (CB)\* | | | | | | |
| Previously/ Currently GRS certified with another Certification Body (CB)\* | | | | | | |
| Previous Project / License No.: | | | Click here to enter text. | | | |
| Previous Certification Body: | | | Click here to enter text. | | | |
| Certification Expiration Date: | | | Click here to enter text. | | | |
| Responsible Animal Fiber (RAF)  Responsible Wool Standard (RWS)  Responsible Mohair Standard (RMS)  Responsible Alpaca Standard (RAS)  *RAF products must contain a minimum of 5% certified content. The logo / label can only be used on products with 100% certified content. Recycled animal fibers are ineligible for RAF certification.* | | | Initial Certification  Renewal Certification | | | Previously/ Currently RAF certified with another Certification Body (CB)\* | | | | | | |
| Previous Project / License No.: | | | Click here to enter text. | | | |
| Previous Certification Body: | | | Click here to enter text. | | | |
| Certification Expiration Date | | | Click here to enter text. | | | |
| Responsible Down Standard (RDS)  *RDS products must contain a minimum of 5% certified content. The RDS logo / label can only be used on products with 100% certified RDS content.*  *Recycled down/feather is ineligible for RDS certification.* | | | Initial Certification  Renewal Certification | | | Previously/ Currently RDS certified with another Certification Body (CB)\* | | | | | | |
| Previous Project / License No.: | | | Click here to enter text. | | | |
| Previous Certification Body: | | | Click here to enter text. | | | |
| Certification Expiration Date | | | Click here to enter text. | | | |
| *\*When submitting the application, please attach the most recent Scope Certificate.* | | | | | | | | | | | | |
| **SECTION 4. PRODUCTS** | | | | | | | | | | | | |
| **INSTRUCTIONS:**  Using the below information, please provide information about the products you would like to certify. If your product category is not listed, please feel free to write in according to the specific product information.  For more information, please see TE/GOTS Materials Processes and Products Classification.  *NOTE:* *This information is for pre-assessment only; a product specification must be submitted later during the application process.*  *NOTE: Standards vary on allowed minimum percentages and blended materials. Please reference the Standard for details.* | | | | | | | | | | | | |
| **Product Categories**  *Choose all that apply* | | **Product Details**  *List all that apply* | | | | | | | | | | |
| Home Textiles / Bedding | | Click here to enter text. | | | | | | | | | | |
| Apparel | | Click here to enter text. | | | | | | | | | | |
| Accessories | | Click here to enter text. | | | | | | | | | | |
| Footwear | | Click here to enter text. | | | | | | | | | | |
| Fabrics | | Click here to enter text. | | | | | | | | | | |
| Yarns | | Click here to enter text. | | | | | | | | | | |
| Fibers / Filaments | | Click here to enter text. | | | | | | | | | | |
| Filling / Stuffing | | Click here to enter text. | | | | | | | | | | |
| Packaging | | Click here to enter text. | | | | | | | | | | |
| Recycled Materials | | Click here to enter text. | | | | | | | | | | |
| Unprocessed Raw Down / Feather | | Click here to enter text. | | | | | | | | | | |
| Birds / Waterfowl | | Click here to enter text. | | | | | | | | | | |
| Other Click here to enter text. | | Click here to enter text. | | | | | | | | | | |
| Other Click here to enter text. | | Click here to enter text. | | | | | | | | | | |
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| *If additional space is needed, please use other document sheets (preferably excel or word) to submit the above information* | | | | | | | | | | | | |
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| **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, distribution centers, and/or suppliers that will be included in the same scope of certification.  *NOTE: For RDS slaughterhouse or RDS farm certifications, see Section 9-12.*   * **Number of Employees:** Please include all permanent, contracted, and sub-contracted employees. * **List of Activities / Processes:** Examples – Material Recycling, Ginning, Spinning, Dyeing, Processing, Weaving, Knitting, Laundering, Finishing, Manufacturing, Printing, Trading (buy and sell, no processing), Storing, Importing, Exporting, Administration, Subcontractor, Concentration, Collection, etc. | | | | |
| **REQUIRED:** 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/Unit Name** | **Facility/Unit Address**  **(Street, City, Region, zip code, Country)** | **Number of Employees** | **List of Activities / Processes** | **Certified Previously (Y/N)** |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to answer Y/N. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to answer Y/N. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to answer Y/N. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to answer Y/N. |
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| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to answer Y/N. |
| *If additional space is needed, please use other document sheets (preferably excel or word) to submit the above information.* | | | | |
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| **SECTION 6. CERTIFICATION INFORMATION** | |
| **Certifications - Is the organization or facilities certified to any of the following standards?** | |
| OEKO-TEX STEP Environmental Performance Requirements | YES  NO |
| SCS Recycled Content Verification | YES  NO |
| BSCI Social Audit | YES  NO |
| SA 8000 Audit | YES  NO |
| Higg Facilities Environmental Module (FEM) | YES  NO |
| Higg Facilities Social Labor Module (FSLM) | YES  NO |
| Higg Brand Retail Module (BRM) | YES  NO |
| Worldwide Responsible Accreditation Program (WRAP) | YES  NO |
| Any standard approved against the GSCP social reference code audit? | YES  NO |
| Any standard approved against the GSCP environmental reference requirement audit? | YES  NO |
| **Chemical Compliance** | |
| Do any facilities use chemical inputs in the production of GOTS products? | YES  NO |
| If yes, how many chemicals are used in the production of GOTS products? | Click to enter text. |
| Do any facilities use chemical inputs in the production of GRS products? | YES  NO |
| If yes, how many chemicals are used in the production of GRS products? | Click to enter text. |
| **Certification Compliance** | |
| Has the organization or any of its facilities been denied certification by another Certification Body? If yes, please provide detailed information below. | YES  NO |
| Click to enter text. | |
| Has the organization or any of its facilities been banned from product certification? If yes, please explain below. | |
| Click to enter text. | |

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| **SECTION 7. AUTHORIZATION / SIGNATURE** | | | |
| **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:** |
| Click here to enter text. | | |  |
| **Authorized Signature:** | | | |
|  | | | |
| **Name and Title of the Signatory:** | Click here to enter text. | | |
| **Date:** | Click here to enter text. | | |
| \*If another company is helping with the application, please provide the following information: | | | |
| **Application Representative Company:** | | Click here to enter text. | |
| **Application Representative Contact Name:** | | Click here to enter text. | |
| **Application Representative Contact Email:** | | Click here to enter text. | |

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| **SECTION 8. (GRS/RCS) MATERIAL RECYCLING (RECYCLERS ONLY)** | |
| Does your organization or any of your facilities plan to perform recycling processes? | NO MATERIAL RECYCLING   YES, POST-CONSUMER MATERIALS  YES, PRE-CONSUMER MATERIALS  YES, BOTH POST & PRE-CONSUMER MATERIALS\* |
| \*If you answered YES, please provide the below information regarding your recycling process. | |
| Please describe the input waste materials (i.e. reclaimed material) being recycled. Please identify each as post-consumer or pre-consumer. | Click here to enter text. |
| Estimated Number of collectors / concentrators of waste materials (i.e. reclaimed material suppliers)? | Click to enter text. |
| General Locations of (Region / Country) of collectors / concentrators (i.e. reclaimed material suppliers)? | Click to enter text. |
| General list of activities / processes of collectors and concentrators (i.e. Collecting, Opening, Sorting, Flaking, etc.): | Click to enter text. |
| *NOTE: Reclaimed Material Suppliers are not required to be certified to the GRS/RCS as long as they are only involved*  *in the material collection or material concentration processes. However, Material Recyclers will be required to keep records per the GRS/RCS requirements. Reclaimed Material suppliers may be subject to inspection, as mentioned in the Reclaimed Material Supplier Agreement, Appendix B.* | |

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| **SECTION 9. (RDS) SLAUGHTERHOUSE (MEAT PROCESSOR)** | | | | | | |
| **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)** |
| Click to enter text. | Click to enter text. | Click to enter text. | Click to enter text. | Click to enter text. | Click to enter text. | Click here to answer Y/N. |
| Click to enter text. | Click to enter text. | Click to enter text. | Click to enter text. | Click to enter text. | Click to enter text. | Click here to answer Y/N. |
| Click to enter text. | Click to enter text. | Click to enter text. | Click to enter text. | Click to enter text. | Click to enter text. | Click here to answer Y/N. |
| *If additional space is needed, please use other document sheets (preferably excel or word) to submit the above information.* | | | | | | |

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| **SECTION 10. (RDS) 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)** |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Choose an item. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to answer Y/N. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Choose an item. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to answer Y/N. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Choose an item. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to answer Y/N. |
| *If additional space is needed, please use other document sheets (preferably excel or word) to submit the above information.* | | | | | | | | |

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| **SECTION 11. (RDS) 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:** 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 – Farm Production (Growing), Farm Production (Breeding), Hatching, Transport 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)** |
| Click to enter text. | Click to enter text. | Click to enter text. | Click to enter text. | Click to enter text. | Click to enter text. | Click here to answer Y/N. | Click here to answer Y/N. |
| Click to enter text. | Click to enter text. | Click to enter text. | Click to enter text. | Click to enter text. | Click to enter text. | Click here to answer Y/N. | Click here to answer Y/N. |
| Click to enter text. | Click to enter text. | Click to enter text. | Click to enter text. | Click to enter text. | Click to enter text. | Click here to answer Y/N. | Click here to answer Y/N. |
| *If additional space is needed, please use other document sheets (preferably excel or word) to submit the above information.* | | | | | | | |

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| **SECTION 12. (RDS) FARM AREA CERTFICATION** | | | | | | | |
| **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)** |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to answer Y/N. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to answer Y/N. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to answer Y/N. |
| *If additional space is needed, please use other document sheets (preferably excel or word) to submit the above information.* | | | | | | | |