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| **Request for Quotation** |  |

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**Notes - Please Read**

1. In order for us to prepare an accurate quotation please can you provide as much detail as possible by completing all sections of this document and any appendices as applicable to your Factory Production Control System for which you require certification.

2. If you are unclear about any questions below please contact the BM TRADA office at [productcertification@bmtrada.com](mailto:productcertification@bmtrada.com) or telephone 01494 569624

3. BM TRADA shall keep confidential all information relating to your organisation and shall not disclose any such information to any third party except that required by law or by BM TRADA’s accreditation bodies.

1. **Please indicate below which Scheme(s) you wish your company/organisation to be certified against**

|  |  |  |  |
| --- | --- | --- | --- |
| BM TRADA Q-Mark |  |  |  |
| CE Marking to Construction Products Regulation |  |  |  |
| Other (please state) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |  |

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| **Section A: Your Company / Organisation Details** |

|  |  |
| --- | --- |
| **A1**.**Company Name**  ***(Note: The Contract and Certificate will be issued in this name.)*** |  |
| **A2.Factory/Establishment Address** |  |
| **A3. Invoice Address**  **(if different from above)** |  |
| **A4. VAT Registration Number** |  |
| **A5.** **Telephone Number** |  |
| **A6. Fax Number** |  |
| **A7.** **Website** |  |
| **A8.** **Contact Person** |  |
| **A9.** **Position** |  |
| **A10.** **Email Address** |  |

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| **Section B: Your Organisation/Company Activities** |

**B1. Please provide details of the harmonised European Standard or technical specification against which you require Certification (if known).**

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**B2. Product specification/scope of certification required (Trade Names, Designs, Materials used, Dimensions, Standards, End Uses, etc.). Please provide details of the types of products you require certification for.**

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|  |

**B3. Do your organisation activities involve the design of products and/or services? Yes  No**

|  |
| --- |
| **Section C: Other Information** |

**C1. Are you transferring certification of your factory production control system to BM TRADA from another certification body?**

**Yes  No  If yes, please provide the following details.**

|  |  |  |
| --- | --- | --- |
| **Name of current Certification Body:** |  | |
| **Expiry Date of Current Certification:** |  | |
| **Please provide a copy of your current certificate(s) of approval with this completed form** | |  |

**C2. Is your organisation certified to any other standards?**

**Yes  No  If yes, please provide the following details:**

|  |  |
| --- | --- |
| **Standard:** |  |
| **Certification Body:** |  |

**C3. Where did you hear about BM TRADA?**

**C4. Do you require a visit from a member of our sales team to discuss your certification requirements?**

**Yes  No**

|  |  |  |  |
| --- | --- | --- | --- |
| **For the Use of BM TRADA Head Office Only** | | | |
| **Reviewed By** |  | **Date of Review** |  |
| **Proceed with request? (YES / NO)** |  | **Reason if no** |  |