

SECTION A - GENERAL INFORMATION

Title of Inspection body/ agency	
Address	
Website	
Email	
Phone:	
Additional Location(s)	Attach the list of locations with this application
Additional Locations(s) required the accreditations	Attach the list of locations with this application
Contact Person	
Email	
Phone	
Business license (Legal/ regulatory)	
Technical Representative/ Reviewer	
Email	
Phone	
Human Resource Representative	
Email	
Phone	
Total Employee	
Total Trainers	
Total Technical Inspectors	
Total qualification of technical representatives (Attach the list with evidences)	

Application of Inspection Body – ISO/ IEC 17020		IBAS-APP-IB-01-V1.1
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SECTION B – TECHNICAL INFORMATION

<input type="checkbox"/> Inspection of (General Category. i.e. container, goods)	<input type="checkbox"/> Inspection of Cargo
<input type="checkbox"/> Inspection of Textile	<input type="checkbox"/> Inspection of Lifts/ Elevators
<input type="checkbox"/> Inspection of Safety Equipment	<input type="checkbox"/> Inspection of Fire Equipment
What procedure your organization has ever established to deliver categorized inspection?	
What roles and responsibilities have every assigned?	
What accreditation does the organization carry?	
What established technical procedures your organization does your organization have to meet:	
Recruitment of inspectors	
Monitoring of performance	
Impartiality of inspectors	
Confidentiality of inspection	
Annual frequency of internal audit	
Annual frequency of awareness	
Annual frequency of management reviews	

SECTION C – APPLICATION REVIEW BY IBAS

Application Reviewed by:

Date:

Application Status:

Approved

Disapproved

Application of Inspection Body – ISO/ IEC 17020		IBAS-APP-IB-01-V1.1
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Conditionally Approved (One re-application)

Decision Team:

1. _____
2. _____
3. _____