



**Additional Information for ISO 14001/ BS OHSAS 18001 Quotes (Supplement to RP1 – S Document)**

1. Organization would like to Implement ISO 14001 or OHSAS 18001 or combined audit together :  
Please Indicate :
  
2. Does this facility is having Integrated Manual? If Yes Please indicate the details of standards integrated
  
3. Please list all Production process:

**ISO 14001 related Additional Information:**

4. Has the Environmental aspects related to all activities carried out by the organization been identified?
  
5. Please mention major significant aspects identified by your organization.

7. Mention applicable EHS Legislations to the organization?

8. Types of Emission in the Organization:

Air:

Water:

Land:

9. Do you generate effluents (liquid waste), If Yes

i) Quantity (per year in Tons) -  
ii) Any Treatment -

10. Do you have any Air Pollution sources? -

Boiler -  
Stack -  
Chimney / Scrubber  
Welding Station / Spray Booth / Paint Booth /  
Soldering Station

11. Do you generate any solid waste? Yes No,

If Yes, Mention the type of waste -

12. How are you disposing wastes now? -

[Type here]

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13. Do you store any hazardous or flammable chemicals and materials under Manufacture, Storage, Import and handling of hazardous chemicals rules, 2000?

**ISO 18001 related Additional Information:**

14. Has the Occupational Hazards related to all activities carried out by the organization been identified?

15. Significant Risks (in case of OHSAS 18001):

16. Please Mark [] appropriately the following exposures involved in the Premises by the employees?

- Noise Exposure [
- Paint Exposure / Volatile Organic Compounds [
- Chemical Exposure [
- Smoke Exposure through Welding or Soldering [
- Vibration Exposure [
- Standing Posture more than 4 hours [
- Sitting Posture more than 4 hours [

17. Occupational Medical Test are carried out? Indicate few Examples of Test

18. How many shifts do you have?

[Type here]

19. Numbers of employees in general shift -

20. Number of employees in each production shift? -

21. What is total number of employees working in administration areas?

22. Any sub contracted employees? If so number and areas of work-

**To be Filled by DQS India**

XI) Complexity: **High / Medium / Low**

XII) EA Code or Equivalent:

Date: