

TL 9000 REGISTERED ORGANIZATION DATA SHEET

Important: The information provided in this sheet has direct bearing on the planning, implementation of the TL 9000 Management System audit and commercial aspects of thereof

Please indicate the data which would remain valid as on the date(s) of proposed audit and inform the changes if any by **highlighting the change** , in the intervening period till the completion of the audit and thereafter.

Name and Address of the organization registered to TL 9000					
BR No.					
QuEST Forum Profile Registration No.	TL				
Registration Specialty	<input type="checkbox"/> TL 9000-H	<input type="checkbox"/> TL 9000-HS	<input type="checkbox"/> TL 9000-HSV		
	<input type="checkbox"/> TL 9000-S	<input type="checkbox"/> TL 9000-HV			
	<input type="checkbox"/> TL 9000-V	<input type="checkbox"/> TL 9000-SV			
Applicable TL 9000 Product Categories	Prod Cat :		Product Category Description :		
Number of personnel involved in activities related to scope of certification (management, supervisory and operational – permanent and temporary)	General Shift	Shift –I	Shift-II	Shift -III	Total
Key Contact Person : (Name , Title and contact numbers)	Title :				
	Tel :				
	Mobile :				
	e-mail :				
Working Hours	General	Shift-I	Shift-II	Shift -III	
Weekly Off					
Organizational Process/ Applicable Requirements and Measurements elements within the scope of registration /Site specific activity related information					
Processes covered by the scope of certification (for example, development, technical assistance center, coding, manufacturing, training or repair). Please complete the applicability matrix attached below and return.					
Products/Services :	Location :		No. of Employees :		
Outsourced Process , if any (for example board manufacturing, design, in support of the products)	Outsourced Agency		Location		

Organizational Changes since last DQS Audit and current status	
Major Organizational Changes, related to:	
a. Executive Management (CEO/MD/Director)	
b. Management Representative	
c. Change in Name of the company	
d. Mergers/Acquisitions if any	
e. Any changes in the location/address of main site, or remote locations? If so, please provide details and effective date of change?	
f. Outsourcing or significant changes that have occurred since the last audit.	
Changes if any proposed to scope of certification	
a. Would you like to add any other products/services to scope of certification? If so please provide details of products/services and man power involved.	
b. Would you like to add any new sites or remote locations to the scope of certification? If so please provide information about new sites/RL's like address, man power, products/services etc.	
Data sheet submission information	
Date data sheet was submitted to customer	
Date data sheet received by DQS Inc. Auditor. (minimum 3 weeks or within an agreed timeframe prior to scheduled audit.)	
Date when the data sheet was revised during the audit if changes were made after pre-audit submittal.	



Copy of Clause
Applicability Matrix I