

1. Name & address of applicant : Manulas Pest Control & Fumigation (Pvt) Ltd
No 38/1/14, Sangarama, Siddamula, Dittiyandala.

2. Types of products manufactured/services offered : Pest management & fumigation
Services including disinfection & sanitization.

3. Management system certification applied for : ISO 9001:2015

PLEASE TICK "X" THE APPROPRIATE CAGE.

	Yes	No
4. Is it a new application ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Has the organization given the contact details?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Has the organization identified the applicable legal requirements?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Is it a multisite organization?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. If so, are the site locations given?	<input type="checkbox"/>	<input type="checkbox"/>
9. Is the product range of the site for each site given?	<input type="checkbox"/>	<input type="checkbox"/>
10. Do the product range of the sites differ from the main site?	<input type="checkbox"/>	<input type="checkbox"/>
11. Are the departments /sections/processes listed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12. Has the scope been defined?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13. Does the organization outsource any process related to the management to be certified?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
14. Are there competent auditors available for the specified scope?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
14.1 what is the complexity of the category (Low, medium, high, limited or special)	<input type="checkbox"/>	<input type="checkbox"/>

14.2 List of auditor/ audit team as per the required team competency

(ISO 17021-3 for EMS, ISO 17021-10 for OHSAS)

D. N. S. Kumppumullage
Aruna Amaradasa
Isuru Ilengakoon
Buddhika Sajeewani

15. Are the services of a technical expert needed?

15.1 List of technical experts

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|---|-------------------------------------|--------------------------------------|
| 16. Are there technical experts available for the defined scope? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 17. Has the organization obtained the services of a Consultant? | <input type="checkbox"/> | <input type="checkbox" value="N/A"/> |
| 18. Has the CB determined the audit time | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 19. Is the information provided by the applicant sufficient for conducting The audit? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Recommendation of Reviewing officer:

Recommended


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Signature of Reviewing Officer

2022-07-22
.....
Date

Approval from certification Manager

Approved


.....
Signature

2022 107/22
.....
Date