




Completion Guidance Notes

- On receipt of this completed Questionnaire SGS will prepare and submit a No Obligation proposal detailing the audit, certification and related cost
- Please note – for accredited standards SGS is prohibited from providing consultancy. We can offer a pre-audit with regards to the state of readiness of your management system in conformance with rules clause 6.3
- If you are an existing client applying for an Extension to Scope please indicate additions only, i.e. additional sites, activities, etc. in the relevant sections

Section 1: Manufacturing Site details

Site name (Legal Entity)						
Site address						
Invoicing address (if different)						
Site VAT number						
Legal Registration Number						
Management Representative						
Contact details						
Total No of employees (permanent, part time, subcontract & temporary)						
Shift(s) & time	S1			S2		

If manufacturing site is part of a Group – please specify

Group name					
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Note: If your site has Manufacturing Site Extensions please complete Annex 1
 If your site is applying for a reduction to audit days for proportioning of automotive from non-automotive production then complete Annex 3

Certification scope for the above manufacturing site	
IATF16949 scope	
ISO9001 scope (if required)	
Product design responsible	Yes <input type="checkbox"/> No <input type="checkbox"/>
If no, who is product design responsible?	

Confirmation of your current automotive supplier status – Tier 1 <input type="checkbox"/> Tier 2 <input type="checkbox"/> Tier 3 <input type="checkbox"/>					
IATF OEM	Supplier Code	IATF OEM	Supplier Code	IATF OEM	Supplier Code
BMW		FCA Italy SpA		FCA US LLC	
Ford		GM		Mercedes	
PSA		Renault		VW	
Non-OEM customers			Tier 1, 2 or 3 customers		

Has your manufacturing site held ISO9001, ISO/TS16949 or IATF16949 in the past?					
ISO9001	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Certification Body		Certificate No.
IATF16949	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Certification Body		IATF No.
What was the date of your last audit?					
Why is the certificate no longer valid?					
Are you currently certified to IATF16949 and looking to transfer?					
ISO9001	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Certification Body		Certificate No.
IATF16949	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Certification Body		IATF No.
Please provide audit reports from your current CB of the last 3-year cycle including evidence of non-conformities issued and closed with none still open with status 100% resolved					

Section 2: Information on supporting Remote Locations

Note: If your site has supporting Remote Locations that must be audited as part of this certification audit please list in Annex 2

List below all Remote Locations supporting your site that already have IATF16949 certification and are not to be audited as part of this certification, insert more boxes if needed.

Remote Location Name	
Remote Location Address	
Number of employees	
Support function / activity	
Copy of current IATF16949 certificate	
Provide last audit report for R/L	

Section 3: Outsourced processes of the Quality Management System

(subcontracted processes may be Internal Audits to Consultant, On/Off site Warehousing, 3rd party Logistics Organisation, Agency Temporary Staff Recruitment, Induction Training for Shift Working, Full Control of Maintenance or Calibration to a 3rd party, Paining, Heat Treatment, Plating and Finishing, Product Design)

Sub-contractor Name	Sub-contractor processes / activities

Section 4: Consulting services

Have you used any Consultant in the development or implementation of your QMS? Yes <input type="checkbox"/> No <input type="checkbox"/>	
If Yes, what is the name of the Provider	
What is the name of the Consultant(s)	
What consulting was conducted on site?	
Have you received internal auditor training on site? Yes <input type="checkbox"/> No <input type="checkbox"/>	
If Yes, what is the name of the training Provider	

What is the name of the Tutor(s)	
What training was conducted on site?	

Section 5: Client certification planning

Certification planning for each certification stage / audit activity	Requested date
Pre-audit if required	
Stage 1 Readiness review	
Stage 2 audit on site	
To obtain IATF16949 certification	

Section 6: Client confirmation

The client confirms that the above information is complete and accurate. Failure of the client to disclose information about previous IATF16949 certification is considered a breach of the legally enforceable agreement and shall result in the withdrawal of the client's IATF16949 certificate, or, in the case that no certificate has been issued yet, failure to make a positive certification decision.

Applicant Name			
Position / Function			
Signature		Date	

Please complete this questionnaire and send it together with the required information / data to the following address (note: applications submitted by e-mail will reach the correct person at SGS quicker than regular posted mail)

SGS Office & address			
SGS contact person		E-mail address	

Notes to client:

1. Please contact your SGS contact above if you have any queries regarding completion of this questionnaire
2. Sections 2 & 3 are not relevant to all clients, if not applicable please leave blank
3. SGS will keep the confidential information of clients for use with IATF16949 certification activities only – the information will not be disclosed or transferred to any 3rd party

Section 7: To be completed by SGS Office only (Sales, Administration, etc.)

Review of existing quotation and supplementary information for certification requirements	
Is the information about the applicant and its management system sufficient for planning the audit and are the requirements for certification defined?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are any differences in understanding between the Client and SGS resolved?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Does SGS have the competence and ability to perform the certification activity? E.g. technical area qualification codes, auditor resources	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has the client's location, operations, audit timing, language, safety considerations, threats to impartiality, and any other points which could influence the certification activity been taken into account?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has the Client had a "withdrawn" certificate? If Yes, then this needs further investigation. Make sure time is built into the proposal for a special audit to be performed prior to the initial audit. If the certificate was withdrawn due to ineffective implementation of corrective actions from a special audit or initiated by a special status, performance complaint or a Major non-conformity, then the client shall complete another special audit before an initial audit is conducted in order to verify the effective implementation of actions that led to the withdrawal	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you checked the Remote Location certificate(s) for validity as part of Section 2? Record the IATF number(s) here:	Yes <input type="checkbox"/> No <input type="checkbox"/>
For a Transfer audit, have you reviewed the client's reports from the previous 3-year cycle? Be sure to check the auditor's name(s), if they are freelance auditors for SGS they must be excluded from the certification cycle.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is the Client applying for a Letter of Conformance? Check that the client has adequate bid list activity for a customer requiring IATF 16949 certification or compliance	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you checked how long this site has been in operation and how long they have been supplying the automotive industry?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Which category does this client fit into? <ul style="list-style-type: none"> ➤ <input type="checkbox"/> Client with no certification at all or client with ISO9001 with other CB ➤ <input type="checkbox"/> Client with ISO9001 with SGS ➤ <input type="checkbox"/> Client with IATF16949 with other CB looking to transfer to SGS ➤ <input type="checkbox"/> Client with IATF16949 with SGS but applying for an extension to scope ➤ <input type="checkbox"/> Client with IATF16949 with other CB or with SGS but with a gap in certification 	
Is Annex 2 for site extension included? Do you agree that the client meets the eligibility and have you considered whether the PWS requires additional time? Is the Annex 2 reviewed and approved by a VTLO?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is the information in Section 2 (Remote Locations) clear in respect of the interactions and have you considered the impact on the PWS man-day calculation?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Reviewed by:	Signature	Date

Note to reviewer: If required please seek advice or clarification from a TLO or VTLO before approving this application.