**APPLICATION FORM (GOTS, CCS, OCS, RCS & GRS)**

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| --- | --- | --- | --- | --- | --- |
| **1.0 Operator Details** | | | | | |
| **Operator Name:** | |  | | | |
| **Legal Address of Operator:** | |  | | | |
| **Operator Legal Representative:** | |  | | **Contact Person:** |  |
| **E-mail:** | |  | | **Web Site:** |  |
| **Phone:** | |  | | **Fax:** |  |
| **Consultant Name:** | |  | | **Operator VAT no:** |  |
| **Applied Standard(s):** | | | | | |
| **Global Organic Textile Standards (GOTS) Ver:5.0** | **Content Claim Standard (CCS) Ver:2.0** | | **Organic Content Standard (OCS) Ver:2.0** | **Recycled Claim Standard (RCS) Ver:2.0** | **Global Recycle Standard (GRS) Ver:4.0** |
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| **2.0 Processing Units Details (Scope Holder and Subcontractors)** | | | | |
| **Please state the processes which are associated with the Scope holder (Operator) and/or Subcontractor.** | | | | |
| **Name and address of the Scope Holder Unit/Operator Unit** | **Process(es)** (e.g. Trading, spinning, finishing… Please refer Appendix: Product Master Data for the Processing Categories | **No. of People working** (including Contract workers) | **By Operator** | **By Subcontractor** (outsourced to another company) |
|  | **1-** |  |  |  |
|  | **2-** |  |  |  |
|  | **3-** |  |  |  |
|  | **4-** |  |  |  |
|  | **5-** |  |  |  |
|  | **6-** |  |  |  |
|  | **7-** |  |  |  |
|  | **8-** |  |  |  |
|  | **9-** |  |  |  |
|  | **10-** |  |  |  |

Note 1: Only one unit can be a scope holder.

Note 2: Please ensure that you state all the supply chain processes (including scope holder and subcontractors)

Note 3: Please refer Appendix: Product Master Data for the Processing Categories

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| **3.0 Subcontractor Details** | | | | | | |
| Please complete this table for all the subcontractors | | | | | | |
| **Name of the Subcontracted unit(s)** | **Have you already audited against any standard.** If yes please state the date and CB name | **Process(es)** (e.g. Trading, spinning, finishing… Please refer Appendix: Product Master Data for the Processing Categories | **No. of People working** (including Contract workers) | **Address of the Subcontracted unit** | **Distance**  Between the Scope holder (operator) and Subcontractor. | **Is Subcontrcator certified?** If yes please state the standard(s) and certificate issue date |
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Note 1: please do not state Trader as a Subcontractor if it is not owned by the Scope holder company

Note 2: If sub-contractor certified against any standard, please submit the certificate along with the last assessment report

Note 3: Please refer Appendix: Product Master Data for the Processing Categories

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| **4.0 Product Details** | | | | | | | | | |
| **Product category** | **Product name** | **Materials Composition** | **Product code/Label Grade** | **Certification program(s):** | | | | | |
| **GOTS** | **CCS** | **OCS** | | **RCS** | **GRS** |
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Note: please refer Appendix: Product Master Data for the product category and details/name

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| **5.0 Further Details for Only Operator:** |
| **5.1- Please state if you are already certified by other Certification Body for following standards** |
| GOTS OCS GRS RCS  CCS  BSCI  SA 8000 Oeko-Teks STeP  WRAP  GSCP SR  FWF  NOTE 1: If you certified against any standard(s) which mentioned above, please submit all the valid certificates along with the last audit report.  NOTE 2: If you are a Ginning Unit, please ensure that you can be certified either to GOTS or to OCS but can not be certified to both. |
| **5.2- Has your Certificate been suspended/withdrawn before:**   Yes No  If Yes, please state the details |
| Details: |
| **5.3- Would you like to transfer your registation to the GCL?**  Yes No  If Yes please state the reason of transfer |
| Reason:  Note: Please submit all relevant documents concerning the previous inspection(s) such as inspection report, NCN report and their status, certificate etc..) |
| **5.4- Whether another Certification Body has denied certification.**  Yes No  If Yes please state the reason of rejection of your certification enquiry |
| Reason: |
| **5.5-** **Are you already a GCL certified client (Is it your re-certification with GCL)?**  Yes No  If yes Please state the changes since previous certification/inspection |
| Changes: |
| **5.6-** **Have you been audited or certified to the standard within the preceding 2 years?**  Yes No  If yes, Please upload the previous audit report as the results of the previous audit will be considered, and any open non-conformities will remain applicable |

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| **Applicant Operator** | |
| Date: / / | **SIGNATURE**  (Authorized representative of the Applicant) |

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| **GCL USED ONLY** | |
| Date: / / | **SIGNATURE**  (GCL Application and Contract Reviewer) |

**SUBMISSION**

After completing the Application Form, please submit it directly GCL head office or to your nearest local GCL Office:

To check the nearest GCL Office in your area, please go to [**www.gcl-intl.com**](http://www.gcl-intl.com)

PCAF01 Ver:9, 26/03/2020

# Appendix: Product Master Data

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| |  | | --- | | **RAW MATERIALS** | | Acetate | | Acrylic | | Animal Hair | | Conventional cotton | | Organic cotton | | In-Conversion Cotton | | Cupro | | Down and feather | | Elastane/Spandex | | Hemp | | Jute | | Kapok | | latex | | Leather | | Linen/Flax | | Lyocel | | Metal | | Modal | | Organic Hemp | | Organic Jute | | Organic Kapok | | Organic Linen/Flax | | Organic Silk | | Organic Wool (Sheep) | | Polyamide/Nylon | | Polyester | | Recycled Polyester | | Recycled cotton | | Recycled nylon | | Recycled glass | | Recycled wool | | Recycled linen | | Recycled silk | | Rubber | | Silk | | Viscose/Rayon | | Wool (Sheep) | | Other | | |  | | --- | | **PRODUCT CATEGORIES** | | Apparel | | Combined Products | | Equipment | | Fabric | | Fashion Accessory | | Fiber | | Filling/Stuffing Material | | Footwear | | Functional Accessories | | Hard Goods | | Home Textiles | | Industrial/  Technical | | Mattress | | Packaging | | Paper | | Personal Care & Hygiene Products | | Toys | | Yarn | | Other | | |  |  | | --- | --- | | **PRODUCT DETAILS** | | | Automotive upholstery | Outerwear - Jackets, Sweaters | | Awnings | Pants/ Trousers | | Baby | Pillow/Cushion | | Backpacks | Processed chips/pellets | | Bags/Totes | Raw, grey or griege | | Bed linen | Scarves | | Belts | Scoured wool | | Buttons | Seed Cotton | | Cardboard/Boxes | Sewing/Embroidery thread | | Carded yarn | Shirting | | Care labels | Shirts | | Children's | Shoes | | Combed yarn | Sleepwear | | Denim fabric | Sleeping bags | | Denim jeans | Socks | | Flakes (PET) | Sports | | Furniture | Stuffed animals | | Greasy Wool | Table linen | | Hats/Head Coverings | Tarps | | Hygiene products Invasive | Tents | | Hygiene products Topical | Ties | | Knitted fabric | Towels | | Lint Cotton | Undergarments/ Bottom | | Luggage | Yoga | | Mattress | Wonem fabric | | Non-woven fabric | Zippers | | Open-end yarn | Other | | Other equipment made of metal, plastic, or wood |  | | |  | | --- | | **PROCESSING CATEGORIES** | | Farm Production | | Ginning | | Spinning | | Knitting | | Weaving | | Manufacturing (Finished Product) | | Pre-treatment (e.g. scouring, sizing, de-sizing, bleaching, mercerization) | | Dyeing / Coloration | | Finishing | | Embroidering/ Embellishment | | Garment Laundry | | Washing/Laundering | | Printing | | Non-woven | | Packing/Re-Packing | | Trading | | Warehousing | | Retailing | | Topmaking | | Breeding | | Hatchery | | Slaughtering | | Down Processing (e.g. cleaning, washing, drying, sorting, mixing) | | Collecting | | Concentrating (e.g. flaking, chipping, baling) | | Recycling | | Tanning | | Other | |

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| **6.0 For GCL ONLY:** |
| **1- Valid Certificate(s( and Last Assessment Report(s) (fo each standard which selected at 5.1)** |
| |  |  | | --- | --- | | Are the certificates are valid : |  | | Any outstanding NCN(s) from last assessment(s) : |  | |
| **2- Inspection man-day calculation** |
| |  |  | | --- | --- | | Original man-day : |  | | Any reduction or increasing factors : |  | | Final Ins. Man-day : |  |   Note 1: Please justify the Inspection time calculation (clearly state the reduction and increasing factors)  Note 2: PCOP08 to be refferred for the insp. man-day calculation and Factors for adjustments of inspection time |
| **3- Financial Details:** |
| |  |  | | --- | --- | | Certification Fee (inc. Sub-Contractor): |  | | TE/GOTS license fee: |  | | Other: |  | | **Total Payable Amount:** |  | |