

## IASC Certification Program Application: Facility Certification



The following company, having read the IASC Certification Program Standard Operating Procedures, hereby agrees to all definitions, procedures, and fees and submits this application for participation in the program.

Company:						
Authorizing Individual:		Email:	Phone:	Phone:		
Address Line 1:		Address Line 2:				
City:	State:	Zip/Postal Code:	Country:			
Primary Contact:		Email:	Phone:	Phone:		
Secondary Contact:		Email:	Phone:			
Facility Address Line 1:		Facility Address Line 2:				
City:	State:	Zip/Postal Code:	Country:			
Facility Primary Contact:		Email:	Phone:	Phone:		
Facility Secondary Contact:		Email:	Phone:			
Applicant agrees to supply all required procedures and information on a confidential						
basis. IASC representatives will sign a confidentiality agreement if required. The			Facility Certific	lASC Member	SUSD) Non-Member	
	nat this certification will last Council has cause to repea	for three (3) years from the date the facility certification	Facility Certification	\$1,650	\$2,200	
inspection or the facility is		cost will be at the established fee	Auditor Fee [Audit Day/Travel Day(s)]	\$1,000/\$500	\$1,000/\$500	
Tentative Date of Requested Facility Certification:			Other audit related expenses such as airfare, ground transportation, mileage reimbursement, meals, and accommodations will be charged at cost for members and nonmembers. Mileage reimbursement will be calculated at the applicable institutional rate			
Important: By signing this policies and procedures or You are also agreeing to t						
use which is incorporated by reference into your application as if reproduced here.						
Applicants will be notified of application approval along with a statement of associated certification expenses. The certification procedure will not begin until all expenses are received by IASC.						
Signature:			Date:			

Completed application should be emailed or printed and mailed to: