



OBP CERTIFICATION APPLICATION FORM
OBP认证申请表

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ETKO Certification and Inspection (Shenzhen) Co., Ltd. Room 1416, Block A, Weidonglong Business Building, No. 4549, Longhua Avenue, Qinghua Community, Longhua Street, Longhua District, Shenzhen City, Guangdong province, China; Tel: +86 (755) 8267 3213; Email: gavin.sun@etko.com.cn

NOTE: This form should give the general information on the project before the contract is signed. Please fill in the form and communicate it to ETKO. The scope of the desired certification should be declared by this application form. Applicant agrees to comply with the requirements for certification and to supply any information needed for evaluation of products to be certified. The contract will be prepared after this information form is sent to ETKO. If the project has been controlled beforehand by another control body and if the project is included to the ETKO certification project in the new term, the project owner will be responsible to communicate the last report to ETKO given by the preceding control body. The control date won't be determined before the documents are completely conveyed to ETKO.
说明: 该表格应在签订合同之前提供有关项目的完整信息。请填写此表格并发送给ETKO。所需认证的范围应在此申请表中声明。申请人同意遵守认证要求, 并提供待评估认证产品所需的所有信息。在将此信息表发送给ETKO之后, 将准备规定合同。如果该项目已由另一个认证机构事先执行, 并且该项目在新的期限内包含在ETKO认证项目中, 则贵公司需要将负责将上一份报告以及给上一个认证机构的信息提供给ETKO。在文件完整传送到ETKO之前, 无法确定执行审核的日期。

A. Organization Basic Info - 组织的基本信息									
Name Applicant/申请公司全称									
Address 地址									
Company's Website and Telephone 公司网址和电话:									
Name of Quality Manager for OBP Program: OBP项目质量经理的姓名:					***The OBP Quality Manager shall also be the main contact person with the Certification Body (CB). OBP质量经理也应是认证机构的主要联系人。				
Quality Manger's Tel/Mobile Phone 质量经理的电话/手机			Quality Manager's E-mail 质量经理的电子邮箱:						
Number of Employee/ 员工人数:			Company's Activities/Processes: 公司的工序/业务活动:						
Certification Standard(s) Applied: 请选择申请的OBP认证标准									
Has your OBP application/certification ever denied / sanctioned? 您的OBP申请/认证是否曾被拒绝/制裁?			If "yes", please describe the details about the denial or sanction: 如果是, 请描述认证被拒绝或制裁的细节:						
Have you been certified to OBP program(s) before? 您先前是否有认证过OBP项目?			If "yes", please indicate the certified OBP standard(s), valid period of the certificate(s) and the certification body: 如果是, 请说明认证的OBP标准, 证书有效期及认证机构:						
Do you have previous certification body inspection report and master certificate? 您是否持有以前的认证机构颁发的审核报告和证书原件?			**If you were previously certified to OBP program(s), the previous OBP audit reports and certificate(s) shall be provided. 如果您先前有做过OBP项目的认证, 先前的OBP审核报告及证书需提供。						
Supply Chain Model(s) applied: 请选择应用的供应链模式:			**This section is only applicable for COL, REC or NEU standard 该项仅适用于COL, REC或NEU标准						
Organizations applying to the OBP-COL-STD and/or OBP-NEU-STD can only choose IPM and/or SM. Organizations applying to the OBP-REC-STD Standard can apply for any of the models. 申请 OBP-COL-STD 和/或 OBP-NEU-STD 标准的组织可以选择IPM和/或SM模式。申请 OBP-REC-STD 标准的组织, 可以选择任何模式。									
If you are applying for OBP Collection Organization Standard or OBP Neutralization Services Provider Standard, please specify the collection sites (names and geographical location of selected beaches, rivers/banks, districts and communities or any other site type) you will work in; otherwise, leave this section blank. 如果您正在申请OBP收集组织标准或OBP中和服务提供商标准, 请指定您将在哪些收集地点工作(所选海滩、河岸、地区和社区或其他地点类型的名称和地理位置); 否则, 将此部分留空。									
OBP Collection Sites (only applicable for Collection Organization and Neutralization Services Provider Organization): OBP收集场所(仅适用于收集组织和中和服务提供商组织):		No.	Collection Site Name and Geographical Location 收集场所名称和地理位置	OBP Category / OBP类别	No. of Independent Collectors 收集工人数	No.	Collection Site Name and Geographical Location 收集场所名称和地理位置	OBP Category / OBP类别	No. of Independent Collectors 收集工人数
		1				2			
		3				4			
		5				6			
Are you applying for Multisite Certification? 您是申请多场所认证吗?			**If you select "Yes" for "Multisite Certification", please fill in the sub-site information in the following "List of Sub-sites" table; otherwise, leave this table blank. 如果您选择了"是", 请在下面的"子场所清单"表填写子场所信息; 否则, 该表留空。						

List of Sub-sites 子场所清单						
No.	Sub-site Name 场所名称	Address 地址	Activities/Processes 业务活动/工序	Supply Chain Model/供应链模式	Number of Employee/员工人数	Additional Comments其它说明
1						
2						
3						
4						
5						
Are you applying for "Supplier Group Certification"? 您是申请“供应商集群认证”吗?		**1- "Supplier Group Certification is only applicable for COL or NEU standard"; please select "N/A" if you are not applying to either of these 2 standards. "供应商集群认证"仅适用于COL或NEU标准, 如果您不是申请这两个标准, 请选择“不适用”; **2- If you select "Yes", please fill in the Small Collectors' information in the following "List of Small Collectors" table; otherwise, leave this table blank. 如果您选择了“是”, 请填写下面的“小收集实体清单”表;否则, 该表留空。				

List of Small Collectors 小收集实体清单						
No.	Small Collector Entity Name 小收集实体的名称	Legal Address 法定地址	Supply Chain Model/供应链模式	Collection Site Name and Geographical Location 收集场所名称和地理位置	No. of Independent Collectors 收集工人数	OBP Category / OBP类别
1						
2						
3						
4						
5						

Do you delegate works on the OBP material or product to any subcontractor(s)?
您是否将OBP材料或产品的加工委托给任何分包商?

**1- Collection Activity is not permitted to be subcontracted. 收集活动不允许分包。
**2- If you select "Yes", please fill in the following "List of Subcontractors" table; otherwise, leave this table blank. 如果您选择“是”, 请填写下面的“分包商清单”;否则, 该表留空。

List of Subcontractors 分包商清单							
No.	Subcontractor Name 分包商名称	Address 地址	Subcontracting Activity 分包的活动	How many percents of the organization's OBP volume is handled by the subcontractor? 组织的OBP产量有多少百分比是由分包商处理的?	Dose the subcontractor return back the OBP products to the organization after processing? 分包商是否将处理后OBP产品运回组织?	Does the subcontractor exclusively handle OBP certified products? 分包商是否仅仅处理OBP产品?	Certified to any chain of custody standard? 是否有认证任何供应链监护标准?
1							
2							
3							
4							
5							

B. OBP Waste Treatment Facilities - OBP废物处理站

If you are applying for "OBP Neutralization Services Provider Standard (NEU)", the following table must be filled in; otherwise, leave it blank. 如果您申请“OBP中和服务提供商标准(NEU)”, 必须填写下表; 否则, 此表留空。

No.	Treatment Facility Name 处理站名称	Address 地址	Treatment Category 处理类别	Activity for Treatment 处理活动
1				
2				
3				
4				
5				

C. Applied OBP Certified Products for OBP Recycling Organization or OBP Brand - OBP回收组织或OBP品牌申请认证的产品清单

This table is only applicable for OBP Recycling Organization or OBP Brand; leave it blank if you are not applying for OBP Recycling Organization Standard (REC) or OBP Brand Standard (BRA). 该表仅适用于OBP回收组织或OBP品牌; 如果您没申请OBP回收组织标准(REC)或OBP品牌标准(BRA), 勿填此表。

No.	Product Category 产品类别	OBP Category / OBP类别	OBP Source / OBP源头	OBP Material Type/OBP 原材料名称	OBP Content (x%) / OBP含量百分比	Additional Comments其它说明
1						
2						
3						
4						
5						

D. Applied OBP Certified Products for OBP Collection Organization - OBP收集组织申请认证的产品清单

This table is only applicable for OBP Collection Organization; leave it blank if you are not applying for OBP Collection Organization Standard (COL). 该表仅适用于OBP收集组织; 如果您没申请OBP收集组织标准(COL), 勿填此表。

No.	OBP Category / OBP类别	OBP Source / OBP源头	Plastic Type 塑料类型	Additional Comments其它说明
1				
2				
3				
4				
5				

E. Estimated Weight of NCR OBP to be Collected and Treated within a year (TAOBPW) - 预计一年内收集和处理的非商业化可回收利用的OBP重量

This table is only applicable for OBP NEUTRALIZATION SERVICES PROVIDER; leave it blank if you are not applying for OBP NEUTRALIZATION SERVICES PROVIDER Standard (NEU). 该表仅适用于OBP中和服务提供商; 如果您没申请OBP中和服务提供商标准(NEU), 勿填此表。

Total Annual OBP Weight (TAOBPW) in MT 以公吨计的年度OBP总重量:	Metric Tons
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F. OBP NEUTRAL (OBPN) SCOPE - OBP中和范围

This table is only applicable for OBP Neutral PLASTIC PRODUCERS & USERS; leave it blank if you are not applying for OBP PLASTIC PRODUCERS & USERS Standard (PRO). 该表仅适用于OBP中和塑料生产者和使用者; 如果您没申请OBP中和塑料生产者和使用者标准(PRO), 勿填此表。

OBP Neutral Timeframe/OBP中和时间段:	From DDMMYYYY to DDMMYYYY	Forecasted plastic weight to be compensated in MT 预测要中和的以公吨计的OBP重量:
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***Please select the defined OBPN Scopes as following and indicated the related details in the corresponding tables 请选择定义的OBP中和范围并在对应的表中填写相关细节:

1. OBP NEUTRAL for Whole Company

2. OBP NEUTRAL for Specific Products as following:

3. OBP NEUTRAL for Product Range or Lines as following:

No.	Product Trade Name	Product Description	No.	Product Range or Lines	Supplementary Description
<input type="checkbox"/> 4. OBP NEUTRAL for Whole Production of Plants as following:			<input type="checkbox"/> 5. OBP NEUTRAL for Specific Events as following:		
No.	Plant Name	Plant Address/Location	No.	Description of Event	Timeframe of Event

*Signature/签名确认	Date 日期
<small>*This form should be signed by a fully authorized person. 该表格应由经过正式授权的人签名。</small>	