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| Scope of Application | [Construction Products Regulation](http://www.google.com.tr/url?sa=t&rct=j&q=&esrc=s&source=web&cd=1&ved=0ahUKEwix4d2v-fzNAhVGWhQKHbiNAWsQFggaMAA&url=http%3A%2F%2Feur-lex.europa.eu%2FLexUriServ%2FLexUriServ.do%3Furi%3DOJ%3AL%3A2011%3A088%3A0005%3A0043%3AEN%3APDF&usg=AFQjCNFhNtzy-b-pETfXKpR6kvMMIkw2lQ&bvm=bv.127178174,d.bGs) (305/2011/EU, Appendix-5, Item 1.3, System 2+)  Factory Production Control Certification  Certification of Factory Production Control system according to as follows:   * Evaluation of Initial Type Tests * First evaluation of Factory Production Control system * Periodical evaluation of Factory Production Control system |

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| History of Factory Production Control Certification | | |
| Certification Audit |  | |
| Transfer Audit |  | Certification Body: |
| Certificate Validity Date: |
| Change of Address, [Welding Coordination](http://tureng.com/tr/turkce-ingilizce/welding%20coordination) Personnel, Scope   Audit | Reason of Change: | |
| Recertification Audit | Certificate Validity Date: | |

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| Name of Company (Legally Registered): | | | | | | |
| Address: | | | | | | |
| Tel: | | Fax: | | | | E-mail: |
| Web: | | Tax Office: | | | | Tax No: |
|  | | | | | | |
| Factory Production Control Standard: | | | | | | |
| Annual Production Capacity: | | | | | | |
| Production Plant Status | Field :………………(m²) | | | | Confined Space :………………(m²) | |
| Number of Certifed PQR:  Name/Surname of [Welding Coordination](http://tureng.com/tr/turkce-ingilizce/welding%20coordination) Personnel (please indicate [separately](http://tureng.com/tr/turkce-ingilizce/separately) if there is more than one personnel)  ***Note: Please fill if you request Factory Production Control Certifıcation according to EN 1090 standard.*** | | | | | | |
| Number of Production Line:  ***Note: Please fill if you request Factory Production Control Certifıcation according to EN 10025, EN 10210, EN 10219 and/or EN 15088 standards.*** | | | | | | |
| Product Range:  ***Note: Please fill if you request Factory Production Control Certifıcation according to EN 13479 standard.*** | | | | | | |
|  | | | | | | |
| \*Please fill if the producer is another company | | | | | | |
| Producer Name: | | | | | | |
| Producer Address: | | | | | | |
| Tel: | | | Fax: | Activity: | | |
| Annual Production Capacity: | | | | | | |
| Production Plant Status | | | Field :………………(m²) | Confined Space:………………(m²) | | |
| Number of Plant: | | | | | | |
| Number of Certifed PQR:  Name/Surname of [Welding Coordination](http://tureng.com/tr/turkce-ingilizce/welding%20coordination) Personnel (please indicate [separately](http://tureng.com/tr/turkce-ingilizce/separately) if there is more than one personnel)  ***Note: Please fill if you request Factory Production Control Certifıcation according to EN 1090 standard.*** | | | | | | |
| Number of Production Line:  ***Note: Please fill if you request Factory Production Control Certifıcation according to EN 10025, EN 10210, EN 10219 and/or EN 15088 standards.*** | | | | | | |
| Product Range:  ***Note: Please fill if you request Factory Production Control Certifıcation according to EN 13479 standard.*** | | | | | | |

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| ***Note: Please add if there are more than one production place, subsidiary plant or project*** | | |
| Address: | | |
| Tel: | Fax: | Activity: |
| Annual Production Capacity: | | |
| Production Plant Status: | Field :………………(m²) | Confined Space:………………(m²) |
| Number of Certifed PQR:  Name/Surname of [Welding Coordination](http://tureng.com/tr/turkce-ingilizce/welding%20coordination) Personnel (please indicate [separately](http://tureng.com/tr/turkce-ingilizce/separately) if there is more than one personnel)  ***Note: Please fill if you request Factory Production Control Certifıcation according to EN 1090 standard.*** | | |
| Number of Production Line:  ***Note: Please fill if you request Factory Production Control Certifıcation according to EN 10025, EN 10210, EN 10219 and/or EN 15088 standards.*** | | |
| Product Range:  ***Note: Please fill if you request Factory Production Control Certifıcation according to EN 13479 standard.*** | | |

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| Please fill for Product Definition. | | | | |
| Product 1 | Commercial Name |  | Type of Product |  |
| Aim of Use |  | Production Field |  |
| Standard of Harmonize reference |  | Origin of Raw Material |  |
| Applied Welding Methods: |  | Stock Place |  |
| Product 2 | Commercial Name |  | Type of Product |  |
| Aim of Use |  | Production Field |  |
| Standard of Harmonize reference |  | Origin of Raw Material |  |
| Applied Welding Methods |  | Stock Place |  |
| Product 3 | Commercial Name |  | Type of Product |  |
| Aim of Use |  | Production Field |  |
| Standard of Harmonize reference |  | Origin of Raw Material |  |
| Applied Welding Methods |  | Stock Place |  |

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| Number of Employee who works in scope of Factory Production Control | | | | | Head Office | | | | Subsidiary plant | | | | | | | Subtotal | | | |
| Employee Status | Engineer | | | [Technician](http://tureng.com/tr/turkce-ingilizce/technician) | | | | Foreman | | | | Workman | | | | | | | [Administrative](http://tureng.com/tr/turkce-ingilizce/administrative) Staff |
| Is the production performed by shifts?  If yes, please indicate number of shift and number of employee who works in shift. | | | | | NO | | | Number of Shift | | | 1.Shift | | | 2.Shift | | | | 3.Shift | |
| YES | | |  | | |  | | |  | | | |  | |
| Execution Class | | | | | EXC 1  EXC 2  EXC 3  EXC 4 | | | | | | | | | | | | | | |
| Are the Initial Type Tests performed by producer? | | | | | Product 1 | | | YES | | | | | NO | | | | | | |
| Product 2 | | | YES | | | | | NO | | | | | | |
| Product 3 | | | YES | | | | | NO | | | | | | |
| Is there factory process control system for the products? | | | | | Product 1 | | | YES | | | | | NO | | | | | | |
| Product 2 | | | YES | | | | | NO | | | | | | |
| Product 3 | | | YES | | | | | NO | | | | | | |
| Has the statement of performance for the products been issued? | | | | | Product 1 | | | YES | | | | | NO | | | | | | |
| Product 2 | | | YES | | | | | NO | | | | | | |
| Product 3 | | | YES | | | | | NO | | | | | | |
| Initial Type Test Laboratory | | | | | | Internal | | | | External | | | | | | | Both | | |
| If the tests have been performed by external laboratory, Laboratory Name: | | | | | |  | | | |  | | | | | | |  | | |
| Has the work started with another notified body related with certification of requested product? | | | | | | Yes  No  (If Yes, Company Name:…………………….………………….) | | | | | | | | | | | | | |
| Does the company have certified management system? | | | | | | Yes No  (If Yes, Name of Standard:…………………………….………...) | | | | | | | | | | | | | |
| Anticipated date for factory production control  Certification: | | |  | | | | How long have you operated management system in your company? | | | | | | | |  | | | | |
| How did you reach Türk Loydu? | | |  | | | | If you got consulting service,  consulting company's name: | | | | | | | |  | | | | |
| Person who filled the form  Name Surname/Title | |  | | | | | Sign/Stamp | | | | | | | |  | | | | |

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| If the blanks is not sufficient for the answers, addition document can be added.  After answering all above questions with details please send email or fax to below address and number. |
| Tel: +90 216 581 37 00 Fax: + 90 216 581 38 20 e-mail: [teklif-endustri@turkloydu.org](mailto:teklif-endustri@turkloydu.org) |