



Application

Authorization for marking with **INSPECTED QUALITY** for horsehair products

(Mattresses, padding, pads)





Applicant

Company	
Street No.	
ZIP Code	
City	
State	
Country	
Phone/Fax	
E-mail	
www	

Responsible person

Name	
Phone/Fax	
E-mail	

By placing an order for certification, I agree to the storage and use of the personal and company-related data.

For the technical information that is disclosed to the OETI for verification and certification, the confidentiality agreement in accordance with our terms and conditions.

https://www.oeti.biz/oeti-de-wAssets/docs/Downloads-fuer-Seiten/agb/EN/AGBs_EN_20210701-1.pdf



Certification

Application is requested

Certification	<input type="checkbox"/>
Re-certification	<input type="checkbox"/>

When applying for a re-certification, please indicate the existing number of the identification authorization.

Number of the identification authorization	<input type="text"/>
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Criteria No.	Description	To be attached to the application	To be presented during the audit
2.1.1.1	Environmental and Quality Management Policy	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.1.1.2	Carrying out an environmental assessment	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.1.1.3	Quality and Environmental objectives	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.1.1.4	Risk management	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.1.1.5	Traceability	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.1.1.6	Deviations and corrective actions	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.1.1.7	Quality control	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.2	Consumption of energy	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.3	Consumption of water	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.4	Waste water	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.5	Waste	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.6	Veterinary requirements	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.7	Testing for harmful substances of the used materials	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.8	Consumer Information	<input checked="" type="checkbox"/>	<input type="checkbox"/>



For detailed descriptions of the criteria and the documents to be submitted, please refer to the labelling guideline.

Declaration of commitment

By signing this application with an authorised signature, the applicant is responsible for the data given and is obliged to inform the testing institute of any alterations immediately.

I agree that I will be named in the list of references on the OETI website once the labelling authorization has been granted. (The naming takes place with the company name and a link to their website)

yes no

Date	<input type="text"/>
Sign	<input type="text"/>