

# New Client Application for Certification

## *Animal Care Program, Proposition 12, Farm Animal Confinement*

**The information provided in this Application will help SCS determine eligibility and scope of service. No charges will be incurred, nor work conducted, until a Work Order is executed.**

Note: Applications for producers and distributors only accepted for the United States only at this time. If you would like to request additional locations, please notify SCS Global Services at [dairyandanimalwelfare@scsglobalservices.com](mailto:dairyandanimalwelfare@scsglobalservices.com).

SECTION 1: COMPANY INFORMATION		
<b>COMPANY INFORMATION</b>		
Company Name (as it would appear on a contract):		
Physical Address:		
City:	State:	Postal Code:
Mailing Address:		
City:	State:	Postal Code:
Main Phone:	Website:	
Brief Company Description:		
<b>PRIMARY CONTACT PERSON</b>		
First Name:	Last Name:	Title:
Direct Phone:	Email:	
<b>COMPANY AFFILIATIONS WITH OTHER LEGAL ENTITIES (parent co., subsidiaries)</b>		
Company Name:		
Corporate Relationship:		
Has the company worked with SCS previously? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, which service(s) did you use?		

<b>COMPANY LEGAL STATUS (e.g. INC., LLC., GMBH, LTD., NGO)</b>
What is the legal status of your company?

**SECTION 2: OPERATION INFORMATION**

What type of operation are you applying to be certified:

Pork Producer     
  Egg Producer     
  Veal Producer     
  Distributor

**DESCRIPTION OF COVERED ANIMAL CONFINEMENT SYSTEM (For Producer to complete)**

Quantity of covered animals:

Number of enclosures:

Size of enclosures:

Maximum number of covered animals housed in each enclosure:

Any additional information:

**DESCRIPTION OF COVERED DISTRIBUTOR OPERATION (For distributor to complete)**

If you are a Distributor, what type of covered producer do you distribute:

Shell Eggs     
  Liquid Eggs     
  Whole Veal Meat     
  Whole Pork Meat

Quantity of covered products distributed:

**SPLIT OPERATIONS (For split operation Producer/Distributor to complete)**

Are you a split operation (*an operation that produces or distributes covered animals and/or covered product from operations, or portions of an operation, that are both in conformance and out-of-conformance with Animal Confinement regulations*):

Yes       No

If you have a split operation, include a description of management practices including physical barriers and standard operating procedures established to prevent commingling of covered animals/products.

SECTION 3: PREVIOUS CERTIFICATIONS
<b>If applicant has applied for Prop 12 certification previously with another certifying agent or has been issued Prop 12 certification previously by another certifying agent, complete this section.</b>
Name of certifying agent(s) for previous applications:
Year of application(s) to other certifying agent(s):
Outcome of application submission to other certifying agent(s):  <i>If applicable, include copy of any notification of noncompliance, denial, or revocation of certification issued AND a description of the actions taken to correct the noncompliance with the evidence used to correct the noncompliance.</i>

SECTION 4: GENERAL INFORMATION	
<b>What factors contributed to your interest in SCS services? (check all that apply)</b>	
<input type="checkbox"/> Compliance	<input type="checkbox"/> Strategy
<input type="checkbox"/> Customer Interest	<input type="checkbox"/> Buyer Requirement
<input type="checkbox"/> Supplier Programs	<input type="checkbox"/> Other:
<b>Would you like information on other SCS Services? (check all that apply)</b>	
<input type="checkbox"/> Climate (carbon offset, carbon footprint, etc.)	<input type="checkbox"/> Sustainable seafood (MSC, ASC, seafood safety)
<input type="checkbox"/> Environmental claims (product certifications, life cycle assessment, etc.)	<input type="checkbox"/> Sustainability services (consulting, supply chain, sustainability metrics)
<input type="checkbox"/> Responsible forestry (FSC, PEFC, Timber legality)	
<b>How did you learn about SCS Global Services? Who referred you to SCS?</b>	

SECTION 5: AFFIRMATION
I affirm that the information provided herein is true and correct to the best of my knowledge, and that I am duly authorized to sign this application. Should our company decide to pursue certification, I agree to supply any information that is deemed necessary for the audit of the operation and/or products to be certified.
<b>Print Name:</b>
<b>Title:</b>
<b>Signature (electronic or typed accepted):</b>

**Date:**

Please email completed application to:  
[dairyandanimalwelfare@scsglobalservices.com](mailto:dairyandanimalwelfare@scsglobalservices.com)

We will be in touch as soon as possible.

**Thank you for choosing SCS.**