

# **Application for Certification – Renewal**

## 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 <u>dairyandanimalwelfare@scsglobalservices.com</u>.

SECTION 1: COMPANY/OPERATION INFORMATION		
COMPANY INFORMATION		
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:		
PRIMARY CONTACT PERSON		
First Name:	Last Name:	Title:
Direct Phone:	Email:	
COMPANY AFFILIATIONS WITH OTHER LEGAL ENTITIES (parent co., subsidiaries)		
Company Name:		
Corporate Relationship:		
Has the company worked with SCS previously? $\Box$ Yes $\Box$ No		
If yes, which service(s) did you use?		



#### COMPANY LEGAL STATUS (e.g. INC., LLC., GMBH, LTD., NGO)

What is the legal status of your company?

#### **SECTION 2: RECERTIFICATION INFORMATION**

Any additional information:

To continue certification, a certified operation must annually submit the following renewal information, as applicable, to SCS Global Services:

- (1) A summary statement, supported by documentation, detailing any deviations from, or changes to, information submitted on the previous year's application, including but not limited to any additions to or deletions from the information required on last year's application for certification;
- (2) An update on the correction of any noncompliances previously identified by the SCS Global Services as requiring correction for continued certification; and
- (3) Other information as deemed necessary by SCS Global Services to determine compliance with scheme requirements.

### **SECTION 3: 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.

Print Name:

Title:

Signature (electronic or typed accepted):

Date:

<u>Please email completed application to:</u> dairyandanimalwelfare@scsglobalservices.com We will be in touch as soon as possible. **Thank you for choosing SCS.**