

# CLIENT INFORMATION SHEET



|   |   |  |  |
|---|---|--|--|
| <b>Name of the organization</b><br><i>(As per registration)</i>               |   |  |  |
| <b>Nature of business</b><br><i>(Details of service, product and domain)</i>  |   |  |  |
| <b>Status of the organization</b>   | <input type="checkbox"/> Proprietorship       | <input type="checkbox"/> Private Limited             | <input type="checkbox"/> Government        |
|   | <input type="checkbox"/> Partnership          | <input type="checkbox"/> Public Limited              | <input type="checkbox"/> Trust/Association |
| <b>Address</b><br><i>(As you would like to be printed on the certificate)</i> |   |  |  |
| <b>Total employee strength</b>  |   |  |  |
| <b>Additional Location</b>  | <b>No. of Employees</b>                       | <b>Activities conducted at this location</b>         |  |
|   |   |  |  |
|   |   |  |  |
|   |   |  |  |
| <b>Contact Person Name</b>  |   |  |  |
| <b>Designation</b>  |   |  |  |
| <b>Phone Number</b>   |   |  |  |
| <b>Mail-ID</b>  |   |  |  |
| <b>Organization Website</b>   |   |  |  |
| <b>Certifications required</b><br><i>(ISO 9001, CE, CMMi...)</i>              |   |  |  |
| <b>Reason for Certification</b>   | <input type="checkbox"/> Branding             | <input type="checkbox"/> Process Improvement         |  |
|   | <input type="checkbox"/> Tender/Bids          | <input type="checkbox"/> Legal/Statutory Requirement |  |
|   | <input type="checkbox"/> Customer Requirement | <input type="checkbox"/> Other                       |  |
| <b>Date of Incorporation</b><br><i>(Years since business)</i>                 |   | <b>Annual Turnover</b>                               |  |
| <b>How soon can the project start?</b>  |   | <b>Is there a deadline for project completion?</b>   |  |
| <b>Remarks and other information</b>  |   |  |  |