Application Form for IFWCS Certification

(Application details shall be filled in English. Please select as many options as applicable from multiple options.)

A. Client Information:

Client name: …

Client legal status (Private/Public Ownership): …

Address: …

City: …	PIN Code: …	State: …

Phone number: …   Email address: …

Contact Person: …   Phone number: …

B. Client Activity:

i.	Forest division	☐	ii.	Forest corporation	☐
iii.	Individual farmer/Tree grower	☐	iv.	FPO	☐
v.	Saw miller	☐	vi.	Manufacturer	☐
vii.	Domestic trader	☐	viii.	Exporter	☐
ix.	Importer	☐	x.	Others	☐

C. Employees Details (associated with core activities):

i.	Permanent employees	…
ii.	Contractual employees	…

D. Annual Turnover (INR): …

E. Scope for Certification:

i.	Forest Management (FM)	☐
ii.	Trees Outside Forest (TOF) Management	☐
iii.	Chain of Custody (CoC)	☐

F. In case of FM Certification, furnish:

i.	Total forest area (in ha) under jurisdiction	…
ii.	Forest area to be certified (in ha)[1]	…
iii.	Number of Forest Ranges in the division	…
iv.	Number of Joint Forest Management Committees	…
v.	Number of Village Forest Committee	…
vi.	Additional information (if any)	…

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[1] Provide details of management unit and area under the scope of certification

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G. In case of TOF Certification, furnish:

i.	ToF/Plantation/Farm area (in ha)	…
ii.	Field khasra / Land record number	…
iii.	Crop/Tree species with variety	…
iv.	Additional information (if any)	…

H. Type of Certification:

i.	Single site certification	☐
ii.	Multi-site certification	☐ Number of sites[2]:
iii.	Group certification	☐ Number of group members[3]:

I. Outsourcing Details:

i.	No outsourcing or subcontracting involved	☐
ii.	Outsourcing or subcontracting involved[4]	☐
	a. The site is only used to store finished and labelled products.	☐
	b. All or some of the outsourced or subcontracted activities (except transportation) are performed at the same premise/location.	☐
	c. All or some of the outsourced or subcontracted activities are not performed at the same premise/location[5]	☐

J. Previous Certification Details (If applicable):

		FM ☐	TOF ☐	COC ☐
i.	Type of certification (Single/ Multi-site/ Group)		…	
ii.	Certification number		…	
iii.	Current status of certification (Valid/Suspended/Terminated/Withdrawal)		…	
iv.	Period of certification		…	
v.	Any other information		…	

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[2] Provide list of multiple sites (management structure and other information) if any, separately
[3] Provide list of participating group members, management structure and other information separately
[4] Provide details of the outsourcing or subcontracting activity separately
[5] Provide details of the premise / location (s) of outsourced or subcontracted activities

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K.	Any Other Certification (if applicable):			
i.	Name of certification	...		
ii.	Certification number	...		
iii.	Current status of certification (Valid/Suspended/Terminated/Withdrawal)	...		
iv.	Period of certification	...		
v.	Any other information	...		
L.	**Management/ Working Plan:**		Yes	☐
			No	☐
M.	**Identified Risk and Mitigation Measures:**		Yes	☐
			No	☐

Affirmation:

I affirm that the information provided herein is true and correct to the best of my knowledge and that I am duly authorised to sign this application.

The undersigned declares to have completed this Application Form truthfully. In case any incorrect information comes to our notice at any point in time, suitable sanction shall be imposed at the risk, cause, and responsibility of the applicant.

Name: ...

Designation: ...

Date: ...

Place: ...

Authorised signatory
(e-signature/typed accepted): ...

Seal/stamp: ...

To be filled by CB representative:

Application receipt number: ...

Date: ...

Authorised signatory
(e-signature/typed accepted): ...

Seal/stamp: ...

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Guidance notes for filling IFWCS Application form

Instructions to fill the IFWCS application form:

A. Client Information:

- **Client name:** Provide the full legal name of the client (legal entity/organization/ institution such as forest division, forest department or forest corporation, Individual, farmers' organization or a business organization in the wood/NTFP value chain).
- **Client legal status:** Indicate Private or Public Ownership.
- **Address, City, Pin code, State:** Enter the complete address.

B. Client Activity:

- Select the applicable client activity from the options provided (e.g., Forest Division, Forest Corporation, Individual Farmer/Tree Grower, Saw Miller, Manufacturer, etc.).
- If "Others" is selected, please specify the activity.

C. Employee Details:

- **Permanent employees:** Enter the total number of permanent employees.
- **Contractual employees:** Mention the number of contractual employees such as contractual skilled and unskilled workers daily wages or hired on fixed short- or long-term basis.

D. Annual Turnover:

- Provide the annual turnover of the client in Indian Rupees (INR).

E. Scope for Certification:

- Select the scope of certification (e.g. Forest Management (FM), Trees Outside Forest (TOF) Management, Chain of Custody (CoC)) as applicable, i.e. For forest divisions FM and/or TOF is applicable together with CoC, but for individual depots, sawmill units, traders, with physical handling of the material, CoC is applicable.

F. For FM Certification:

- **Total forest area under jurisdiction:** Enter the total forest area (in ha).
- **Forest area to be certified:** Indicate the part of the total forest area (in ha) that is under the scope of certification, leaving the remaining area not eligible or selected for certification.
- **Number of Forest Ranges in the division:** Provide the number of ranges in the division and sub-divisional units (as applicable)
- **Number of Joint Forest Management Committees:** Provide the number of Joint Forest Management Committees available in the division
- **Number of Village Forest Committees:** Provide number of Village Forest Committees available in the division
- **Additional information (if any):** Provide other information such as number of Forest Protection Committees, Eco Development Committees etc.

G. For TOF Certification:

- **TOF/Plantation/Farm area:** Provide the area (in ha).
- **Field Khasra/Land record number:** Enter the relevant land record details.
- **Crop/Tree species with variety:** List the species and varieties of trees/crops in the area.

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H. Type of Certification:

- Select the type of certification, i.e. **Single Site, Multi-site,** or **Group Certification**.
- **Single site**: For individual forest units (forest division, TOF areas), select Single Site only. A single certificate is issued for the individual site under the scope of certification.
- **Multi-site**: Enter the number of sites (more than one forest division, or TOF area). A single certification is issued for all the sites under the scope of the certification.
  NOTE: In multi-site certification, forest management units (with the same management structure and ownership), managed by a central management unit/ office.
- **Group certification**: Enter the number of sites under the scope of group certification. NOTE: In group certification, independent forest management units (with different management structure and ownership) are managed by a central management unit/ office.

I. Outsourcing Details:

- Select whether the outsourcing or subcontracting is involved.
- a. Select, if the subcontracting involves storing of finished products within the site/area under the scope of certification.
- b. Confirm, whether the core activities (i.e. enumeration, harvesting, sawmilling etc.) are outsourced or subcontracted. Or sub-activities (debarking, assembly of products without structural change in dimensions or shape, painting etc.) are outsourced.
  NOTE: Transport is not considered outsourcing unless there is no physical handling and no change of ownership.
- c. Confirm, whether the different site/location (outside the scope of certification) is used for storage of processed, semi-finished, or finished products and whether the subcontracted activities are carried out at different site/location.

J. Previous Certification Details (If applicable):

- Indicate previous certification obtained under the IFWCS, and its details.

K. Any Other Certification (If applicable):

- Indicate certification/s (if any) obtained other than under the IFWCS, and their details.

L. Management/Working Plan:

- Select, whether a Working Plan or Management Plan is in place.
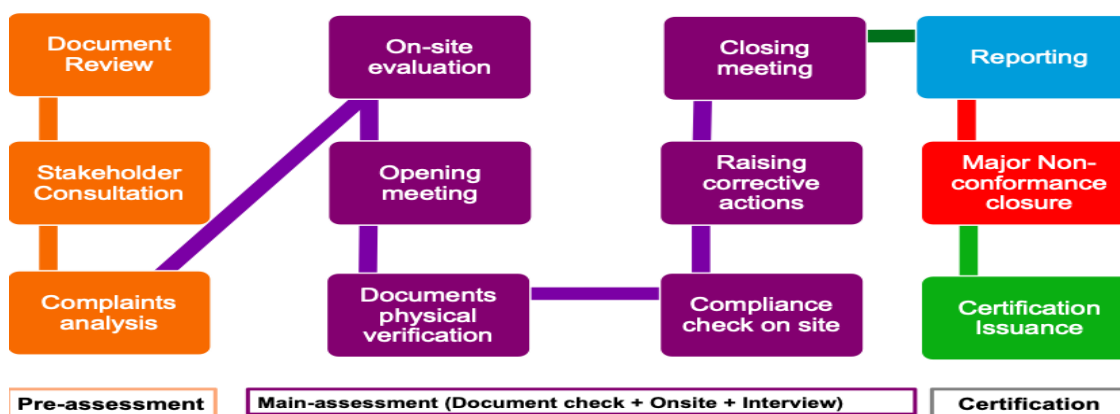
M. Identified Risk and Mitigation Measures:

- Select, whether the risks have been identified and mitigation measures are documented.
NOTE 1: Examples of the identified risks are potential adverse impacts of natural hazards on infrastructure, forest resources and communities. Identification of the harvesting practices that generate significant amounts of merchantable waste, and damage to other products and services.
NOTE 2: Risk mitigation measures are proactive management activities to reduce the impact of the identified risks. Examples are the development of sustainable harvesting protocols for important NTFP/ Medicinal plant species. Raising community awareness on conservation, harvesting/collection practices, grading and storage to promote sustainable management of forest resources. Guidelines developed for low impact harvesting of the timber to avoid damage to other products and services etc.

Affirmation:

The application form should be signed electronically or typed.

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Certification Steps of assessment under IFWCS

Step	Particulars
Certification application	Duly completed Application for IFWCS-PRAMAAN certification must be submitted to the Scheme Operating Agency (SOA) by the client.
Quotation/ commercial offer	SOA presents the commercial offer based on the customer's size (employees), level of outsourcing activity and type of certification requirement (single site, multi-site or group certification).
Contract acceptance	Customer accepts the offer and submits the signed quotation/offer to SOA. SOA releases the Performa invoice for payment.
Assessment preparation	SOA forms Assessment Team (AT), shares licence agreement with client, man-day/audittime calculation based on requirements such as document review, risk assessment, on-site evaluation, reporting, NC follow-up, etc.
Pre-assessment	The AT conducts a gap analysis based on a desk review of documents followed by a field visit (if required) in accordance with the requirements of the IFWCS and prepares a gap analysis or pre-assessment report clearly defining the scope of the assessment and the critical monitoring/control points for the main assessment.
Main-assessment	The assessment begins with an opening meeting, followed by a review of documents and an on-site assessment of the implementation of management practices and procedures in various operations. It also includes interviews with employees, suppliers, subcontractors, etc. The assessment concludes with a closing meeting where the AT presents its findings in relation to non-compliance (NC) and reporting schedules. Confirmation of the scope of the assessment and the products under scope to be certified, together with information on the assessment report and certification decision are also discussed at the closing meeting.
NC Matrix	**Major NC** - Systematic failure. No certificate will be issued until the Major NC is closed. 5 or more Major NCs will result in suspension of certificate. Failure to close Major NCs leads to suspension of certification, i.e. termination. **Minor NC** - Non-systematic failure, temporary lapses. Minor NC can be escalated to Major if not closed in time. Repeated Minor NCs against a requirement lead to Major NC. **Observation/Request for Improvement/Recommendation** - No Major or Minor for improvement opportunities, the request for improvement doesn't affect the certification decision. Usually reviewed during surveillance or subsequent assessment.
Corrective Action Requests (CAR)	CAR is issued according to the type of NC raised. Corrective action is initiated as soon as the CAR report is signed (upon receipt of the NC report or during the closing meeting). NC closure is reported back to the lead auditor. **Timelines:** Major NC - deadline 3 months. Minor NC closure - deadline before the next monitoring assessment (usually 01 year). No certification if Major NC closure is pending.
Certification	Certificate is issued subject to certification decision by the technical committee or technical reviewer of the audits. Certificate contains a unique number together with details of the scope of certification, products covered under certification, validity and issuing body.

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