



# IASC Certification Program

## Application: Facility Recertification



**International Aloe Science Council**  
 8630 Fenton Street, Suite 918  
 Silver Spring, MD 20910  
 Phone: 817.919.8538  
 Fax: 301.588.1174  
 www.IASC.org

The following company, having read the IASC Certification Program Standard Operating Procedures, hereby agrees to all definitions, procedures, and fees and submits this application for participation in the program.

Company:

Authorizing individual: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Address line 1: \_\_\_\_\_ Address line 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip/Postal code: \_\_\_\_\_ Country: \_\_\_\_\_

Primary contact: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Secondary contact: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Facility address line 1: \_\_\_\_\_ Facility address line 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip/Postal code: \_\_\_\_\_ Country: \_\_\_\_\_

Facility Primary contact: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Facility Secondary contact: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

List the name of each company for which you currently manufacture products for IASC certification as well as the name of each product displaying the IASC Certification Seal:

Facility Certification Fees		
	Member	Non-Member
Facility Certification	\$1500	\$2000
Auditor Fee (per day, including travel days)	\$500	\$500
All airfare, ground transportation, meals, and accommodations will be charged at cost for members and non-members.		
Mileage reimbursement will be calculated at the current U.S. Internal Revenue Service rates.		

Tentative date of requested facility recertification: \_\_\_\_\_

Applicant agrees to supply all required procedures and information on a confidential basis. IASC representatives will sign a confidentiality agreement if required. The applicant acknowledges that this certification will last for three (3) years from the date of certification unless the Council has cause to repeat the facility certification inspection or the facility is relocated. Re-certification cost will be at the established fee at the time of re-evaluation, cause or a facility move.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SUBMIT**

**Completed application should be mailed/faxed/mailed to:**  
 International Aloe Science Council  
 8630 Fenton Street, Suite 918  
 Silver Spring, MD 20910 USA  
 Fax: 301-588-1174  
 Email: rysasi@iasc.org

**PRINT**