



LAB CERTIFICATION APPLICATION

Form# 001IFSI
 Revised By SF
 Revision Date 11/03/2021
 Revision# 002
 Supersedes

IFSI Registrations is a validated registrar for all types of mobile, in-house laboratories, small desk top units and similar operations that need and require certification to satisfy customer or larger requirements without the need for a full culture laboratory to suit their business model as required by a typical ISO 17025 certificate. We would like to know more about your lab and your laboratory needs before we can accurately assess your certification needs. Please fill out this application and submit it to us as complete as possible and we will contact you immediately. **NOT FOR APPROVAL OF CULTURE SYSTEMS.**

TYPE OF LABORATORY: Mobile In-House Desk Top Other (Describe) _____

COMPANY / CONTACT INFORMATION

COMPANY NAME (Legal Entity)			
COMPANY ADDRESS: City, State, Zip Code			
COUNTRY		COMPANY EMAIL	
PHONE NUMBER		FAX NO	
CONTACT NAME (Legal Entity)		TITLE	
CONTACT PHONE NO		CONTACT EMAIL	

BILLING INFORMATION

BILLING ADDRESS: City, State, Zip Code			
CONTACT: Name, Phone No, Email			
FEDERAL TAX ID NO:			

LABORATORY SYSTEMS AND ASSAYS

Please describe the laboratory system used (equipment & assays):

LABORATORY DESCRIPTION

Please describe the type of testing your facility conducts/would like to conduct:

LABORATORY LOCATION

LABORATORY ADDRESS: City, State, Zip Code			
IF MOBILE: Please provide VIN:			

CERTIFICATION INFORMATION

1	CURRENT CERTIFICATION STATUS	
1a	Has your organization been previously laboratory certified?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Yes, provide name of certifier and certification scheme standard:		
Signature of Legal Entity:		Date:

IFSI Registrations Use Only

Review Signature:	Date:
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