

PRODUCT CERTIFICATION GUIDELINES

DOC: GSA-PCM-GL7.2-01

ISSUE: 02

05 OCTOBER 2013

GUIDANCE FOR COMPLETION OF APPLICATION FORM

1. PURPOSE

To provide guidelines for filling application form.

2. SCOPE

This covers application form for the operation of Product Certification Scheme.

3. RESPONSIBILITIES

3.1 HCM – For getting completed application for the operation of Product Certification Scheme.

4.1.1 Name of Company: Give the name of your company as indicated on the Certificate of Registration or Incorporation from the Registrar-General's Department. 4.1.2 Postal Address: Give the postal address of your company. If you do not have any, make sure you subscribe for one or use a "care of", i.e., "c/o". Tel: Fax: Give only telephone or mobile numbers by which you can be easily reached. Give your fax number if you have any. You are also to add a valid email address. 4.1.3 Location of the Factory (State exact Location, District and Region):

Give the precise description of the location of your factory, stating landmarks which can help in finding it.

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relevant Ghana Standards.

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4.1.4. Goods in respect of which Licence is being applied for:

<u>Goods</u>
The terms "Goods" refer to the product(s) you intend to manufacture. It is better to use the standard names of the product(s) whenever it / they is / are known.
Stating Raw Materials and Source of Supply
List the raw materials you use for manufacturing the product(s) together with its / their source(s) of supply. If purchased from the open market, state that.
4.1.5 Manufacturing Process employed in the manufacture of goods:
Simply show the manufacturing or production process using arrows or provide a flow diagram to show it.
a) Are there Quality Control units incorporated in your Process? Yes / No
If you have established Quality Control units at specific stages in your process, then tick "Yes", else tick "No".
b) If Yes, mention grades of officers in charge of the Quality Control stages
i
If you assigned specific officers to the various Quality Control stages in your process, then give their grades, i.e., their qualifications.
ii. Attach the following documents: - (Tick Yes or No as appropriate)

flow chart of the products and details of Quality Control activities and Quality Control Sheets which include tables designed for recording test results and observations.

The Scheme of Inspection and Test of the said goods to ensure conformity with the

You have to provide a Scheme of Inspection and Test which incorporates the production

No

Yes



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•	 Records of Routine Inspection and Test in respect of goods according to scheme during pilot phase of operation. Yes No If you have records of inspection and test carried out during the period of setting up facility and during trial and test runs, then tick "Yes", else tick "No". If No, in response to 5a, explain the absence of Quality Control units in your process. 				
			•••••		
	If you do not have Quality Control units in your process, give reasons why you do not have them. If you have the intention of setting these up later, state that.				
6.	Standards to which goods conform:				
Produc	et				
Give tl	ne name of the product(s) you wish to have	certified.			
No.					
•••••	•••••	••			
	the standard number which normally starts ar of publication or revision.	with GS or GS ISO follo	owed by a number and		
Title					
This is	the title of the standard written on the front	cover of the standard.			
4.1.7.	Production Figures for the said Goods:				
Year		Production	Unit		
Curren estima	nt year from January to December (as ted)				
		<u> </u>			

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You are to estimate the number of products you would produce in a year, using the current year as indicated. This is to give a projection of what you would produce in a year. You simply estimate this by setting values for the number of products you would manufacture in a day, the number of days in a week you would produce. Consider a unit as each unit of production in a



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bulk package such as a box, can, bag, stating the number of the products in each box, can, bag, container.

Number of Number of Bulk Number of Number of Packages **Products** Days You **Products** Manufactured = Manufactured X In A Bulk X Produce X 52 In A Year In A Day Package In A Week

You would get a figure. You can round this figure up or use this figure to choose a figure which is more appropriate for your facility.

4.1.8 Particulars of all Directors / Partners:
If you have directors or partners in your organization, you can list them here.
(Signature of Applicant)
The officer applying for the company should sign here. It need not be the Managing Director or the Chief Executive Officer of the company.
(Name of Applicant) The applicant writes his / her name here.
(Designation)
This is the designation of the officer, e.g., Managing Director, Director, General Manager, Manager.
For and on Behalf of
(Name of Firm)
Write the registered name of the company here

DECLARATION

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Signature of Applican	i:	
1100	for the company should sign here. fficer of the company.	It need not be the Managing Director or
Dated this	Day of	20
· · · · · · · · · · · · · · · · · · ·	write that "Dated this 15 th Day of late of the application.	f February 2010", if you want to use 15 th