

Code	MQS-AFCG
Revision	00
Date	27/10/2024
Issue	
App. Date	

Muscat Quality Services

Application for Certification



Ref No: MQS-AFCG-00

Country Destination				
<input type="checkbox"/> Sultanate of Oman	<input type="checkbox"/> Others: _____	<input type="checkbox"/> Others: _____	<input type="checkbox"/> Others: _____	<input type="checkbox"/> Others: _____

Application For:	NEW	RENEWAL	REVISION	Other Information
Certificate of Conformity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Certificate of Conformity to be collected by: <input type="checkbox"/> Exporter <input type="checkbox"/> Importer <input type="checkbox"/> Manufacturer
<input type="checkbox"/> Scope: Cosmetics & personal care Applicable Standards: 1943:2024 Applicable Scheme: MQS-CSG1a Rev:00				<input type="checkbox"/> Scope: Synthetic Detergents Powder s Applicable Standards: GSO 151:2007, GSO 151:2022 Applicable Scheme: MQS-CSG1a Rev:00
<input type="checkbox"/> Scope: Liquid Detergent for Manual Dishwashing Applicable Standards: GSO 2238:2021, OS 220:1991 Applicable Scheme: MQS-CSG1a Rev:00				<input type="checkbox"/> Scope: Aerosol Air Fresheners Applicable Standards: GSO 659:1997, GSO 659:2021 Applicable Scheme: MQS-CSG1a Rev:00
<input type="checkbox"/> Scope: General Safety Requirements of Non-Industrial Detergents Applicable Standards: GSO 2555:2021 Applicable Scheme: MQS-CSG1a Rev:00				<input type="checkbox"/> Scope: Lubricating Oils for Internal Combustion Engines Applicable Standards: OS GSO 1785:2013, GSO 1785-1:2024 Applicable Scheme: MQS-CSLO1a Rev:00

Trade Parties - Seller (Exporter Details)	
Name	
Comm. Registration No.	
Address	
Contact Person	
Telephone	
Email	
Fax	

Trade Parties - Importer/Buyer Details	
Name	
Comm. Registration No.	
Address	
Contact Person	
Telephone	
Email	
Fax	-

Trade Parties- Supplier <input type="checkbox"/> / Manufacturer <input type="checkbox"/> (if diff. from Seller)	
Name	
Comm. Registration No.	
Address	
Contact Person	
Telephone	
Email	
Fax	

Place of Inspection Details (If Applicable)	
Name	
Comm. Registration No.	
Address	
Contact Person	
Telephone	
Email	
Fax	

Agreement filled with MQS or Not?
<input type="checkbox"/> Yes, the company has already signed an entry form and entered into the Agreement with MQS.
<input type="checkbox"/> No. The above-named company wishes, on the basis of the information accompanying this application form, to enter into the agreement with MQS, in accordance with MQS requirements as per the agreement shared in the website (www.mqs-spc.com)

Remarks/ Additional Information or Documents:

Applicant Details			
Applicant Name		Address	
Signature		Tel. /Fax	E-mail

Item No.	Product HS code	Product Description	Batch No./ Lot No.	Product test report ⁽¹⁾	Product Label ⁽²⁾ (if applicable)	List of Ingredients ⁽³⁾ (if applicable)	Risk Assessment documents (if applicable)	Inspection Report (if applicable)	Management system certificate (if applicable)	Remarks
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

- (1) **Cosmetic products:** test report (valid for 2years from issue date) issued by local laboratories which must be registered by DCSM, accredited and certified in the international standard (ISO 17025 general requirements for the competence of testing and calibration laboratories) with the scope in cosmetics and personal care products.
General Chemical Products: test report (valid for 2years from issue date) issued by local laboratories which must be registered by DCSM or by laboratories from outside of Oman, accredited and certified in the international standard (ISO 17025 general requirements for the competence of testing and calibration laboratories).
(2) Product label (Artwork) according to the specific Omani/Gulf Standard related to each product.
(3) List of product ingredients issued by manufacture showing ingredients percentage and function (signed & stamped by manufacturer).

IMPORTANT

Please complete the above information and provide all documents required by Technical regulation i.e. (Documents that prove conformity, such as detailed description of the goods with technical characteristics and properties, available test reports, quality and environment management system certificates, marks of conformity, - e.g. Technical data sheets, national approvals, franchise agreement or similar for supplying branded goods - as well as health, hygienic, phytosanitary, fumigation certificates as applicable) should be returned to MQS by email. Datasheet and Guidelines for Exporter and the Rules for the suspension and withdrawal of the Certificate of Conformity are available through Emails (Public available information).

The client shall not make reference to its product certification in communication media such as documents, brochures or advertising unless authorized by the company. As applicable, the certified products shall continue to fulfil product requirements if the certification applies to continuing production.

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DECLARATION OF CONFORMITY

We, **CLIENT COMPANY NAME** with address **CLIENT COMPANY ADDRESS** declare that the product/s listed below is/are not affected by any product recall nor they are substandard or counterfeit, to the best of our knowledge. We also declare that the technical documentation required to demonstrate product compliance with the import country rules and regulations has been compiled by the signatory below and is attached for viewing by the relevant enforcement authorities. We further declare that we take responsibility and acknowledge that we are aware of the import country's regulatory requirements on the importation of the below-listed products and commit to comply with such requirements and hereby declare that we did not submit this application to another notified Body.

Item No.	HS Code	Product Description	Brand Name	Country of Origin	Manufacturer's name / Address	Variants (if applicable)	Number of variants	Testing Service (if requested)	Ministry Permit (if applicable)
						<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
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						<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

Certified correct by:

Name and Position:

Signature and Stamp:

Place and date of issue: MQS Head Office/ DATE

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