

APPLICATION FORM FOR APPROVAL OF GOTS TEXTILE AUXILIARY CHEMICALS AND DYEING SUBSTANCES

1. Application						
Company Name						
Address						
Commercial Activity Type		☐ Trade (Purchase and Sale) ☐ Production				
Production Place Address						
Legal Authority						
Contact Person / Role in the Company						
Phone / Fax						
E-mail / Web						
Tax Office / No						
2. Business Area Information						
Business Size (area) (m ²) (With Subcontractors/ Sub-units, if any)						
Are there any subcontractors (Outsource)?		Yes ☐ No ☐				
If there is a subcontractor (Outsource) Company Name/ Company Production Address						
3. Application Method						
☐		First Application				
☐		Change Application ☐ Change of Address ☐ Change of Title ☐ Product Addition Application ☐ Product Content Change				
☐		Renewal Application				
<i>If the renewal application is selected, answer the following question.</i>						
Will new product be added?						
☐ Yes (If to be added, specify the products in detail in the list below and share the declaration form of your current products with USB Certification)						
☐ No (For existing products, share the declaration form with USB Certification)						
4. Requested Textile Auxiliary Chemicals and Dyestuffs Information						
Textile Auxiliary Chemical and Dyestuff Product Trade Name	Usage Area in Textile	Manufacturer	SDS Revision Date	Production	Trade	
1				☐	☐	
2				☐	☐	
3				☐	☐	
4				☐	☐	
5				☐	☐	
6				☐	☐	
7				☐	☐	
8				☐	☐	

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9					☐	☐
10					☐	☐
11					☐	☐
12					☐	☐
13					☐	☐
14					☐	☐
15					☐	☐
16					☐	☐
17					☐	☐
18					☐	☐
19					☐	☐
20					☐	☐

5. Have you previously had an Approval Letter through another Certification Body?

☐ No

☐ If yes, please fill in the items below.

Share your final Letter of Approval along with your application form.

Previous Certification Body Name	
Your Previous Customer Number	
Has the approval for the chemical and / or dyestuffs you applied previously been, rejected/ withdrawn or suspended?	☐ No
	☐ Yes (If yes, state the reason)
Has your application for a letter of approval from another certification body been rejected?	☐ No
	☐ Yes (If yes, state the reason)
Have you contracted, audited, or approved according to the GOTS Scope4 program in the last 2 years? NOTE: Open nonconformities, if any, will continue to apply.	☐ No
	☐ If yes, (If yes, please send the previous audit report as the results of the previous audit will be taken into account.)

Other Quality Certificates / Enterprise Certificates

Bluesign® <i>(Sharing the audit report with us will affect the on-site time criteria.)</i>	☐ Yes ☐ No Last audit date: Certificate validity date:
Has a third-party audit been performed for Other Quality	☐ No

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Documents / Initiative Documents / Environmental Management and Safety? (ECO PASSPORT from OEKO- TEX®, Other standards or Initiatives (like ISO 14001, ISO 45001, ZDHC etc.) NOTE: If you have a certificate for such standard(s) mentioned above, please share your valid certificates along with the test report.	☐ Yes Standard name: Last audit date: Certificate validity date:
6. I approve the registration of my contact information into the database of GOTS ☐ Yes ☐ No	
7. You can reach the current version of the guides within the scope of GOTS from the link below. https://global-standard.org/resource-library/standard-and-certification https://usbcertification.com/en/textile-certification/	
8. Local Data Protection Law	
The disclosure text is shared at www.usbcertification.com within the scope of the Local Data Protection Law.	
9. Signature and Date	
By signing this application form, I declare the following: - I understand the GOTS requirements for the chemical inputs applied and I declare inputs are compliant, - I have sent an SDS, Technical Document and analysis forms, if any, attached to this form for each chemical entry prepared in accordance with a recognized norm or directive as specified in the Manual for the Implementation of GOTS, Section 7.1 - I grant USB Certification the right to exchange information with other Certification Bodies, Accreditation Bodies and Global Standard gGmbH to verify the authenticity of the information., - I will inform USB Certification about any relevant changes to the input (s) that have been applied for or have already been approved; • Change of raw material supplier used, • Change of processing method / technology used and even, • Change of raw materials / additives (concentration) used, • Changing the person responsible for the production and evaluation of GOTS Scope 4 products, - I will not use GOTS marks on a product, product packaging, product specifications or SDS (Safety Data Sheet), - I will apply for the use of GOTS marks in accordance with the provisions determined by GOTS during the validity period of the approval letter, - I will share all legal documents related to environmental health and safety with the system plan form.	
Legal Authority*	
Role in the Company	
Date, Place	
Signature and Stamp *The legal authority should send us the declaration that he/she has the signature authorization.	