

Approved Supplier Compliance Certification

Date of Issue: _____

Supplier Information

Company Name	_____
Address	_____
Contact Person	_____
Email / Phone	_____
Approval / Supplier ID	_____

Scope of Approval

Approved Products / Services	_____
Product/Service Codes	_____
Approval Validity Period	From: _____ To: _____

Compliance Statement

The above-mentioned supplier has been evaluated and is approved in accordance with the requirements of our Supplier Quality Management System. The supplier is certified to comply with all relevant standards, specifications, contractual and regulatory requirements applicable to the supplied goods and/or services.

The supplier agrees to maintain compliance and immediately notify us of any significant changes that could affect the quality of the products or services provided.

Authorized Supplier Representative

Signature: _____

Name: _____

Date: _____

Approving Organization Quality Manager

Signature: _____

Name: _____

Date: _____

Important Notes:

- This certification is valid only for the products or services and the period specified above.
- Continued approval requires ongoing compliance with organizational and regulatory requirements.
- Any changes in supplier details or process must be communicated immediately to the approving organization.

- Retention of supporting compliance documentation may be requested at any time for review or audit purpose.