



CQMS APPLICATION FORM

(To be filled by applicant authorised representative)

Construction Research Institute of Malaysia
Makmal Kerja Raya Malaysia (MKRM)
Lot 8, Seksyen 91, Jalan Chan Sow Lin
55200 Kuala Lumpur
T: +603 – 2779 1479 | F: +603 - 2779 1474

SECTION A – APPLICANT INFORMATION					
1.	Name Of Applicant				
2.	Address Of Applicant				
3.	Contractor Grade				
4.	Contractor Registration No.				
5.	Contractor License Validity				
6.	Is the company certified under the ISO 9001 Quality Management System?	<input type="checkbox"/>	Yes (If yes, please attach the certificate)		
		<input type="checkbox"/>	No		
		Certification Scope			
7.	Person In Charge and Contact Details	Name		Position	
		Phone No.		H/P No.	
		Fax No.		E-mail	
5.	*Please attach: a) Company Registration Certificate - SSM/ Registration of Business b) Certificate of ISO 9001 (If available) c) CIDB Registration/License				

SECTION B - DECLARATION BY APPLICANT	
I/We, hereby declare that all information given above are correct to my/our knowledge and agree to submit additional information (if required by CREAM) for the CQMS's certification based on CIS 29:2021.	
Signature	Company's Stamp
Name	
Designation	
Date	

KINDLY SUBMIT YOUR APPLICATION TO:	THIS APPLICANT WAS PROPOSED/RECOMMENDED BY*:
Makmal Kerja Raya Malaysia (MKRM) Lot 8, Seksyen 91, Jalan Chan Sow Lin 55200 Kuala Lumpur T: +603 2779 1479 F: +603 2779 1474 E: 1) syed@cream.my 2) farid.h@cream.my W: 1) www.cream.my	1. Individual/organisation name:
	2. Phone No:
	3. Email:
	4. Verify by (signature):
	5. Company:

*Fill in this section if applicable otherwise leave it blank