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| **APPLICATION FOR RE-INSPECTION****GLP COMPLIANCE MONITORING PROGRAMME** | C:\Users\bra\Documents\_M-Files park\Publications Templates\Jubilee logo - forms header.png |

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| **1 Applicant**Organisation/Division/Section, etc. |   |
| **2 Registration Number** |   |
| **3 Postal Address** Registered Organisation/Division/Section |   |
| **4 Physical Location** Street address of the primary location of the test facility to be inspected e.g. head office. |   |
| **4a Physical Location** Street address(es) of additional sites (if more than the one noted above) to be covered by the scope of registration. (*These could be listed separately and provided as an attachment.)* |   |
| **5 Telephone** | Telephone   |
| **6 Website address (URL)** |   |
| **7 Applicant Ownership Details** |   |
| **8 New Zealand Business Number (NZBN)** |   |
| **9 Legal Status** *(e.g. limited liability company, partnership, local authority, etc.)* |   |
| **10 Email Invoice Address** Email address to which invoices are to be sent |   |
| **11 Chief Executive Officer** | Name Job Title  |
| **12 Authorised Representative** Name and title of the person who will be IANZ’s primary point of contact for all matters relating to your Registration.  If address, phone and fax details are not as provided above, please provide them as an attachment. | Name  Job Title  Email  DDI Mobile  |
| **13 On-site Contact Person(s)**Include contact persons for each additional site (as an attachment) as appropriate. | Name Job Title Email  |
| **14 Commitment to meeting Registration requirements**We commit to continuing to meet the requirements for Registration as set out in the IANZ criteria documents and Procedures and Conditions of GLP Registration, including the following:We undertake to ensure that our operations, staff, facilities, and procedures will continue to fulfil the OECD Principles of Good Laboratory Practice during the conduct of non-clinical health and environmental safety within our scope of Registration.We undertake to immediately notify IANZ of any significant changes in operations, facilities, procedures or staff, which are likely to affect our Registration of the terms in which the Registration is expressed.We undertake to use the IANZ GLP Compliant Facility registration symbol only in a manner which is in compliance with IANZ requirements.We undertake to allow IANZ reasonable access to our operations, facilities, procedures and GLP studies for the purpose of inspection and subsequent review and re-inspection activity.We undertake to pay annual Registration fees and any reasonable costs relating to such inspections.We agree to supply any information needed for the inspection of the Registered test facility.

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| **Name** |   | **Signature** |   | **Date** |   |

 *(This authorisation shall be made by appropriate senior management)* |
| **13 Notes for Applicants****Criteria and Rules**Before lodging a formal Application for Reassessment, organisations should ensure that their systems, procedures and facilities continue to meet all IANZ accreditation criteria and conditions for accreditation.**Fees**Fees are revised from time to time by the Accreditation Council. Please consult the current fee schedule (available at [www.ianz.govt.nz](http://www.ianz.govt.nz) ). Fees quoted exclude GST.**GLP Registration Questionnaire**An Application for Re-Inspection should be accompanied by a completed GLP Registration Questionnaire and the supporting information requested therein. This information is used in the planning of your organisation's inspection, in the pre- on-site inspection activities and in the briefing of the assessment team.

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| **Please return this form and associated documentation to:** |
|  | **IANZ** |
| **Post** | Private Bag 28908RemueraAuckland 1541 |
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| **Physical** | Level 1, 626 Great South RoadEllerslieAuckland 1051 |
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|  |
| **Telephone** | (09) 525 6655 |
| **Facsimile** | (09) 525 2266 |
| **Email** | info@ianz.govt.nz  |

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