



**APPLICATION FOR PRE-ASSESSMENT
(Version 01.0)**

DETAILS OF THE ORGANIZATION

Organization name	
Organization address (central office)	
Country	
Physical address	
Postal address	
Primary language of operation	
Sectoral scope(s) 1-17 applied for	
Summary on the latest desk review outcome and general information	
Name of the entity representative	
Position	
Signature of the entity representative	
Date	

Document information

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