

OVERVIEW OF INITIAL SMI (Sustainable Manufacturing Initiative) ASSESSMENT PROCESS

- *CFPA or approved Auditor receives an application for certification from your organization*
- *CFPA or approved Auditor will contact you with follow-up questions, if necessary*
- *CFPA or approved Auditor will send you a cost proposal and service agreement*
- *Upon approval of the proposal, your organization will need to fax or mail the signed service agreement to your CFPA approved Auditor contact*
- *CFPA or approved Auditor hires an auditor and sends you an invoice for 100% of the proposal*
- *Your organization is required to prepare a documented control system (DCS) report, inclusive of a complete list of chemical CAS numbers and MSDS. The DCS must be submitted to CFPA approved Auditor for review prior to the assessment*
- *CFPA or Auditor will contact you to schedule a date for the assessment evaluation once your DCS has been received by CFPA approved Auditor*
- *Your organization will need to ensure key staff responsible for plant operations are available for an initial meeting for each department's operations and are well-informed of the SMI Principles and responsibilities prior to the assessment*
- *The assessment occurs; see details below*
- *Auditor prepares a report detailing the findings of the assessment; the report is sent to CFPA Director for review*
- *Upon CFPA review, the report is sent to your organization for review and approval*
- *Upon approval of the report by CFPA Director and your organization, a certification agreement is provided by CFPA approved Auditor*

- Upon receiving the signed agreement from your organization, an SMI Certificate of Authenticity and code are awarded. A formal Certificate of Authenticity is sent in the mail with plaque for display in the plant; your organization's name and certificate details appear on CFPA's website with a link to your site.

ON-SITE AUDIT ASSESSMENT

- Opening meeting with auditor for orientation and discussion of your organization's manufacturing control system, operational processes, and proposed list of products to be certified.

- Walk through facilities with the auditor reviewing details of how products are produced, discussing how your systems will accommodate materials and processes for SMI TCF/ PCF products, and conducting interviews with staff. All information gathered during interviews conducted, manufacturing processes, schematics, and records reviewed are under a formal Confidentiality Non Disclosure Agreement.

- Once all documents are reviewed and questions answered, findings will be reported. You may then request copies of any relevant documents that will be used for TCF/ PCF and SI product approval.

SMI TCF PCF SI CERTIFICATION DETAILS

- The certification agreement is for five year period.
- Access to CFPA SMI TCF – PCF trademarks occurs when your organization is certified .

ANNUAL AUDIT REQUIREMENTS

CFPA requires biennial auditing for certification to continue each year. Audits are performed to verify continued compliance with the standard, rank performance on sustainability index, review implementation of the systems in place including tracking/handling as well as to continue communications with your organization

- An audit cost proposal of \$3,500 plus customary travel expenses will be sent to your organization for approval prior to scheduling the audit evaluation



OUR PRIMARY PURPOSE IS TO PROMOTE SUSTAINABLE POLICIES, ADVANCED TECHNOLOGIES, AND PROGRAMS THROUGHOUT THE WORLD.

The Chlorine Free Products Association is a not-for-profit State of Illinois corporation whose primary purpose is to promote sustainable policies, chlorine free technologies, and programs throughout the world. As a member of the Chlorine Free Products Association, I will abide by the terms and policies of the Associations By-Laws and pay all applicable dues, fees, and assessments

CERTIFICATION APPLICATION PRODUCT LINES: _____

Applicant Information (please print or type):

Name _____

Title _____

Company/Organization _____

Street Address _____

City _____ State _____ Zip _____

Telephone Number () _____ Facsimile Number () _____

Web address _____ E-mail _____

Application fee: \$2,500.00

It is my understanding that the Application fee is required and will be included with our Application. Enclosed please find my check totaling \$ _____.

Signature and Title _____ **Date** _____

Make Check or Money Orders payable to the: **The Chlorine Free Products Association.**

Please send completed application to:
Chlorine Free Products Association
PO Box 7983
Algonquin, IL 60102.

If you have any questions, please contact info@chlorinefreeproducts.org or 847-658-6104