



***CERTIFICATE DRAFT COPY***  
***(Filled by client)***

**Company/Client Name:-**

**Scope:-**

**Address of Works:-**

**Address of Office:-**

**(Signature by Client)**

<b>Recommended by Audit team leader:</b>	
<b>Approved by decision maker:</b>	

**Note:- Any changes in Draft copy after issue of certificate may required additional review which may incur additional cost.**

**QACS**