



**THIRD PARTY INSPECTION  
ANQAS CERTIFICATION SDN. BHD.**

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Form no. : FI-03-11  
Issue no. : 1  
Amendment :  
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Issue date : 05/12/23

## AMENDMENT REQUEST FORM

1. INFORMATION	
Client Name	
Document	<input type="checkbox"/> Application Form <input type="checkbox"/> Inspection Report Application No. :                                      Inspection Report No. :
2. AMENDMENT (fill in requested changes only)	
Client Name and Address	
Inspection Items / Samples Description	
Inspection Location Name and Address (if applicable)	
Inspection Method/Procedures	
Others (if applicable, please specify)	
3. CUSTOMER DECLARATION	
I / We hereby declare that the information given herein is true and accurate, and I/We undertake to inform you of any changes therein, immediately.	
_____ (Signature) Name : Designation : Date :	<div style="border: 1px dashed black; width: 100%; height: 100%; text-align: center; vertical-align: middle;">Company Stamp</div>
For ANQAS Certification Use	
Received by: Date :	<input type="checkbox"/> Without payment <input type="checkbox"/> With payment                      Amount : _____
Remarks :	