



**Friend of the Sea**

## **Preliminary Information Form: FAD Free**

This information will be kept strictly confidential and it is needed to provide the quotation for the audit activity.

Company*	
Street*	
City*	
Postal Code*	
State	
Country*	
Website	
Tax nr/ VAT / IVA*	
Annual Revenue in EURO*	
Contact Person*:	
Contact Person Role:	
Contact Person tel number*:	
Contact Person email*:	
Company Requesting the Audit if different (name, address, VAT no.) * (This is the company that will own the certificate. Please provide name and address)	



## Friend of the Sea

Brand & description of products to be certified	
Species Scientific Name/s*:	
Production / distribution chain*	
Fishing Season	
Fishing Area/s*	
Directly Owned Vessels List* (Name, flag, reg #, f. method, ports). NA for not applicable	
Freezer/Over 50mt/Factory Vessels	
Third Party Vessels List	
Harbors/Ports where vessels normally unload*	
Shipowner Contact and Address	
Pre Processor Supplier Contact and Address	
Final Processor Supplier Contact and Address	
Broker / Trader supplier Contact and Address	



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OTHER COMMENTS: Please add up any comments or considerations you might deem to be useful for the good running of the audit (Description of the whole production chain, per each product from same origin, indicating the companies and locations that are part of the production chain, per each product from same origin.

Date \_\_\_\_\_