

质量管理体系认证证书

证书编号: XXXXXXXXXXXXXXX

XXXXXXXX 有限公司

注册地址: XX
办公地址: XX
统一社会信用代码: XXXXXXXXXXXXXXX

邮编: XXXXX
邮编: XXXXX

根据贵组织的申请, 本公司依据《质量管理体系要求》
(GB/T19001-2016/ISO9001:2015) 规定实施认证审核, 经评定符合要求,
特此发证。

质量管理体系覆盖范围为:

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

首次发证日期: XXXX 年 XX 月 XX 日

证书有效日期至: XXXX 年 XX 月 XX 日

第一次 监审	贴标处
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第二次 监审	贴标处
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第三次 监审	贴标处
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证书有效期内, 获证组织须每年至少接受一次监督审核并加贴合格标志, 证书方为有效。
本证书信息可在国家认证认可监督管理委员会官方网站: www.cnca.gov.cn 查询。
证书有效性以二维码扫描内容为准。



中标华远 (北京) 认证中心有限公司

地址: 北京市丰台区南四环西路188号十区22号楼4层04 邮编: 100070
电话: 010-53393099 邮箱: cschy03_2018@163.com
网址: <http://www.cshychina.com>

The Certificate Of Quality Management System

Certificate No.: XXXXXXXXXXXXXXXX

XXXXXXXXXXXXXX Co., Ltd.

Registered Address:XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Zip Code: XXXXXX

Office Address:XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Zip Code: XXXXXX

Uniform social credit code: XXXXXXXXXXXXXXXX

According to your organization's application,our company carried out audit and certification in accordance with the requirements for Quality Management System(GB/T19001-2016/ISO9001:2015), it accords with the Requirements through assessment.The scope of the certified QMS is:

XXXXXXXXXXXXXXXXXXXX

Initial date: XXX XX,XXXX

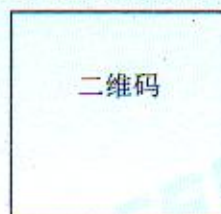
The certificate is valid until: XXX XX,XXXX

First S.A.	Labelling
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Second S.A.	Labelling
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Third S.A.	Labelling
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The certified organization must accept at least one surveillance audit annually and a qualified mark shall be attached onto the certificate, within validity period of the certificate, then the certificate can be maintained valid.
For more details of this certificate, please login CNCA' s website: www.cnca.gov.cn.
For the validity of the certificate,please scan the QR codes ride for accurate information.



ZHONG BIAO HUA YUAN(BEIJING)CERTIFICATION CENTER CO., LTD.

Address: 4th Floor, Building No. 22, 10th District, No. 188 South Sihuan West Road, Fengtai District, Beijing

P.C.:100070 Tel.:010-53393099 Mailbox: cshy03_2018@163.com

Website:<http://www.cshychina.com>

环境管理体系认证证书

证书编号: XXXXXXXXXXXXXXX

XXXXXXXX 有限公司

注册地址: XXX

邮编: XXXXXX

办公地址: XXX

邮编: XXXXXX

统一社会信用代码: XXXXXXXXXXXXXXX

根据贵组织的申请,本公司依据《环境管理体系 要求及使用指南》(GB/T24001-2016/ISO14001:2015) 规定实施
认证审核,经评定符合要求,特此发证。

环境管理体系覆盖范围为:

XXXXXXXXXXXXXXXXXXXX 及相关环境管理活动

首次发证日期: XXXX 年 XX 月 XX 日

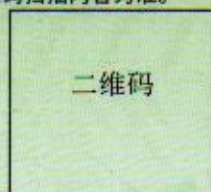
证书有效日期至: XXXX 年 XX 月 XX 日

第一次 监审	贴标处
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第二次 监审	贴标处
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第三次 监审	贴标处
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二维码



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电话:010-53393099 邮箱: cschy03_2018@163.com

网址: <http://www.cshychina.com>

The Certificate Of Environmental Management System

Certificate No.: XXXXXXXXXXXXXXXX

XXXXXXXXXXXXXXXXX Co., Ltd.

Registered Address:XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

Office Address:XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

Uniform social credit code: XXXXXXXXXXXXXXXXXXXX

Zip Code: XXXXXX

Zip Code: XXXXXX

According to your organization' s application,our company carried out audit and certification in accordance with the requirements for Environmental Management System(GB/T24001-2016/ISO14001:2015), it accords with the requirements through assessment.

The scope of the certified EMS is:

XXXXXXXXXXXXXXXXX and related environmental
management activities

Initial date: XXX XX,XXXX

The certificate is valid until: XXX XX,XXXX

First S.A.	Labelling
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Second S.A.	Labelling
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Third S.A.	Labelling
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P.C.:100070 Tel.:010-53393099 Mailbox: cshy03_2018@163.com

Website:<http://www.cshychina.com>

职业健康安全管理体系 认证证书

证书编号: XXXXXXXXXXXXXXX

XXXXXXXX 有限公司

注册地址: XX 邮编: XXXXXX
办公地址: XX 邮编: XXXXXX
统一社会信用代码: XXXXXXXXXXXXXXX

根据贵组织的申请, 本公司依据《职业健康安全管理体系 要求》
(GB/T45001-2020/ISO 45001:2018) 规定实施认证审核, 经评定符合要求,
特此发证。

职业健康安全管理体系覆盖范围为:

XXXXXXXXXXXXXXXXXXXX 及相关职业健康安
全管理活动

首次发证日期: XXXX 年 XX 月 XX 日

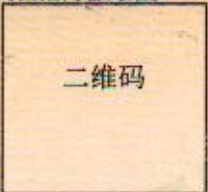
证书有效日期至: XXXX 年 XX 月 XX 日

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第二次 监审	贴标处
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本证书信息可在国家认证认可监督管理委员会官方网站: www.cnca.gov.cn 查询。
证书有效性以二维码扫描内容为准。



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电话: 010-53393099 邮箱: cshy03_2018@163.com
网址: <http://www.cshychina.com>

Occupational Health and Safety Management System Certificate

Certificate No.: XXXXXXXXXXXXXXXX

XXXXXXXXXXXXXX Co., Ltd.

Registered Address:XXXXXXXXXXXXXXXXXXXXXXXXXXXX
Office Address:XXXXXXXXXXXXXXXXXXXXXXXXXXXX
Uniform social credit code: XXXXXXXXXXXXXXXX

Zip Code: XXXXX
Zip Code: XXXXX

According to your organization’ s application,our company carried out audit and certification in accordance with the requirements for Occupational Health and Safety Management System (GB/T45001-2020/ISO 45001:2018), it accords With the Requirementsthrough assessment.
The scope of the certified OHSMS is:

XXXXXXXXXXXXXand related occupational health and safety management activities

Initial date: XXX XX,XXXX

The certificate is valid until: XXX XX,XXXX

First S.A.	Labelling	Second S.A.	Labelling	Third S.A.	Labelling
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