

# APPLICATION FORM

## Responsible Down Standard

### FOR CONTROL UNION CERTIFICATIONS (CUC)

<b>NAME OF COMPANY APPLYING AND LEGAL STATUS</b> (please use full name of company with e.g. Ltd., Inc, SAC, SA, SARL, BV)	<b>ADDRESS OF COMPANY</b> (Street, post code, town, province, country, P.O. Box)
<b>COMPANY'S CONTACT PERSON</b>	<b>TELEPHONE NUMBER/EMAIL ADDRESS</b>

*Please fill in the fields that will be under the scope of certification*

#### Farms

Please provide details of all farming units with animals over 3 days old.  
 Indicate if any of the farm units is using contracted farmers and how many.

Name and address	Activities (Breeding, slaughtering, transport, contract farming )	Nr. of animals per year	White or grey duck or goose

Are the farms in a contracted farm group? **Yes/No** (Please select what is applicable) If yes, please attach farm list including addresses.

#### Slaughterhouses

Name and address	Slaughtering period	Nr. of animals per year	White or grey duck or goose

### Small Farm Groups

Applicable for farms with less than 100 animals each

Collecting region	Nr. of collectors	Estimated number of farms from where collectors collect	White or grey duck or goose

### Parent farms (optional)

Please provide details of the parent farm units. This is an optional module.

Name and address	Activities (Farm, hatchery)	Nr. of animals per year	White or grey duck or goose

### Down processors

(Large collectors, down pre-processor, down processors, trader, warehouses)

Name and address	Type	Activities (washing, sorting, etc.)	Volume of down/year	White or grey duck or goose down

### Factories

(Assembly factory, garment factory, warehouse etc.)

Name and address	Activities (trading, filling, etc.)	Product (garments, home textile, outdoors)	Content (RDS down type and %, synthetic material %, etc.)

### POST-PRODUCTION

#### Brand Certification and Exemptions

(CCS: Content Claim Standard, BNC: Brand Network Certification, 100% CM: 100% Claimed Materials, BCL: Batch Code Label)

Name	Address	Specifications (parent company, brand)	RDS-CCS v2.0 module (CCS, BNC, 100% CM or BCL)

#### Distribution Centers (DC)

(Brand DC, contracted DC, wholesaler, licensee, etc.)

Name	Address	Type	Activities (trading, storage, re-packing, etc.)

#### Supply chain

(Number of physical transfers (>)) of product between manufacturer and retailer while under same ownership.)

<b>Describe the supply chain(s) between the manufacturer and retailer of your branded products.</b> (for example, a product could go from a sewing factory to your DC, to a wholesaler)	
1 (Mfg. direct > retailer)	
2 (e.g. Mfg. > brand DC > retailer)	
3+ (e.g. Mfg. > brand DC > trader > retailer)	

Are one or more of the above locations contracted before to be audited and certified against RDS? If yes, please state in below table:

Name and address	Activities	Certification number and status (certified, in progress)

***Attach extra sheets if needed***

Undersigned declares to have completed this Application Form truthfully. Please send the completed form by email to your Control Union contact person. We will revert with a non-obligatory offer.

<b>NAME COMPANY</b>
<b>LEGAL REPRESENTATIVE</b> (The person of the company, accepted by the Chamber of Commerce registration as assignment authorized.)
<b>DATE &amp; SIGNATURE</b>