

GS1 Malta Application Form

Company Details:

Company Name: _____

Company Reg. No.: C-_____

VAT Reg. No: _____

Registered Address: _____

Tel. No: _____ Mobile: _____

Email address: _____

Website: _____

Name of director: _____

Director's ID no: _____

Number of staff: _____

Product: Goods Services both (to choose one)

Approximate yearly turnover: _____

Contact & User Details:

Contact name/s for Activate Service representative(barCode issuance tool):

Email addresses(Login):

(The above will be used for GS1 Activate User, if more than one user is required, kindly list details for second user)

Contact name & e-mail for invoicing: _____

Contact name & e-mail for AGM attendance: _____

Subscription

Select products you wish to subscribe for:

- GTIN Prefix (Use of barcoding)
- GLN (Global Location Number)
- EPC (Electronic Product Code)
- GDSN (Global Data Synchronisation)
- UPC
- Partners Scheme
- (Solution Providers, Consultancy and Advisory scheme)
- *Supermarket Scheme (SS)

* SS Prefix is only to be sold in the applicant premises/supermarket and under his Brand name/ownership products.

Category of Membership:

- | | |
|--|--|
| Elite <input type="checkbox"/> | Elite + <input type="checkbox"/> |
| Category A <input type="checkbox"/> | Additional A Membership (AAM) <input type="checkbox"/> |
| Category B <input type="checkbox"/> | Additional B Membership (ABM) <input type="checkbox"/> |
| Category B+ <input type="checkbox"/> | SSCC <input type="checkbox"/> |
| 1 barcode <input type="checkbox"/> | GIAI <input type="checkbox"/> |
| * Online Product Identifier <input type="checkbox"/> | GRAI <input type="checkbox"/> |
| GLN <input type="checkbox"/> | Customized Package <input type="checkbox"/> |
| Category C <input type="checkbox"/> | Partners Scheme <input type="checkbox"/> |

Type of Standard Identifiers required:

- GTIN 8
- GTIN 13
- GTIN14
- GLN
- UPC
- GS1 128
- UDI
- SSCC
- GMN
- LEI (LOU)
- Variable
- Variable Prefix by Price
- Variable Prefix by weight

*GS1 Malta Digital BarCodes cannot be printed and used on physical products that is sold in retailers but only for e-tailers.

Nature of Business:

- | | | | |
|----------------------|--------------------------|--------------------|--------------------------|
| Manufacturing | <input type="checkbox"/> | Retailer | <input type="checkbox"/> |
| Importing | <input type="checkbox"/> | Wholesale | <input type="checkbox"/> |
| Hardware Supplier | <input type="checkbox"/> | Publishing | <input type="checkbox"/> |
| Exporting | <input type="checkbox"/> | Software Supplier | <input type="checkbox"/> |
| Distribution | <input type="checkbox"/> | Publisher | <input type="checkbox"/> |
| Trader | <input type="checkbox"/> | Supermarket | <input type="checkbox"/> |
| Coops | <input type="checkbox"/> | Solution Providers | <input type="checkbox"/> |
| Consultancy/Advisory | <input type="checkbox"/> | | |
| Other | _____ | | |

Nature of product:

- | | | | |
|--------------------------------|--------------------------|-------------------------------|--------------------------|
| Food | <input type="checkbox"/> | Beverages | <input type="checkbox"/> |
| Sweets | <input type="checkbox"/> | Chemicals/Detergents | <input type="checkbox"/> |
| Textiles & Garments | <input type="checkbox"/> | Tobacco | <input type="checkbox"/> |
| Plastic/Metal | <input type="checkbox"/> | Machinery & Equipment | <input type="checkbox"/> |
| Newspaper/Publications | <input type="checkbox"/> | Bank / Financial Institutions | <input type="checkbox"/> |
| Electrical Goods & Electronics | <input type="checkbox"/> | Music, CD, & DVD | <input type="checkbox"/> |
| IT & Telecommunications | <input type="checkbox"/> | Medical Devices | <input type="checkbox"/> |
| Pharmaceuticals | <input type="checkbox"/> | Stationery/Toys | <input type="checkbox"/> |
| Agriculture | <input type="checkbox"/> | Fishing | <input type="checkbox"/> |
| Gifts /Candles | <input type="checkbox"/> | Jewellery | <input type="checkbox"/> |
| Cosmetics/Personal Care | <input type="checkbox"/> | Other | <input type="checkbox"/> |
| Packaging | <input type="checkbox"/> | Please indicate: _____ | |

Kindly declare if the Global Company Prefix will be used for UDI purpose.

- comply with US FDA UDI Rule Export in Europe
- Export to any other country If yes please indicate: _____

Declaration:

I, the undersigned, holder of Identity Card Number: _____
and residing at _____

acting on behalf of the above-mentioned company as duly authorised, declare that the information given above is correct and bind myself to inform GS1 Malta of any changes relating to the said information. I understand and accept that GS1 Malta shall, in addition and without prejudice to the contents of the GS1 Malta Statute, be entitled to terminate all services to the company I represent, should I fail to inform them of any changes to the information contained on this application with twenty (20) days from their occurrence. I further declare that I am authorised to bind the company in accordance with its Memorandum & Articles of Association / Board Resolution and bind myself to abide with the Statute and Terms and Conditions of GS1 Malta as well as any amendments thereto that may occur from time-to-time following approval at a general meeting of the same GS1 Malta.

I consent to GS1 Malta keeping my data for the purpose of UDI Declaration and I understand it will be handled in accordance with GS1 Malta Privacy Policy

Signature

Capacity in which declarant is signing

Date