
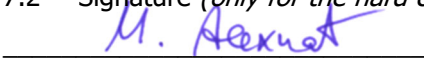
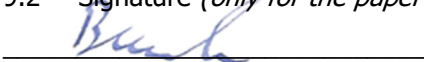


1. Name and address of the certifying organisation 1.1 Name: GZQ GmbH 1.2 Street: Sulzbachtalstraße 131 1.3 Country: Germany Federal province: Saarland Postal code: 66125 Place: Saarbrücken		2. 
3. Particulars of the certificate 3.1 Certificate number (to be assigned by the certifying organisation): <u>A-001405</u> 3.2 First-time certification <input type="checkbox"/> or follow-up certification <input checked="" type="checkbox"/> 3.3 Reference number (if issued by the authorities): <u>ZZKT001001627007</u> 3.4 The certificate encloses <u>1</u> appendix(es). 3.5 <input type="checkbox"/> The certificate is issued only for a specific operating unit (see appendix(es) _____) 3.6 <input type="checkbox"/> The certificate is issued only for specific types of waste, activities or locations (see appendix(es) _____). 3.7. The certificate is valid till <u>10.10.2026</u>		
4. Name and address of the waste management facility (Head Office): 4.1 Name: <u>OSR GmbH & Co. KG</u> 4.2 Street: <u>Gartenstraße 105</u> 4.3 Country: <u>DE</u> Federal province: <u>BW</u> Postal code: <u>73430</u> Place: <u>Aalen</u> 4.4 Entry in the Commercial Register, Register of Associations or Register of Cooperatives (if an entry has been made): Registration number (HRA, HRB etc.): <u>HRA 725461</u> Registration Court: <u>AG Ulm</u>		
5. The facility is entitled, with regard to the locations, activities and types of waste mentioned in the appendix to this certificate, to use the monitoring symbol of the above-mentioned technical monitoring organisation or waste management association and the title <p style="text-align: center;">"Waste Management Facility"</p> as per § 56 of the Waste Management and Product Recycling Act in conjunction with the Waste Management Facility		
6. Inspection date: <u>09.04.2025</u>	7. Assessor, who carried out the inspection: 7.1 Name: <u>Alexnat</u> First name: <u>Marcel</u> 7.2 Signature (only for the hard copy): 	
8. Date of issue: <u>17.04.2025</u>	9. Manager of the certifying organisation: 9.1 Name: Herr Busch First name: Martin 9.2 Signature (only for the paper version): 	

Appendix 1 to the GZQ-certificate with the number ZZKT001001627006 / A-001405

Name of the waste management facility OSR GmbH & Co. KG

1. Location (in case of multiple locations, please fill out one appendix for each location):

- 1.1 Name of the location: OSR GmbH & Co. KG
 1.2 Street: Gartenstraße 105
 1.3. Country: DE Federal province: BW Postal code: 73430 Place: Aalen

2. Certified activity

- In case of multiple activities, please fill out a separate appendix for each activity, if it does not concern the same types of waste.
- Please always tick the treatment activity along with the recycling and/ or disposal activity.
- Please always tick the storage activity along with the recycling and/ or disposal activity.

- | | |
|----------------------------------------------------------|----------------------------------------------------------------------------------------|
| 2.1 Collection <input type="checkbox"/> | ID No. as per § 28 of the NachwV (Directive on Proof of Recycling and Disposal): _____ |
| 2.1.1 across Germany only <input type="checkbox"/> | <input type="checkbox"/> |
| 2.1.2 worldwide <input type="checkbox"/> | <input type="checkbox"/> |
| 2.2 Transport <input type="checkbox"/> | ID No. as per § 28 of the NachwV: _____ |
| 2.2.1 across Germany only <input type="checkbox"/> | <input type="checkbox"/> |
| 2.2.2 worldwide <input type="checkbox"/> | <input type="checkbox"/> |
| 2.3 Storage <input type="checkbox"/> | ID No. as per § 28 of the NachwV: _____ |
| 2.3.1 for processing (No. 2.5) <input type="checkbox"/> | <input type="checkbox"/> |
| 2.3.2 for disposal (No. 2.6) <input type="checkbox"/> | <input type="checkbox"/> |
| 2.4 Treatment <input type="checkbox"/> | ID No. as per § 28 of the NachwV: _____ |
| 2.4.1 for processing (No. 2.5) <input type="checkbox"/> | <input type="checkbox"/> |
| 2.4.2 for disposal (No. 2.6) <input type="checkbox"/> | <input type="checkbox"/> |
| 2.5 Processing <input type="checkbox"/> | ID No. as per § 28 of the NachwV: _____ |
| <input type="checkbox"/> preliminary | <input type="checkbox"/> final |
| 2.5.1 Preparation for recycling <input type="checkbox"/> | <input type="checkbox"/> |
| 2.5.2 Recycling <input type="checkbox"/> | <input type="checkbox"/> |
| 2.5.3 Other processing <input type="checkbox"/> | <input type="checkbox"/> |
| 2.6 Disposal <input type="checkbox"/> | ID No. as per § 28 of the NachwV: _____ |
| <input type="checkbox"/> preliminary | <input type="checkbox"/> final |
| 2.7 Action <input checked="" type="checkbox"/> | ID No. as per § 28 of the NachwV: <u>H134005748</u> |
| 2.7.1 across Germany only <input type="checkbox"/> | <input type="checkbox"/> |
| 2.7.2 worldwide <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2.8 Swap <input checked="" type="checkbox"/> | ID No. as per § 28 of the NachwV: <u>H134005748</u> |
| 2.8.1 across Germany only <input type="checkbox"/> | <input type="checkbox"/> |
| 2.8.2 worldwide <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |

3. Description of the waste management activity, particularly the facility (in case of multiple technical facilities, please fill out a separate appendix for each facility):

Trading and brokering of non-hazardous waste

4. Type of waste as per the annex to the Ordinance on the List of Wastes (AVV):

- 4.1 all types of waste
 4.2 all non-hazardous waste
 4.3 all hazardous waste
 4.4 specific types of waste

Waste codes (if required, enter with "**")	Waste description	Restrictions/ Remarks
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