|  |  |  |
| --- | --- | --- |
|  | | |
| **Titolo/*Title*** |  | **Application for Accreditation for Certification Bodies** |
| **Sigla/*Reference*** |  | **DA-01** |
| **Revisione/*Revision*** |  | **03** |
| **Data/*Date*** |  | **02-01-2018** |

|  |
| --- |
|  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Preparation** |  | **Approval** |  | **Authorization** |  | **Application date** |
| Quality Manager |  | The Director of Department |  | The General Director |  | 02-03-2018 |

|  |  |  |
| --- | --- | --- |
| 🞏 ACCREDITATION | 🞏 EXTENSION | 🞏 REQUEST FOR PRELIMINARY ASSESSMENT |
| 🞏 TRANSFER OF ACCREDITATION | | 🞏 FLEXIBLE SCOPE |

# APPLICATION – CAB PROVIDNG CERTIFICATION OF:

* QMS
* EMS
* EMAS
* EnMS
* OHSAS
* ISMS
* ITX
* FSM
* Other management systems (specify:…………….................................)
* Product certification
* Personnel certification
* Assessment and validation of environmental product declaration (EPD)

# CATEGORY/SCHEME OF ACCREDITATION

## TYPE OF ACTIVITY OF CONFORMITY ASSESSMENT AND NORMATIVE REFERENCES

Specify the conformity assessment activities for which the accreditation is sought (QMS, EMS certification, other management systems, product, personnel) and the related normative references applicable to the CAB.

...............................................................................................................................................................................................................

...............................................................................................................................................................................................................

## REFERENCE STANDARDS FOR THE CLIENTS OF THE BODY (REFERENCE STANDARDS APPLICABLE TO THE CONFORMITY ASSESSMENT ACTIVITIES UNDER ACCREDITATION)

*(for product certification, provide the most detailed possible list of reference standards) (the references may be listed in an attachment)*

|  |  |
| --- | --- |
| Scheme of accreditation | Reference standards |
| ....................................................................................................  .................................................................................................... | .................................................................................................  ................................................................................................. |

## ACCREDITATION SECTORS (SCOPE OF ACCREDITATION)

For Management Systems Certification

(IAF sectors (or clusters):

...............................................................................................................................................................................................................

...............................................................................................................................................................................................................

...............................................................................................................................................................................................................

...............................................................................................................................................................................................................

*(numerical or descriptive references may be used); (if necessary, the references may be listed in an attachment)*

For EMAS Certification

NACE Code

...............................................................................................................................................................................................................

...............................................................................................................................................................................................................

...............................................................................................................................................................................................................

...............................................................................................................................................................................................................

*(Numerical or descriptive references may be used); (if necessary, the references may be given in an attachment)*

For EnMS Certification

Technical areas

❑ medium light industry ❑ heavy industry ❑ buildings ❑ building complexes ❑ transport

❑ mining industry ❑ agriculture ❑ energy supply

For Product certification

Products or family of products

...............................................................................................................................................................................................................

...............................................................................................................................................................................................................

...............................................................................................................................................................................................................

...............................................................................................................................................................................................................

*(a clear and adequate description shall be provided; details may be listed in an attachment)*

For Personnel certification

Professional persons

...............................................................................................................................................................................................................

...............................................................................................................................................................................................................

...............................................................................................................................................................................................................

...............................................................................................................................................................................................................

*(a clear and adequate description shall be provided; details may be listed in an attachment)*

For Food Safety Management Systems Certification

Categories:

...............................................................................................................................................................................................................

...............................................................................................................................................................................................................

*(a clear and adequate description shall be provided; details may be listed in an attachment)*

## FLEXIBLE SCOPE OF ACCREDITATION

Scope of application (e.g. typology, family of products, personnel) for which the flexible scope is sought.

...............................................................................................................................................................................................................

...............................................................................................................................................................................................................

...............................................................................................................................................................................................................

...............................................................................................................................................................................................................

*(a clear and adequate description shall be provided, including motivations and evidence ensuring the similarity of the elements contained in the flexible scope for each typology / identified family).*

Attachment n………… (obligatory)

# PERSONNEL OF THE BODY

## TOTAL NUMBER OF EXTERNAL COLLABORATORS USED FOR THE ABOVE ASSESSMENT ACTIVITIES:

* Auditors: ..........................
* Experts: ..........................
* Others: ..........................

## ORGANIZATION CHART

An organization chart shall be attached (and/or related documents), that allows a clear identification of the applicant CAB, in terms of hierarchical relations, responsibilities, mandates and tasks, starting from the management and going down through the whole staff structure.

The chart shall clearly show the relations between the persons responsible for the audit activities, the CAB’s management and the persons responsible for decisions regarding the issue of declarations of conformity or similar attestations.

These documents shall also contain the names and qualifications of the persons involved in the evaluation process and, if applicable, of the organizations they represent (when external to the applicant CAB).

Attachment n: .......................... (obligatory)

## PERSONNEL RESPONSIBLE FOR MANAGEMENT OF THE FLEXIBLE SCOPE

A document shall be attached describing the competences and responsibilities (containing also the names and qualifications of persons involved in the management of the flexible scope) of personnel who fix the typology and responsibilities for the management of the controlled list of all the elements covered by the flexible scope.

Attachment n: .......................... (obligatory)

# EVALUATION AND DECISION-MAKING ACTIVITIES REGARDING CERTIFICATION

### The personnel (single person or unit) responsible for the final decision on the granting of conformity declaration documents and the relative CVs.

Attachment n: .......................... (obligatory)

### The membership of the body (Committee or mechanism for the safeguarding of impartiality) representative of the interested parties shall be described, specifying, for each member, the party represented.

Attachment n: .......................... (obligatory)

### Personnel holding veto power regarding the issue of certification for the schemes EN 9100, EN 9110, and EN 9120 and the relative CVs.

Attachment n: .......................... (obligatory, where applicable)

## SUBCONTRACTING - TESTING AND CALIBRATION LABORATORIES

### List of subcontracted organizations

performing conformity assessments included within the scope of accreditation, specifying the name and addresses, and indicating if they are accredited or not. For accredited Bodies, indicate the name of the Accreditation Body, number and date of the issuance of the accreditation document and the scope of accreditation (in summary form).

Attachment n: .......................... (obligatory)

### For every requested category, scheme or sector of accreditation

for which accreditation is sought, specify, as applicable, the name and address of the laboratories used for the conformity assessment activities, indicating if they are internal or external to the applicant CAB and the relevant accreditation status.

For accredited laboratories, indicate the name of the accreditation body, the number and date of the accreditation certificate and the scope of accreditation (accredited tests and calibrations).

Attachment n: .......................... (obligatory)

### Attach the procedure describing the criteria and modalities for qualification and recognition of the laboratories, including the contractual relations.

Attachment n: .......................... (obligatory)

# DOCUMENTS TO BE ATTACHED TO THE APPLICATION

* the list of attachments;
* the obligatory attachments as required by the above points;
* the statute or equivalent document *(required only in cases of accreditation. If the CAB is already accredited for other schemes indicate the last issue loaded on the ACCREDIA website – area for accredited bodies);*
* last available balance sheet or equivalent documen*ts (necessary only during the accreditation period)*;
* insurance policy *(necessary only during the accreditation period)*;
* procedure, regulation or equivalent document for the review of the application for certification, the decision-making Technical Committee, the Impartiality Committee *(to be attached only in cases of accreditation. If the CAB is already accredited for other schemes, indicate the last issue loaded on the ACCREDIA website – area for accredited bodies);*
* controlled list of auditors, exam commissioners and experts and related Curricula Vitae inclusive of certificates or other attestations of qualification showing the competences related to the present application;
* for the PRS scheme, the list of exam centres;
* qualification procedure of auditors, exam commissioners and experts or equivalent documents to be *(attached both in cases of accreditation and also extension. If the CASB is already accredited for other schemes, indicate the last issue loaded on the ACCREDIA website – area for accredited bodies);*
* procedure for the management of the flexible scope *(this shall describe the operative modalities used to verify the correct application of the flexible scope);*
* controlled list of products/personnel object of the flexible scope. *This shall include, at least:*
* references to the standard and requirements for accreditation;
* the typology / product family, personnel;
* the product / service, professional person;
* the standard (or normative document) of certification / inspection, with identifying code,
* year / revision;
* reference to the document containing the requirements for the issuance of certification of product / personnel, complete with identifying code, year / revision;
* the date of inclusion by the CAB of the element in question within the flexible scope.
* management system manual (it may be drafted with different criteria and shall include the reference to the above mentioned procedures) – (to be attached only in cases of accreditation. If the CAB is already accredited for other schemes, indicate the last issue loaded on the ACCREDIA website – area for accredited bodies);
* list of procedures, operative instructions and other documents applicable to the CAB’s activities. (attach only in cases of accreditation);
* General Regulations for the management of the assessment activities (e.g. regulations for QMS, EMS, PRD, PRS certification etc.). (to be attached in cases of accreditation and extension. If the body is already accredited for other schemes, indicate the last issue loaded on the ACCREDIA website – area for accredited bodies);
* regulation for use of the Mark or equivalent documents (to be attached only in cases of accreditation and extension. If the body is already accredited for other schemes, indicate the last issue loaded on the ACCREDIA website – area for accredited bodies);
* copy of the forms used for the contractual relationships between the CAB and the clients (e.g. informative questionnaire, quotation, etc.); (to be attached in cases of accreditation and extension);
* example copy of the conformity attestations issued by the CAB with relative attachments (e.g. QMS, EMS, PRD, PRS certification inspection reports etc.). (to be attached both in cases of accreditation and extension);
* list of entities/persons in possession of declarations of conformity issued by the CAB to its clients, limited to assessment activities requiring accreditation (e.g. lists of certificates of QMS, EMS, PRD, PRS etc. For each conformity attestation it is necessary to indicate the name, address, scope of assessment, sector etc. as applicable. Indicate also the date of first issue and of expiry); (to be attached in cases of accreditation and extension for certification of PRD/service/PRS);
* list of audits of organizations, limited to assessment activities requiring accreditation (it is necessary to identify the name, address, scope of assessment, sector, type of audit – e.g. Stage 1 or 2, surveillance, renewal etc., the date of the audits, the CAB’s audit team (to be attached both for accreditation and for extension of accreditation for MS certifications);
* for the PRS scheme compliance with point 8 of ISO/IEC 17024:2012 and § 2.2.4 of Regulation RG-01-02; *(to be attached both in cases of accreditation and of extension);*
* for requests for new conformity assessment schemes drawn up by the applicant body (the scheme owner) in compliance with the applicable rules; providing all the documents required by PG-13-01 and the requirements of RG-19.

Note 1: *in cases of a request for a preliminary assessment it is necessary to send the same documentation as for applications for accreditation.*

Note 2: *in cases of a request for the transfer of accreditation from another AB signatory of the EA / IAF MLA agreements, it is necessary to present the application for accreditation using the modalities described in § 1.2, together with all the necessary documents, the last assessment report of the previous AB and the valid accreditation certificate.*

*In cases of a transfer of accreditation from an AB which is not signatory of the EA / IAF MLA agreements, all the regulations and procedures for accreditation are applicable.*

|  |  |  |
| --- | --- | --- |
| Rev.: | \_\_\_ | Data: \_\_ /\_\_ /\_\_\_\_ |

|  |  |
| --- | --- |
|  | **Timbro del CAB**  **Nominativo e firma**  **del Legale Rappresentante**[[1]](#footnote-1) |

1. Legale Rappresentate o suo delegato. [↑](#footnote-ref-1)