

Title	<i>Application for accreditation for Certification Bodies</i>
Reference	DA-01
Revision	04
Date	28-05-2020

NOTE: The present document represents the English version of document under reference at the specified revision. In case of conflict, the Italian version will prevail. To identify the revised parts reference must be made to version in Italian language only.

Preparation	Approval	Authorization	Application date
Assistant Management System Head Officer	The Director of Department	The General Director	15-06-2020

<input type="checkbox"/> ACCREDITATION	<input type="checkbox"/> EXTENSION	<input type="checkbox"/> REQUEST FOR PRELIMINARY ASSESSMENT
<input type="checkbox"/> TRANSFER OF ACCREDITATION		

1. ACRONYM AND NAME OF THE CAB

(Write the name of the CAB as registered at the Chamber of Commerce or other document identifying the CAB’s legal identity).

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2. APPLICATION – CAB PROVIDING CERTIFICATION OF:

- QMS
- EMS
- EMAS
- EnMS
- OH&SM
- ISMS
- ITSMS
- FSMS
- Other management systems (e.g. BCMS, ABMS etc.)
(specify:.....)
- Product
- Persons
- Verification and validation of environmental product declaration (EPD)

3. CATEGORY/SCHEME OF ACCREDITATION

3.1. TYPE OF CONFORMITY ASSESSMENT ACTIVITY CONCERNING THIS APPLICATION AND NORMATIVE REFERENCES

ACCREDITATION SCHEME	NORMATIVE REFERENCES APPLICABLE TO THE CAB (specify the edition of the standard/s)	NORMATIVE REFERENCES APPLICABLE TO THE CAB's CLIENTS (specify the edition of the standard/s) ¹

3.2. SECTOR/CATEGORY/TECHNICAL AREA etc. OF ACCREDITATION (SCOPE OF THE ACCREDITATION)

➤ For management system certification (e.g. QMS, EMS, OH&S, ISMS ITSM etc.)
(e.g. IAF sector or cluster as specified in the document IAF MD 17, BCMS categories etc.)

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

➤ For EMAS Certification
NACE Codes

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

¹ For product certification provide a list of normative references in as much detail as possible. The references may be given in an attachment).

➤ For EnMS certification

Technical areas

<input type="checkbox"/> Medium-light industry	<input type="checkbox"/> Heavy industry	<input type="checkbox"/> Buildings	<input type="checkbox"/> Building complexes
<input type="checkbox"/> Transport	<input type="checkbox"/> Mineral industries	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Energy supply

➤ For PRD certification

Products or family of products

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

➤ For PRS certification

Professional persons

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

➤ For FSM certification

Cluster	Category	Sub-category

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

4. CAB'S PERSONNEL

4.1. TOTAL NUMBER OF INTERNAL AND EXTERNAL COLLABORATORS USED FOR THE AUDIT ACTIVITIES CONCERNING THIS APPLICATION:

	Internal	External
Auditors/assessors		
Experts		
Examiners		

It is necessary to send a controlled list of personnel with relative CVs inclusive of certificates or other attestations of qualification showing the competences related to the present application. The document shall include the qualification forms.

Attachment number:.....(obligatory)

4.2. ORGANIZATION CHART

An organization chart shall be attached (and/or related documents) enabling clear identification of the applicant CAB, in terms of hierarchical relationships (authority), responsibilities, mandates and tasks, functions and tasks, starting with the Governing Bodies and going down to the entire structure.

The organization chart shall clearly show the relationships between the personnel responsible for the audit activities, the CAB's management and the Body (or persons) responsible for decisions regarding the issuance of certificates of conformity or similar.

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

Attachment number:.....(obligatory)

5. EVALUATION AND DECISION-MAKING ACTIVITIES REGARDING CERTIFICATION

5.1. THE PERSONNEL (SINGLE PERSON OR UNIT) RESPONSIBLE FOR THE FINAL DECISION ON THE GRANTING OF CONFORMITY DECLARATION DOCUMENTS AND THE RELATIVE CVS. It is also necessary to send the procedure/regulation or equivalent document setting out the functioning of the technical committee for decisions.

Attachment number:.....(obligatory)

5.2. 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. It is also necessary to send the procedure/regulation or equivalent document setting out the functioning of the committee for safeguarding impartiality or other mechanism with this task.

Attachment number:.....(obligatory)

5.3. PERSONNEL HOLDING VETO POWER REGARDING THE ISSUANCE OF CERTIFICATION FOR THE SCHEMES EN 9100, EN 9110, AND EN 9120 AND THE RELATIVE CVS.

Attachment number (obligatory)

5.4. OUTSOURCING/SUBCONTRACTING

5.4.1. List of subcontracted organizations

(It is necessary to send the controlled list of organizations performing conformity assessment activities included within the scope of requested accreditation, specifying the organization's name, the typology (exam center, auditing company etc.) and addresses, and stating if they are accredited or not. For accredited CABs, state the name of the Accreditation Body, number and date of the issuance of the accreditation document and the scope of accreditation (in summary form).

5.4.2. Attach the procedure describing the criteria and modalities of qualification and recognition of the organizations (exam center, auditing company etc.) including the contractual relationships.

Attachment number:.....(obligatory)

5.4.3. List of subcontracted testing and calibration laboratories

For every accreditation category, scheme and sector for which is requested the accreditation, specify, in the applicable terms, the name and address of the laboratories used for conformity assessment activities, stating whether internal or external to the applicant CAB and the relative accreditation status.

For the accredited laboratories, state the name of the Accreditation Body, the number and the date of the issuance of the certificate of accreditation and also the scope of accreditation (accredited tests and calibrations).

Attachment number:.....(obligatory)

5.4.4. Attach the procedure which sets out the criteria and modalities for the qualification and recognition of laboratories, including the contractual relationships.

Attachment number:.....(obligatory)

6. OTHER DOCUMENTS TO BE ATTACHED TO THE APPLICATION (in addition to the obligatory attachments as required above)

TYPE OF ATTACHMENT	Write the number of the attachment or other supporting information to identify the documents already available on the ACCREDIA website – Area for accredited CABs
The list of attachments	
The statute or equivalent document <i>(required only in cases of accreditation. If the CAB is already accredited for other schemes indicate the last edition uploaded on the ACCREDIA website – area for accredited CABs)</i>	
The last available balance sheet or equivalent documents <i>(required only in cases of accreditation.)</i>	
Registered Chamber of Commerce profile <i>(required only in cases of accreditation)</i>	
Insurance policy <i>(required only in cases of accreditation)</i>	
The list of procedures, operative instructions and other documents applicable to the CAB's activities. <i>(required only in cases of accreditation)</i>	
The management system manual <i>(it may be drawn up using different criteria and it shall include the references to the above-mentioned procedures) – (to be attached only in cases of accreditation. If the CAB is already accredited for other schemes state the last edition uploaded on the ACCREDIA website – area for accredited CABs)</i>	
The procedure / regulation or equivalent operating document of the Certification Application Review <i>(required only in cases of accreditation If the CAB is already accredited for other schemes, state the last edition uploaded on the ACCREDIA website – area for accredited CABs)</i>	

<p>The qualification procedure of auditors, examiners and experts or equivalent documents <i>(to be attached both in cases of accreditation and also extension. If the CAB is already accredited for other schemes, state the last issue uploaded on the ACCREDIA website – area for accredited CABs)</i></p>	
<p>General Regulations for the management of the assessment activities (e.g.regulations for QMS, EMS, PRD, PRS certification etc.). <i>(to be attached in cases both of accreditation and of extension. If the CAB is already accredited for other schemes, state the last edition uploaded on the ACCREDIA website – area for accredited CABs)</i></p>	
<p>The regulation for use of the Mark or equivalent documents <i>(required only in cases of accreditation. If the body is already accredited for other schemes, state the last issue uploaded on the ACCREDIA website – area for accredited bodies)</i></p>	
<p>A copy of the forms used for defining the contractual relationships between the CAB and the clients (e.g. informative questionnaire, a model of the offer, etc.); <i>(to be attached both in cases of accreditation and extension)</i></p>	
<p>An example copy of the conformity attestations issued by the CAB with relative attachments (e.g. QMS, EMS, PRD, PRS certification inspection reports etc.). <i>(to be attached both in cases of accreditation and extension)</i></p>	
<p>A list of the organizations or persons in possession of declarations of conformity issued by the CAB (CAB’s clients), limited to assessment activities for which accreditation is requested (e.g. lists of certificates of PRD, PRS etc.. For each conformity attestation it is necessary to indicate the name, address, scope of assessment, sector etc. as applicable. It shall also indicate the date of first issue and of expiry). <i>(to be attached both in cases of accreditation and extension for certification of PRD/service and PRS)</i></p>	
<p>A list of audits at organizations, limited to audit activities for which accreditation is requested (it is necessary to identify the name, address, audit’s scope, sector, type of audit – e.g. Stage 1 or 2 audit, surveillance, renewal etc., <u>the date and/or period of the audits already performed or to be planned</u> and, the CAB’s audit team <i>(to be attached, where applicable, both for accreditation and for extension of accreditation for management system certifications)</i></p>	

For the FSM scheme, in compliance with par. 7.7.2.1 f) of the document IAF MD 16, in order for the CAB to present the application for accreditation or extension it must demonstrate that it has at least one active or potential application for accreditation in the category for which accreditation is requested. If the certification has already been issued it is sufficient to send the certificate and, in cases of a file under management, it is necessary to send the certification contract.	
For the Persons scheme, a report that satisfies point 8 of ISO/IEC 17024:2012 and par. 2.2.4 of ACCREDIA Regulation RG-01-02; <i>(to be attached both in cases of accreditation and of extension)</i>	
For requests for new conformity assessment schemes drawn up by the applicant body (the Scheme Owner) in compliance with the applicable rules, it is necessary to complete also the application DR-02 providing all the documents required by ACCREDIA procedure PG-13-01 and the requirements of ACCREDIA Regulation 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 Accreditation Body signatory of the EA/IAF MLA, it is necessary to send the application for accreditation using the modalities described in § 1.2, together with all the necessary documents including the last assessment report of the previous Accreditation Body and the valid accreditation certificate.*

In cases of a transfer of accreditation from an Accreditation Body which is not signatory of the EA / IAF MLA agreements, all the regulations and procedures for accreditation will fully apply.

Rev.: ____ Date: __/__/____

	CAB's Stamp and Name and Signature Of the Legal Representative²
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² Legal representative or delegated legal representative.