

## DA-01

### Application for Accreditation of a Certification Body

#### 1. CAB details

|                                                                                                                                                                                                          |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Legal name (also specify any acronyms as shown on the company registration certificate)                                                                                                                  |  |
| Site name (if different from the legal name)                                                                                                                                                             |  |
| Address of the operating site (if there are multiple sites, identify the main site and those considered relevant according to the definition in § 0.4 of ACCREDIA-DC Regulation RG-01, current revision) |  |

#### 2. Subject of the application

|                           |                          |                                                                                                                                    |
|---------------------------|--------------------------|------------------------------------------------------------------------------------------------------------------------------------|
| Accreditation             | <input type="checkbox"/> | Indicate one or more schemes of interest:<br><input type="checkbox"/> MS <input type="checkbox"/> PRD <input type="checkbox"/> PRS |
| Extension                 | <input type="checkbox"/> | Indicate one or more schemes of interest:<br><input type="checkbox"/> MS <input type="checkbox"/> PRD <input type="checkbox"/> PRS |
| Preliminary assessment    | <input type="checkbox"/> | Indicate one or more schemes of interest:<br><input type="checkbox"/> MS <input type="checkbox"/> PRD <input type="checkbox"/> PRS |
| Transfer of accreditation | <input type="checkbox"/> | Indicate one or more schemes of interest:<br><input type="checkbox"/> MS <input type="checkbox"/> PRD <input type="checkbox"/> PRS |

#### 2.1 For a Certification Body, specify the conformity assessment activities for which accreditation is requested (levels 3-4-5 according to document EA 1/06)

| Area                    |                          | Applicable normative references for the CAB (level 3) | Applicable normative references for the CAB (level 4) | Applicable normative references for the CAB (level 4) |
|-------------------------|--------------------------|-------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------|
| Management Systems      | <input type="checkbox"/> | E.g. ISO/IEC 17021-1:2015                             | E.g. ISO/IEC 17021-2:2016                             | ISO 14001:2026                                        |
| Persons                 | <input type="checkbox"/> |                                                       |                                                       |                                                       |
| Product/service/process | <input type="checkbox"/> |                                                       |                                                       |                                                       |

##### 2.1.1 Requested scope of accreditation

| Area                    |                          | For the schemes covered by the application where applicable, list the IAF sectors, categories (and subcategories), technical areas, NACE codes, product families, professional profiles, etc. |
|-------------------------|--------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Management Systems      | <input type="checkbox"/> |                                                                                                                                                                                               |
| Persons                 | <input type="checkbox"/> |                                                                                                                                                                                               |
| Product/service/process | <input type="checkbox"/> |                                                                                                                                                                                               |

**Completion guidance:** For product and person certification, clearly indicate any requested limitations

### 3. Organisation

#### 3.1 Organisation chart

| N.                                                                                                                                                                                                                              | Information to be included in the organisation chart                                                                                                                                                                                                                       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1                                                                                                                                                                                                                               | CAB name and date or revision index of the organisation chart.                                                                                                                                                                                                             |
| 2                                                                                                                                                                                                                               | The CAB's entire organisational structure, starting with its governing bodies, showing organisational units, functions and the persons responsible.                                                                                                                        |
| 3                                                                                                                                                                                                                               | Names of the persons holding the main organisational and decision-making functions.                                                                                                                                                                                        |
| 4                                                                                                                                                                                                                               | Hierarchical and functional relationships, shown by clear and unambiguous reporting lines.                                                                                                                                                                                 |
| 5                                                                                                                                                                                                                               | Body or function responsible for decisions on issuing conformity attestations, including its name and members, where applicable.                                                                                                                                           |
| 6                                                                                                                                                                                                                               | Functions involved in the conformity assessment process, including the relevant persons responsible and roles.                                                                                                                                                             |
| 7                                                                                                                                                                                                                               | Body or mechanism responsible for safeguarding impartiality, where required by the accreditation scheme, including its members and the interested parties represented.<br>For any external members, state the name, role and organisation or interested party represented. |
| Note: If the CAB holds accreditation for multiple schemes (e.g. product certification and inspection), a single organisation chart may be used, provided that the positions relating to both activities are clearly identified. |                                                                                                                                                                                                                                                                            |
| Annex No. _____                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                            |

### 4. CAB's personnel

#### 4.1 Technical Management

| N.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | First name | Surname | Educational qualification | Function identifier (if any) | Curriculum vitae attached |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------|---------------------------|------------------------------|---------------------------|
| 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |            |         |                           |                              | Annex No. _____           |
| 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |            |         |                           |                              | Annex No. _____           |
| 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |            |         |                           |                              | Annex No. _____           |
| 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |            |         |                           |                              | Annex No. _____           |
| <u>Completion guidance: Enter the names and educational qualifications of the members of Technical Management and attach their curricula vitae. These must be accompanied by certificates or other qualification records demonstrating competence relevant to this application for accreditation. In addition, each curriculum vitae must include the date of its latest update, the signature of the person concerned, consent to the processing of personal data pursuant to D.Lgs. 196/2003, as amended, and a declaration of truthfulness made pursuant to D.P.R. 445/2000, as amended.</u> |            |         |                           |                              |                           |

#### 4.2 Composition of the mechanism for safeguarding impartiality

| N. | Member's full name | Interested party represented | Relevant technical competence and experience |
|----|--------------------|------------------------------|----------------------------------------------|
| 1  |                    |                              |                                              |
| 2  |                    |                              |                                              |
| 3  |                    |                              |                                              |

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Certification and Inspection  
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Application for Accreditation of a Certification Body

2/7

CODE: DA-01

REV.05

| N.                                                                                                                     | Member's full name | Interested party represented | Relevant technical competence and experience |
|------------------------------------------------------------------------------------------------------------------------|--------------------|------------------------------|----------------------------------------------|
| 4                                                                                                                      |                    |                              |                                              |
| 5                                                                                                                      |                    |                              |                                              |
| <b>Documentation to be attached:</b> Document describing the operation of the mechanism for safeguarding impartiality. |                    |                              | <b>Annex No.</b> _____                       |

#### 4.3 Internal and external personnel used for the assessment activities covered by this application

| Personnel category               | Internal personnel <sup>1</sup> | External personnel <sup>2</sup> |
|----------------------------------|---------------------------------|---------------------------------|
| <b>Auditors / Examiners</b>      | N. _____                        | N. _____                        |
| <b>Experts</b>                   | N. _____                        | N. _____                        |
| <b>Review personnel</b>          | N. _____                        | N. _____                        |
| <b>Decision-making personnel</b> | N. _____                        | N. _____                        |
| <b>Other staff</b>               | N. _____                        | N. _____                        |

| Required documentation                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Annex                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| Controlled list of the personnel indicated in the preceding table                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>Annex No.</b> _____ |
| Curricula vitae of the personnel indicated in the table.                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Annex No.</b> _____ |
| Certificates or other qualification records demonstrating competence relevant to this application for accreditation.                                                                                                                                                                                                                                                                                                                                                                     | <b>Annex No.</b> _____ |
| Qualification records.                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>Annex No.</b> _____ |
| <b><u>Completion guidance: Curricula vitae must be accompanied by certificates or other qualification records demonstrating competence relevant to this application for accreditation. In addition, each curriculum vitae must include the date of its latest update, the signature of the person concerned, consent to the processing of personal data pursuant to D.Lgs. 196/2003, as amended, and a declaration of truthfulness made pursuant to D.P.R. 445/2000, as amended.</u></b> |                        |

#### 4.4 Function responsible for final decisions

| Type of function                                                                                                                                                            | Select                   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| Single person                                                                                                                                                               | <input type="checkbox"/> |
| Collective body – (where this case applies, complete the table in section 4.4.1 below and submit the required supporting documentation)                                     | <input type="checkbox"/> |
| <b>Documentation to be attached: Document describing the operation of the function responsible for final decisions on the issuance of conformity attestation documents.</b> | <b>Annex No.</b> _____   |

<sup>1</sup> Collaboratori interni: ad esempio, dipendenti a tempo pieno o parziale, stagisti, soci, amministratori dipendenti ecc.

<sup>2</sup> Collaboratori esterni: ad esempio, liberi professionisti, collaboratori con contratto CO.CO.CO. ecc.

#### 4.4.1 Composition of the function and related curricula vitae

| N. | Full name | Function/role held | Curriculum vitae attached |
|----|-----------|--------------------|---------------------------|
| 1  |           |                    | Annex No. _____           |
| 2  |           |                    | Annex No. _____           |
| 3  |           |                    | Annex No. _____           |
| 4  |           |                    | Annex No. _____           |

#### 4.4.2 Veto power schema SGQ-ASD

| N. | Full name | Function/role held | Curriculum vitae attached |
|----|-----------|--------------------|---------------------------|
| 1  |           |                    | Annex No. _____           |
| 2  |           |                    | Annex No. _____           |
| 3  |           |                    | Annex No. _____           |
| 4  |           |                    | Annex No. _____           |

### 5. Subcontracting and testing and calibration laboratories

#### 5.1 List of subcontracted organisations excluding testing and calibration laboratories

| N.                                                                                                                                            | Legal name of the subcontracted organisation | Registered office | Any other sites involved | Identification of outsourced processes | Accredited organisation |
|-----------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------------|--------------------------|----------------------------------------|-------------------------|
| 1                                                                                                                                             |                                              |                   |                          |                                        | Yes No                  |
| 2                                                                                                                                             |                                              |                   |                          |                                        | Yes No                  |
| 3                                                                                                                                             |                                              |                   |                          |                                        | Yes No                  |
| 4                                                                                                                                             |                                              |                   |                          |                                        | Yes No                  |
| Documentation to be attached: List of subcontracted organisations                                                                             |                                              |                   |                          | Annex No. _____                        |                         |
| Documentation to be attached: Procedure defining the criteria and methods for qualification and recognition of the organisations listed above |                                              |                   |                          | Annex No. _____                        |                         |

#### 5.2 Testing laboratories and calibration laboratories used

| N. | Accreditation category, scheme or sector | Legal name of the testing or calibration laboratory | Address | Type                     | Accreditation status <sup>3</sup>   | Accreditation Body | Accreditation document No. | Issue date | Scope of accreditation, accredited tests or calibrations | Applicability to the specific scheme requested |
|----|------------------------------------------|-----------------------------------------------------|---------|--------------------------|-------------------------------------|--------------------|----------------------------|------------|----------------------------------------------------------|------------------------------------------------|
| 1  |                                          |                                                     |         | <input type="checkbox"/> | <input type="checkbox"/> Accredited |                    |                            |            |                                                          |                                                |

<sup>3</sup> Per i laboratori di prova e i centri di taratura accreditati, il numero o il nome riportato deve consentirne la verifica nelle banche dati degli Enti di accreditamento firmatari degli accordi MLA/MRA di EA, Global ACI.

| N. | Accreditation category, scheme or sector | Legal name of the testing or calibration laboratory | Address | Type                                                                   | Accreditation status <sup>3</sup>                                              | Accreditation Body | Accreditation document No. | Issue date | Scope of accreditation, accredited tests or calibrations | Applicability to the specific scheme requested |
|----|------------------------------------------|-----------------------------------------------------|---------|------------------------------------------------------------------------|--------------------------------------------------------------------------------|--------------------|----------------------------|------------|----------------------------------------------------------|------------------------------------------------|
|    |                                          |                                                     |         | <input type="checkbox"/> Internal<br><input type="checkbox"/> External | <input type="checkbox"/> Not accredited                                        |                    |                            |            |                                                          |                                                |
| 2  |                                          |                                                     |         | <input type="checkbox"/> Internal<br><input type="checkbox"/> External | <input type="checkbox"/> Accredited<br><input type="checkbox"/> Not accredited |                    |                            |            |                                                          |                                                |
| 3  |                                          |                                                     |         | <input type="checkbox"/> Internal<br><input type="checkbox"/> External | <input type="checkbox"/> Accredited<br><input type="checkbox"/> Not accredited |                    |                            |            |                                                          |                                                |
| 4  |                                          |                                                     |         | <input type="checkbox"/> Internal<br><input type="checkbox"/> External | <input type="checkbox"/> Accredited<br><input type="checkbox"/> Not accredited |                    |                            |            |                                                          |                                                |

**Completion guidance:** Complete one row for each laboratory and for each requested accreditation category, scheme or sector. The table above may be replaced by a specific annex appropriately identified within this section.

### 5.2.1 Procedure for laboratory qualification and recognition

| Required documentation                                                                        | Annex           |
|-----------------------------------------------------------------------------------------------|-----------------|
| Procedure defining the criteria and methods for laboratory qualification and recognition      | Annex No. _____ |
| Documentation concerning contractual relationships, such as an agreement or specific contract | Annex No. _____ |
| Draft contractual document where subcontracted tests have not yet been performed              | Annex No. _____ |

### 5.2.2 List of business partners and/or other legal entities with which the CAB has entered into a contract

| N.                                                                                                                                       | Legal name of the contracted organisation | Registered office | Any other sites involved | Identification of the type of cooperation (e.g. business development, etc.) | Accredited organisation |
|------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-------------------|--------------------------|-----------------------------------------------------------------------------|-------------------------|
| 1                                                                                                                                        |                                           |                   |                          |                                                                             | Yes No                  |
| 2                                                                                                                                        |                                           |                   |                          |                                                                             | Yes No                  |
| 3                                                                                                                                        |                                           |                   |                          |                                                                             | Yes No                  |
| 4                                                                                                                                        |                                           |                   |                          |                                                                             | Yes No                  |
| Documentation to be attached: List of subcontracted organisations                                                                        |                                           |                   |                          | Annex No. _____                                                             |                         |
| Document to be attached: Procedure defining the criteria and methods for qualification and recognition of the organisations listed above |                                           |                   |                          | Annex No. _____                                                             |                         |

## 6. Additional documents to be submitted with the application for accreditation

### 6.1 Documentation to be submitted for all areas

| N. | Document to be attached                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Annex No. |
|----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 1  | List of annexes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |           |
| 2  | Articles of association, deed of incorporation and any contractual relationships with related entities, for example franchise agreements<br><br><i>(to be attached only in the case of initial accreditation)</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                            |           |
| 3  | Latest available financial statements, including the report to shareholders and the notes to the financial statements, where applicable, or equivalent documents<br><br><i>(to be attached only in the case of initial accreditation)</i>                                                                                                                                                                                                                                                                                                                                                                                                                                    |           |
| 4  | An up-to-date company registration extract for the CAB, together with up-to-date company registration extracts relating to the members of its ownership structure, whether natural or legal persons, and to its director(s). Such extracts shall provide evidence of any offices held and any direct or indirect shareholdings in other organisations.<br><br>In the case of holding companies, trust companies, investment funds, or similar entities, please also attach all documentation required by the current revision of RG-01.<br><br><b>The extracts submitted must have been issued no more than six months before the date of submission of the application.</b> |           |
| 5  | Insurance contract/policy, complete with schedule, policy terms and the latest valid proof of premium payment. (to be attached for both accreditation and extension)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |           |
| 6  | Management System Manual (it may be prepared according to different criteria; it must include references to the procedures mentioned above)<br><br><i>(to be attached only in the case of initial accreditation, except for SGQ-ASD schemes, for which it must also be submitted in the case of an extension)</i>                                                                                                                                                                                                                                                                                                                                                            |           |
| 7  | List of procedures, operating instructions, forms, flowcharts, schemes and other documents applicable to the CAB's activities                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |
| 8  | Procedure/Regulation or equivalent document governing the review of applications for certification<br><br><i>(to be attached only in the case of initial accreditation)</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |
| 9  | Procedure for qualification of Auditors / Examiners and Experts, or equivalent documents                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |
| 10 | General regulations for the management of assessment activities (e.g. Regulations for SGQ Certification, Regulations for SGA Certification, Regulations for PRD Certification, PRS Certification, etc.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |           |
| 11 | Regulation for use of the mark, or equivalent document<br><br>(to be attached only in the case of initial accreditation)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |
| 12 | Copies of templates used to define the contractual relationship between the CAB and its clients, for example an information questionnaire, quotation template and contract template                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |
| 13 | Specimen copies of conformity attestations issued by the CAB and the related annexes, where applicable (e.g. SGQ Certificate, SGA Certificate, PRD Certificate, PRS Certificate, etc.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |           |

| N. | Document to be attached                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Annex No. |
|----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 14 | List of entities (organisations or persons) holding conformity attestations already issued by the CAB (the CAB's clients), limited to the assessment activities for which accreditation is requested (e.g. lists of PRD Certificates, lists of PRS Certificates, etc.). For each entity/conformity attestation, identify the name, address, scope of assessment, sector, etc., as applicable; also indicate the initial issue date and expiry date.                                                   |           |
| 15 | List of audits of entities (organisations), limited to the assessment activities for which accreditation is requested. Identify the name, address, scope of assessment, sector, type of audit (e.g. stage 1, stage 2, surveillance, renewal, etc.), the date and/or period of audits already performed and/or to be scheduled, and the audit team appointed by the CAB.                                                                                                                               |           |
| 16 | For the FSM scheme, please note that, as required by Global ACI-TECH-3-013 (M), current revision, in order to submit an application for accreditation or extension, the CAB must demonstrate that it has at least one active or potential certification application in the category for which accreditation is requested. If certification has already been issued, submission of the certificate is sufficient; if the application is being processed, the certification contract must be submitted. |           |
| 17 | For the PRS scheme, a report satisfying clause 8 of ISO/IEC 17024 and the requirements of Regulation RG-01-02, current revision.<br><br><b><i>The specific Annex No. 01 to this form must be completed.</i></b>                                                                                                                                                                                                                                                                                       |           |
| 18 | In the event of a transfer of accreditation (between legal entities) or a transfer from another accreditation body, submit the documents required by Accreditation Regulation RG-01, current revision.                                                                                                                                                                                                                                                                                                |           |

**Method for submitting the application and related documentation:**

- Documents must be provided to ACCREDIA as controlled copies, with the understanding that all future revisions must be made promptly available to ACCREDIA. Electronic format is preferred wherever possible. In the event of significant changes to the organisation or management-system documentation, the CAB must promptly inform ACCREDIA and provide the updated documentation and a documented assessment of any new threats.
- Short file names must be used for attachments to avoid problems when saving and managing the documentation during subsequent processing.
- Where the application for accreditation/extension concerns schemes requiring specific documentation to initiate the process, the list of documents to be attached must be supplemented with the documentation required by the relevant scheme.
- Unless otherwise indicated, all required documents must be attached both for initial accreditation and for a transfer of accreditation.
- For a preliminary assessment request, the same documentation applicable to accreditation applications must be submitted.

|                                      |                                                                                                                                                     |
|--------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| Rev.: ____      Date: __ / __ / ____ | <p align="center"><b>CAB stamp</b></p> <p align="center"><b>Name and signature of the Legal Representative<br/>or authorised representative</b></p> |
|--------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|

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|                                                       |                |     |
|-------------------------------------------------------|----------------|-----|
| Application for Accreditation of a Certification Body |                | 7/7 |
| CODE: <b>DA-01</b>                                    | REV. <b>05</b> |     |