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| **APPLICATION FOR GAAS ACCREDITATION**  Inspection Body Accreditation Scheme as per ISO/IEC 17020 Standard | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| ***To apply for accreditation, please complete this application form and send it to GAAS id mentioned above accompanied by:***   1. *Documents as listed in Part V of application;* 2. *Completed Cross Reference Matrix [BCB F-010 (IB)] for Document Review by GAAS;* 3. *Application Fee (with applicable taxes) in favour of Quality Council of India.*   ***Before completing this application form and submitting application, relevant GAAS documents for Inspection Body Accreditation Scheme should be carefully studied. If any clarification is needed, please contact GAAS at*** [***gaasindia@gmail.com***](mailto:gaasindia@gmail.com) ***Instructions to fill this Application are provided at the end of the format.***  ***If additional space is required for providing information for any item, the information may be annexed as a separate sheet.*** | | | | | | | | | | | | | | | | | | |
| *Please tick in the appropriate box.* | | | | | | | | | | | | | | | | | | |
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| **Application for Accreditation** | | | Initial | |  | | |  | | | Renewal | | |  | | | |  |
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| *Please provide information as per the format and in the space given.* | | | | | | | | | | | | | | | | | | |
| **PART – I GENERAL INFORMATION** | | | | | | | | | | | | | | | | | | |
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|  | **Name of Inspection Body** | |  | | | | | | | | | | | | | | | |
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|  | **Type of Inspection Body** | | A | | | | B | | | | | | C | | | | | |
|  |  | | | | | | | | | | | | | | | | | |
|  | **Address of Main Office** | |  | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | |
|  | | *City* |  | | | | | | | | | | | | | | |
|  | | *State* |  | | | | | | | | *PIN* | | | | |  | |
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|  | **Contact Details** | | *Phone* |  | | | | | | | | | | | | | | |
| *Fax* |  | | | | | | | | | | | | | | |
| *E-mail* |  | | | | | | | | | | | | | | |
| *Web* |  | | | | | | | | | | | | | | |
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|  | **Ownership Details** | |  | | | | | | | | | | | | | | | |
| *Also please provide Declaration on Shareholder(s) and Director(s) of the Inspection Body in GAAS format BCB F026, which is available on the GAAS website.* | | | | | | | | | | | | | | | |
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|  | **Legal Registration Details** | | *Status* | | |  | | | | | | | | | | | | |
| *Regn. No.* | | |  | | | | | | | | | | | | |
| *Date of Regn.* | | |  | | | | | | | | | | | | |
| *Regn. Authority* | | |  | | | | | | | | | | | | |
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|  | **Place of Registration** | |  | | | | | | | | | | | | | | | |
| *If registered outside the country where Main Office is located. Also provide above the details of approval to operate or to do business in India / SAARC country and annex copy of the approval granted.* | | | | | | | | | | | | | | | |
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|  | **Chief Executive** | | *Name* | | |  | | | | | | | | | | | | |
| *Designation* | | |  | | | | | | | | | | | | |
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|  | **Primary Contact Person** | | *Name* | | |  | | | | | | | | | | | | |
| *Designation* | | |  | | | | | | | | | | | | |
| *Phone* | | |  | | | | | | | | | | | | |
| *Mobile* | | |  | | | | | | | | | | | | |
| *E-mail* | | |  | | | | | | | | | | | | |
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|  | **Branch Office Location(s)** | |  | | |  | | | |  | | | | | | |  | |
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| *Mention above the Branch Office locations and annex details as per the format in Table A.* | | | | | | | | | | | | | | | |
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| **PART – II TECHNICAL INFORMATION** | | | | | | | | | | | | | | | | | | |
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|  | **Scope of Accreditation** | |  | | |  | | | |  | | | | | | |  | |
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| *Mention above the Scope Sector Codes applied for accreditation and annex detailed Scope of Accreditation as per the format in Table B.* | | | | | | | | | | | | | | | |
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|  | **Inspection Equipment**  with Type, Make & Range / Capacity  (*if owned by IB*) | | *Calibration Status* | | | | | | | | | | | | | | | |
| *Calibration Agency* | | | | | | *Cal. Frequency* | | | | | | *Calibration Date* | | | |
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| *Annex separate sheet if more space is required to provide information.* | | | | | | | | | | | | | | | | | |
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| **PART – III PERSONNEL INFORMATION** | | | | | | | | | | | | | | | | | | |
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|  | **Quality Manager** | | *Name* | | |  | | | | | | | | | | | | |
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|  | **Number of Personnel** | | *Managerial Staff* | | | *Inspection Staff* | | | | *Support Staff* | | | | | | | *Total* | |
| Location(s) |  |  | | |  | | | |  | | | | | | |  | |
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| *Mention only numbers above and annex details of key Managerial and all Inspection Personnel as per the format in Table C.* | | | | | | | | | | | | | | | | | |
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| **PART – IV OTHER INFORMATION** | | | | | | | | | | | | | | | | | | |
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|  | **Other activities within the same legal entity** | |  | | | | | | | | | | | | | | | |
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|  | **Related Organization(s), if any, and their activities,** | |  | | | | | | | | | | | | | | | |
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|  | **Major Clients** | |  | | | | | | | | | | | | | | | |
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|  | **Financial Performance**  (for last 3 financial years) | | *Financial Year* | | | *Insp. Income* | | | | *Total Income* | | | | | | | *Net Profit* | |
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|  | **Inspection Mark Registration, if any** | | *Regn. No.* | | | *Regn. Date* | | | | *Regn. Authority* | | | | | | | | |
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|  | **Other Accreditation(s), Approval(s) from Govt. or Regulatory Bodies, if any** | |  | | | | | | | | | | | | | | | |
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|  | **Request for**  **Pre-assessment** | | *We intend to have Pre-assessment by GAAS* | | | | | | | | | | | | | Yes / No | | |
| Will inform later | | |
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| **PART – V ANNEXED INFORMATION** | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  | Organization Registration Certificate & Memorandum / Articles of Association (*copy only*) | | | | | | | | | | | | | | | | *Annex –* **1** | |
|  | Declaration on Shareholder(s) and Director(s) of Inspection Body | | | | | | | | | | | | | | | | *Annex –* **2** | |
|  | Master List of Documents (*with issue and/or revision status*) | | | | | | | | | | | | | | | | *Annex –* **3** | |
|  | Quality Manual in accordance with ISO/IEC 17020 : 2012 | | | | | | | | | | | | | | | | *Annex –* **4** | |
|  | Procedure Manual / Procedures including technical documents, formats, checklists etc. | | | | | | | | | | | | | | | | *Annex –* **5** | |
|  | Duly filled Cross reference Matrix [BCB F-010 (IB)] for Document Review by GAAS | | | | | | | | | | | | | | | | *Annex –* **6** | |
|  | Branch Office(s) to be covered under accreditation (*list* *as per format in Table – A*) | | | | | | | | | | | | | | | | *Annex –* **7** | |
|  | Scope of Accreditation applied (*details* *as per format in Table – B*) | | | | | | | | | | | | | | | | *Annex –* **8** | |
|  | List of Managerial & Inspection Personnel (*list as per format in Table – C*) | | | | | | | | | | | | | | | | *Annex –* **9** | |
|  | Business Liability Insurance (*copy only*) | | | | | | | | | | | | | | | | *Annex –* **10** | |
|  | Documented ‘Inspection Contract / Agreement’ (*as specimen*) | | | | | | | | | | | | | | | | *Annex –* **11** | |
|  | Recently Issued ‘Inspection Reports / Certificates’ (few *as specimen*) | | | | | | | | | | | | | | | | *Annex –* **12** | |
|  | Inspection Mark Specimen & its Registration Certificate (*copy only*) | | | | | | | | | | | | | | | | *Annex –* **13** | |
|  | Application Fee - *Amount, Cheque / DD No., Date*: | | | | | | | | | | | | | | | | *Annex –* **14** | |
|  | Other Documents (*annex list*) | | | | | | | | | | | | | | | | *Annex –* **15** | |
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| **PART –VI DECLARATION** | | | |
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| We the Authorized Representatives on behalf of our inspection body declare the following: | | | |
|  | All statements, information and documents provided along with this application are correct to the best of our knowledge and belief. | | |
|  | GAAS accreditation criteria, requirements, procedures and documents have been read, understood and implemented. | | |
|  | The terms & conditions in the GAAS Agreement for Inspection Bodies [format BCB F-003 (IB) available on the GAAS website] have been read, understood and the agreement shall be signed promptly on receiving intimation of grant of accreditation from GAAS. | | |
|  | Have adequate resources to undertake inspection work for the scope of accreditation requested, undergo assessment as well as maintain accreditation, and shall pay all necessary fee and charges (including any applicable taxes) to GAAS. | | |
|  | Shall ensure that the operations, staff, facilities, and procedures of our inspection body will always continue to comply with the GAAS criteria, requirements, procedures & documents for accreditation. | | |
| 1. S | Shall always maintain impartiality and integrity in operations as well as in inspection work. | | |
|  | Shall always provide, or give access to, all documents, records, information and facilities during the entire assessment process to enable a thorough evaluation of our inspection body and also later during the period of accreditation. | | |
|  | Shall take adequate and prompt corrective and/or preventive action(s) as may be necessary on the issues raised by GAAS. | | |
|  | Shall immediately notify GAAS of any significant changes in its organizational status / structure, operations, facilities, main policies, procedures, staff or competence, which are likely to affect our accreditation or the terms in which the scope of accreditation is expressed. | | |
|  | Shall undertake routine assessments, surveillances & reassessments as scheduled by GAAS and also the verification or surprise visits as decided by GAAS. | | |
|  | Any fee and charges payable by our inspection body and which remains unpaid shall be recovered from our inspection body with late payment charges as appropriate and decided by GAAS. | | |
|  | If our inspection body at any time is found not complying with the above declaration or the requirements of ISO/IEC 17020 and/or GAAS or is found misrepresenting scope of accreditation or misusing accreditation or carrying out malpractices or bringing GAAS into disrepute, any action against our inspection body may be taken including suspension or withdrawal as deemed appropriate by GAAS. | | |
|  | If any information given along with this application is later found to be false, GAAS may decide to cancel our application. | | |
|  | | **Authorized Representative** | **Alternate Authorized Representative** |
| *Signature* | |  |  |
| *Name* | |  |  |
| *Designation* | |  |  |
| *E-mail* | |  |  |
| *Date* | |  |  |
| *Place* | |  |  |

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| **INSPECTION BODY BRANCH OFFICE LOCATION(S)** | | | | **TABLE – A** |
|  | | | | |
| **S. No.** | **Branch Office location with complete address** | **Phone, Fax & E-mail; Local Contact Person (with Designation)** | **Activities Performed** | |
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| **INSPECTION BODY SCOPE OF ACCREDITATION** | **TABLE – B** |
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| **S. No.** | **EAC Scope Sector Classification Code (Indicative)**  See Note 1 below the Table | **Field of Inspection**  See Note 2 below the Table | **Type and Range of Inspection**  See Note 3 below the table | **Standards / Regulations / Methods / Procedures**  See Note 4 below the Table | | **Office(s) where competence for each scope exists** |
| --- | --- | --- | --- | --- | --- | --- |
| **Number identification with year of publication** | **Title** |  |
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| ***Note 1****: In column 2, indicate the EAC scope sector classification code as given in Annex 1 of GAAS accreditation procedure BCB 201(IB).*  ***Note 2****: In column 3, indicate the specific Product(s) / Design(s) / Installation(s) / Process(s) / Service(s) etc. for which accreditation for inspection is sought within the relevant IAF code indicated in column 2.*  ***Note 3****: In column 4, indicate the type of inspection, for example, Inspection of a lot, Witness of testing, Design review, Review of documents/records, Inspection of practices (GMP/GHP), Inspection of the process(es), Service delivery etc. Also indicate as, applicable, the range of inspection - Final, In-service, Process, Stage-wise, Quantity, Quality, Design inspections etc.*  ***Note 4****: In column 5, indicate the specific Standards, Regulations, Specifications, Methods, and Procedures etc. applicable to the product / process / practice / service etc. in column 4 clearly giving the following information in respect of each one of them:*  *Number identification of the standard, regulation, specification, method etc. along with year of publication in column 5(i) and the corresponding Title in column 5(ii).*  *Where the inspections are carried out in accordance with the QAP’s provided by clients, the standards referred in the QAPs shall be clearly identified and included in column 5.* | | | | | | |

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| **INSPECTION BODY MANAGERIAL & INSPECTION PERSONNEL** | | | | **TABLE – C** |
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| **S. No.** | **Name with Designation** | **Qualifications & Years of Relevant Experience** | **Location** | **Competence for Scope Sector Code(s)** |
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| **Instructions to fill the Application Form** |
| Before submitting a formal application for accreditation, inspection body shall ensure that GAAS Accreditation Criteria, Procedure and other conditions for accreditation are understood, and shall ensure that their quality management systems, procedures, facilities, resources etc. comply with requirements.  Although the instructions are self-sufficient to guide the applicant to fill this application form, inspection body may contact GAAS staff members to seek any clarification on any of the information / document required to be provided along with the application or on GAAS Accreditation Criteria and Procedure. |
| This application shall be submitted for initial application, renewal of accreditation (at least 6 months before expiry of accreditation) and for any extension of scope requested during the validity of the accreditation period. In the application for renewal of accreditation all information / documents as required in the application shall be provided and scope of accreditation requested may be revised (addition and/or deletion to current scope of accreditation) as required.  *Instructions for providing information against each of the points in the application form are given below:* |
| 1. Specify your organization name (name of the legal entity) followed by the name of division / section, if any, under which inspection services are undertaken as you wish it to appear on the Certificate of Accreditation. Organization name specified shall have proper legal status as accepted by GAAS (refer Accreditation Procedure). If an inspection body is a division / section of an organization, the legal status of the parent organization shall be indicated. |
| 2. For describing the category of Inspection Body, refer to requirements as stated in ISO/IEC 17020:2012, Clause 4.1.6. on Type A, B or C Inspection Body. |
| 3. Specify the postal address of the physical location of the Main Office of your inspection body from where inspection activities are managed. Also mention the country, if other than India, along with State. Main Office of the Inspection Body is from where key activities relating to Top Management, Policy Formulation, Quality Management System, HR, Administration, Inspection etc. are performed. |
| 4. Provide the phone, fax, e-mail of the Main Office & website details of your inspection body. |
| 5. Provide the information on the owner / majority stakeholder(s) of your inspection body. |
| 6. Provide the Legal Registration Status (e.g. Government entity, Limited company, Private limited company, Registered Society or equivalent) of your inspection body or the organization (if inspection body is a division / section of the parent organization); Registration No. (Notification details or equivalent in case of Government entity); Date of Registration and the Registration Authority. Also, annex a copy of the Registration Certificate and Memorandum / Articles of Association or equivalent documentation of the inspection body or the organization of which if it is a part along with the application. Applications from Individuals, Proprietorship or Partnership firms are not accepted by GAAS. Registration documents such as PAN Card, Service Tax etc. and other approvals / licenses shall not be accepted as documents for legal establishment of an entity. |
| 7. Specify the place where your inspection body or the organization (if inspection body is a division / section of the parent organization) is registered. If registered outside the country where Main Office of an inspection body as declared in this application is located, then provide details of valid approval(s) to operate from the appropriate governmental authorities of the country where Main Office of the Inspection Body is located (e.g. if the inspection body is registered outside India, approval from Reserve Bank of India is essential). Refer GAAS Accreditation Procedure for more details. GAAS reserves its right to accept applications from inspection bodies registered outside India and follows ILAC Policy on Cross-frontier Accreditation (ILAC G 21 document). |
| 8. Provide the name and the designation of the Chief Executive (however named) of the inspection body. |
| 9. Provide the name, designation and contact details of the person of the inspection body who will be the primary point of contact for GAAS on all matters related to application / accreditation. |
| 10. Mention the location of all the Branch Office(s) and their activities. Annex complete details as per format given in Table - A.  Branch Office is the key office operating under the overall Quality Management System established by the Main Office of the Inspection Body and from where inspections or related key activities such as policy formulation, inspection contact review, inspection planning & execution, assigning personnel, issue of reports, inspector qualification / approval, skills development, monitoring of inspectors, technical documentation & support, preparation & issue of inspection reports / certificates etc. are managed. The Branch Office of an organization that operates independently and has established a separate Quality Management System for itself as per the requirements of ISO/IEC 17020 and GAAS shall submit separate application to GAAS as an independently operating inspection body. |
| 11. Please provide the scope of accreditation as precise and detailed as possible in the format as given in Table – B. Mention the Scope Sector Codes as given in GAAS Accreditation Procedure, BCB 201 (IB).  If any of the product, product, service or installation for inspection is not covered under GAAS Classification, the inspection body may still apply for it. For each of the sector codes, specify the product, process, service or installation for which the inspection body has inspection capabilities and wish to apply for accreditation. |
| 12. If the Inspection Body owns or maintains equipment used to perform the inspections for which accreditation is sought, then provide the list of major equipment and their calibration status. Please refer to the GAAS Accreditation Criteria for more details on policy for Measurement Traceability. |
| 13. Provide the name of Quality Manager who is overall responsible for maintaining quality management system of your inspection body in accordance with ISO/IEC 17020 and GAAS requirements. |
| 14. Provide the number of managerial, inspection and other support staff at the Main Office and Branch Office(s) of your inspection body.  Also annex details of key managerial and all inspection personnel as per the format given in Table – C. |
| 15. Provide information on the other business activities / work of your inspection body or the parent organization of which if it is a part. |
| 16. Provide information on organization(s) directly / in-directly related to your inspection body or the parent organization, and which may have any conflict of interest with the inspection services provided by your inspection body. |
| 17. Provide the list of major clients of your inspection body for the scope sectors applied for accreditation. |
| 18. Provide audited inspection as well as total income (if legal entity include activities other than inspection) and net profits for last 3 financial years. |
| 19. Provide details of registration such as Registration No., Date & Authority of Registration of the unique Inspection Mark of your inspection body. |
| 20. Provide information on other valid accreditation(s) your inspection body holds with the activity for which accreditation has been granted and the name of the body providing such accreditation. Also, provide information on approvals granted by the Govt. or Regulatory Bodies to your inspection body, if any. |
| 21. Indicate your intent to have Pre-assessment of your inspection body. The intent may also be informed to GAAS at the time of Document Review. Refer to the GAAS accreditation procedure for more details on Pre-assessment. |
| Annex all documents as listed in Part-V of application and also those which you may consider relevant. |
| Provide signed Declaration as in Part-VI of application by two persons of your inspection body, the Authorized Representative as well as the Alternate. |