### Content

[Content 1](#_Toc33102515)

[4 General requirement 2](#_Toc33102516)

[4.1 Legal matters 2](#_Toc33102517)

[4.2 Responsibility for decision on certification 2](#_Toc33102518)

[4.3 Management of impartiality 2](#_Toc33102519)

[4.4 Finance and liability 2](#_Toc33102520)

[5 Structural requirements 2](#_Toc33102521)

[5.1 Management and organization structure 2](#_Toc33102522)

[5.2 Structure of the certification body in relation to training 2](#_Toc33102523)

[6 Resource requirements 2](#_Toc33102524)

[6.1 General personnel requirements 2](#_Toc33102525)

[6.2 Personnel involved in the certification activities 2](#_Toc33102526)

[6.3 Outsourcing 2](#_Toc33102527)

[6.4 Other resources 2](#_Toc33102528)

[7 Records and information requirements 2](#_Toc33102529)

[7.1 Records of applicants, candidates and certified persons 2](#_Toc33102530)

[7.2 Public information 2](#_Toc33102531)

[7.3 Confidentiality 2](#_Toc33102532)

[7.4 Security 2](#_Toc33102533)

[8 Certification schemes 2](#_Toc33102534)

[9 Certification process requirements 2](#_Toc33102535)

[9.1 Application process 2](#_Toc33102536)

[9.2 Assessment process 2](#_Toc33102537)

[9.3 Examination process 2](#_Toc33102538)

[9.4 Decision on certification 2](#_Toc33102539)

[9.5 Suspending, withdrawing or reducing the scope of certification 2](#_Toc33102540)

[9.6 Recertification process 2](#_Toc33102541)

[9.7 Use of certificates, logos and marks 2](#_Toc33102542)

[9.8 Appeals against decisions on certification 2](#_Toc33102543)

[9.9 Complaints 2](#_Toc33102544)

[10 Management system requirements 2](#_Toc33102545)

[10.1 General 2](#_Toc33102546)

[10.2 General management system requirements 2](#_Toc33102547)

[Further issues of the assessment 2](#_Toc33102548)

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| **Details of the certification body** | | | |
| Name: |  | | |
| Address: |  | | |
| File number: |  |  |  |
| Case number | Phase |  |
| Date of assessment: |  | | |
| Accreditation process: |  | | |
| Assessment type[[1]](#endnote-1) : |  | | |
| Certification body with several locations: | | Yes | No |
| Name / Address of assessed locations: | | | |

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| Area: | Within the permanent facilities | | On-site | Mobile facilities |
| Technical management: |  | | | |
| Deputy: |  | | | |
| Quality manager: |  | | | |
| Deputy: |  | | | |
| **Details of the assessor** | | | | |
| Name: |  | | | |
| Status[[2]](#endnote-2) : | LA | SA | TA | O |
| **Assessed area** (technical fields of DAkkS, testing fields, sectorspecific requirements, directives/modules) | | | | |

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**Notes on usage by the certification body (blue colored sectors):**

* On the second page only the name and address of the certification body shall be entered.
* Please enter the following information in the column “Reference documents“:  
  Where is the implementation of the requirement documented?   
  (State the specific reference documents, e.g. specification of the document/chapter/section)   
  Requirements of the standard that are not applicable shall be shall be indicated accordingly.

No further entries shall be made by the certification body.

**Notes on usage by the assessor (orange colored sectors):**

* The column „Responsible“ indicates the assessor responsible to evaluate a section of the standard.
* The column “Appraisal” and “No of NC” shall be entered by the assessor (evaluation key see final marks)
* The appraisal in the first row of a section of the standard (e.g. 4.1 Legal matters) indicates the overall appraisal after the assessment, including the prior review of documents and records. The appraisal in the first row of a section suffice, if no non-conformity was identified for the relevant section of the standard.

# 4 General requirement

## 4.1 Legal matters

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| **Result of review of documents and records: [[3]](#endnote-3)** | | |  |  |  |  |

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| Findings / justification of findings / specifics / notes: | | | |
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| **Objective evidence / Reviewed documents (OE/RD) during the assessment:[[4]](#endnote-4)** | | | |
| No. | OE[[5]](#endnote-5) | Title / Description | Date / Version |
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| **Result of assessment:** Findings / justification of findings / sectorspecific provisions / notes: | | | |
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|  | The certification body (CB) shall be a legal entity, or a defined part of a legal entity, such that it can be held legally responsible for its certification activities. A governmental CB is deemed to be a legal entity on the basis of its governmental status. |  |  |  |  |  |

## 4.2 Responsibility for decision on certification

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| **Objective evidence / Reviewed documents (OE/RD) during the assessment:** | | | |
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|  | The CB shall be responsible for, shall retain authority for, and shall not delegate, its decisions relating to certification, including the granting, main-taining, recertifying, expanding and reducing the scope of the certification, and suspending or withdrawing  the certification. |  |  |  |  |  |

## 4.3 Management of impartiality

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| 4.3.1 | The CB shall document its structure, policies and procedures to manage impartiality and to ensure that the certification activities are undertaken impartially. The CB shall have top management commitment to impartiality in certification activities. The CB shall have a statement publicly accessible without request that it understands the importance of impartiality in carrying out its certification activities, manages conflict of interest and ensures the objectivity of its certification activities. |  |  |  |  |  |
| 4.3.2 | The CB shall act impartially in relation to its applicants, candidates and certified persons. |  |  |  |  |  |
| 4.3.3 | Policies and procedures for certification of persons shall be fair among all applicants, candidates and certified persons. |  |  |  |  |  |
| 4.3.4 | Certification shall not be restricted on the grounds of undue financial or other limiting conditions, such as membership of an association or group. The CB shall not use procedures to unfairly impede or inhibit access by applicants and candidates. |  |  |  |  |  |
| 4.3.5 | The CB shall be responsible for the impartiality of its certification activities and shall not allow commercial, financial or other pressures to compromise impartiality. |  |  |  |  |  |
| 4.3.6 | The CB shall identify threats to its impartiality on an ongoing basis. This shall include those threats that arise from its activities, from its related bodies, from its relationships, or from the relationships of its personnel. However, such relationships do not necessarily present a body with a threat to impartiality.  [🡺Note 1 to 3] |  |  |  |  |  |
| 4.3.7 | The CB shall analyse, document and eliminate or minimize  the potential conflict of interests arising from its certification activities. The CB shall document and be able to demonstrate how it eliminates, minimizes or manages such threats.  All potential sources of conflict of interest that are identified, whether they arise from within the CB, such as assigning responsibilities to personnel, or from the activities of other persons, bodies or organizations, shall be covered. |  |  |  |  |  |
| 4.3.8 | Certification activities shall be structured and managed so as to safeguard impartiality. This shall include balanced involvement  of interested parties (see definition 3.21). |  |  |  |  |  |

## 4.4 Finance and liability

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|  | The CB shall have the financial resources necessary for the operation of a certification process and have adequate arrangements (e.g. insurance or reserves) to cover associated liabilities. |  |  |  |  |  |

# 5 Structural requirements

## 5.1 Management and organization structure

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| 5.1.1 | The CB activities shall be structured and managed so as to safeguard impartiality. |  |  |  |  |  |
| 5.1.2 | The CB shall document its organizational structure, describing  the duties, responsibilities and authorities of management, certification personnel and any committee. When the CB is a defined part of a legal entity, documentation of the organizational structure shall include the line of authority and the relationship to other parts within the same legal entity. The party/parties or individuals responsible for the following shall be identified:   1. policies and procedures relating to the operation of the CB; 2. implementation of the policies and procedures; 3. finances of the CB; 4. resources for certification activities; 5. development and maintenance of the certification schemes; 6. assessment activities; 7. decisions on certification, including the granting, maintaining, recertifying, expanding, reducing, suspending or withdrawing of the certification; 8. contractual arrangements. |  |  |  |  |  |

## 5.2 Structure of the certification body in relation to training

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| **Result of review of documents and records:** | | |  |  |  |  |

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| 5.2.1 | Completion of training may be a specified requirement of a certification scheme (see 8.3). The recognition/approval of training by the CB shall not compromise impartiality or reduce the assessment and certification requirements. |  |  |  |  |  |
| 5.2.2 | The CB shall provide information regarding education and training if they are used as pre-requisites for being eligible for certification. However, the CB shall not state or imply that certification would be simpler, easier or less expensive if any specified education/training services are used. |  |  |  |  |  |
| 5.2.3 | Offering training and certification for persons within the same legal entity constitutes a threat to impartiality. A CB that is part of a legal entity offering training shall:   1. identify and document the associated threats to its  impartiality on an ongoing basis: the body shall have a documented process to demonstrate how it eliminates or minimizes those threats; 2. demonstrate that all processes performed by the CB are independent of training to ensure that confidentiality, information security and impartiality are not compromised; 3. not give the impression that the use of both services would provide any advantage to the applicant; 4. not require the candidates to complete the CB's own education or training as an exclusive prerequisite when alternative education or training with an equivalent outcome exists; 5. ensure that personnel do not serve as an examiner of a specific candidate they have trained for a period of two years from the date of the conclusion of the training activities: this interval may be shortened if the CB demonstrates it does not compromise impartiality. |  |  |  |  |  |

# 6 Resource requirements

## 6.1 General personnel requirements

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| 6.1.1 | The CB shall manage and be responsible for the performance of all personnel involved in the certification process. |  |  |  |  |  |
| 6.1.2 | The CB shall have sufficient personnel available with the necessary competence to perform certification functions relating to the type, range and volume of work performed. |  |  |  |  |  |
| 6.1.3 | The CB shall define the competence requirements for personnel involved in the certification process. Personnel shall have competence for their specific tasks and responsibilities. |  |  |  |  |  |
| 6.1.4 | The CB shall provide its personnel with documented instructions describing their duties and responsibilities. These instructions shall be kept up-to-date. |  |  |  |  |  |
| 6.1.5 | The CB shall maintain up-to-date personnel records, including relevant information, e.g. qualifications, training, experience, professional affiliations, professional status, competence and known conflicts of interest. |  |  |  |  |  |
| 6.1.6 | Personnel acting on the CB's behalf shall keep confidential all information obtained or created during the performance of the body's certification activities, except as required by law or where authorized by the applicant, candidate or certified person. |  |  |  |  |  |
| 6.1.7 | The CB shall require its personnel to sign a document by which they commit themselves to comply with the rules defined by the CB, including those relating to confidentiality, impartiality and conflict of interests. [🡺Note] |  |  |  |  |  |
| 6.1.8 | When a CB certifies a person it employs, the CB shall adopt procedures to maintain impartiality. |  |  |  |  |  |

## 6.2 Personnel involved in the certification activities

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| **Result of review of documents and records:** | | |  |  |  |  |

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| Findings / justification of findings / specifics / notes: | | | |
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| **6.2.1** | **General**  The CB shall require its personnel to declare any potential conflict of interest in any candidate. |  |  |  |  |  |
| **6.2.2** | **Requirements for examiners** |  |  |  |  |  |
| 6.2.2.1 | Examiners shall meet the requirements of the CB. The selection and approval processes shall ensure that examiners:   1. understand the relevant certification scheme; 2. are able to apply the examination procedures and documents; 3. have competence in the field to be examined; 4. are fluent, both in writing and orally, in the language of examination; in circumstances where an interpreter or a translator is used, the CB shall have procedures in place to ensure that it does not affect the validity of the examination; 5. have identified any known conflicts of interest to ensure impartial judgements are made. |  |  |  |  |  |
| 6.2.2.2 | The CB shall monitor the performance of the examiners and the reliability of the examiners' judgements. Where deficiencies are found, corrective actions shall be taken. [🡺Note] |  |  |  |  |  |
| 6.2.2.3 | If an examiner has a potential conflict of interest in the examination of a candidate, the CB shall undertake measures to ensure that the confidentiality and impartiality of the examination are not compromised. These measures shall be recorded. |  |  |  |  |  |
| **6.2.3** | **Requirements for other personnel involved in the assessment** |  |  |  |  |  |
| 6.2.3.1 | The CB shall have a documented description of the responsibilities and qualifications of other personnel involved in the assessment process (e.g. invigilators). |  |  |  |  |  |
| 6.2.3.2 | If other personnel involved in the assessment have a potential conflict of interest in the examination of a candidate, the CB shall undertake measures to ensure that confidentiality and impartiality of the examination is not compromised. These measures shall be recorded. |  |  |  |  |  |

## 6.3 Outsourcing

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| **Result of review of documents and records:** | | |  |  |  |  |

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| 6.3.1 | The CB shall have a legally enforceable agreement covering the arrangements, including confidentiality and conflict of interests, with each body that provides outsourced work related to the certification process. [🡺Note] |  |  |  |  |  |
| 6.3.2 | When a CB outsources work related to certification, the CB shall:   1. take full responsibility for all outsourced work; 2. ensure that the body conducting outsourced work is competent and complies with the applicable provisions  of this International Standard; 3. assess and monitor the performance of the bodies conducting outsourced work in accordance with its documented procedures; 4. have records to demonstrate that the bodies conducting outsourced work meet all requirements relevant to the outsourced work; 5. maintain a list of the bodies conducting outsourced work. |  |  |  |  |  |

## 6.4 Other resources

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| **Result of review of documents and records:** | | |  |  |  |  | |

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|  | The CB shall use adequate premises, including examination sites, equipment and resources for carrying out its certification activities. |  |  |  |  |  |

# 7 Records and information requirements

## 7.1 Records of applicants, candidates and certified persons

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| Findings / justification of findings / specifics / notes: | | | |
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| 7.1.1 | The CB shall maintain records. The records shall include a means to confirm the status of a certified person. The records shall demonstrate that the certification or recertification process has been effectively fulfilled, particularly with respect to application forms, assessment reports (which include examination records) and other documents relating to granting, maintaining, recertifying, expanding and reducing the scope, and suspending or withdrawing certification. |  |  |  |  |  |
| 7.1.2 | The records shall be identified, managed and disposed of in such a way as to ensure the integrity of the process and the confidentiality of the information. The records shall be kept for an appropriate period of time, for a minimum of one full certification cycle, or as required by recognition arrangements, contractual, legal or other obligations. |  |  |  |  |  |
| 7.1.3 | The CB shall have enforceable arrangements to require that the certified person informs the CB, without delay, of matters that can affect the capability of the certified person to continue to fulfil the certification requirements. |  |  |  |  |  |

## 7.2 Public information

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| **Result of review of documents and records:** | | |  |  |  |  |

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| 7.2.1 | The CB shall verify and provide information, upon request, as to whether an individual holds a current, valid certification and the scope of that certification, except where the law requires such information not to be disclosed. |  |  |  |  |  |
| 7.2.2 | The CB shall make publicly available without request information regarding the scope of the certification scheme and a general description of the certification process. |  |  |  |  |  |
| 7.2.3 | All pre-requisites of the certification scheme shall be listed and the list shall be made publicly available without request. |  |  |  |  |  |
| 7.2.4 | Information provided by the CB, including advertising, shall be accurate and not misleading. |  |  |  |  |  |

## 7.3 Confidentiality

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| **Result of review of documents and records:** | | |  |  |  |  |

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| 7.3.1 | The CB shall establish documented policies and procedures for the maintenance and release of information. |  |  |  |  |  |
| 7.3.2 | The CB shall, through legally enforceable agreements, keep confidential all information obtained during the certification process. These agreements shall cover all personnel. |  |  |  |  |  |
| 7.3.3 | The CB shall ensure that information obtained during the certification process, or from sources other than the applicant, candidate or certified person, is not disclosed to an unauthorized party without the written consent of the individual (applicant, candidate or certified person), except where the law requires such information to be disclosed. |  |  |  |  |  |
| 7.3.4 | When the CB is required by law to release confidential information, the person concerned shall, unless prohibited by law, be notified as to what information will be provided. |  |  |  |  |  |
| 7.3.5 | The CB shall ensure that the activities of related bodies do not compromise confidentiality. |  |  |  |  |  |

## 7.4 Security

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| **Result of review of documents and records:** | | |  |  |  |  | |

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| **Objective evidence / Reviewed documents (OE/RD) during the assessment:** | | | |
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| **Result of assessment:** Findings / justification of findings / sectorspecific provisions / notes: | | | |
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| 7.4.1 | The CB shall develop and document policies and procedures necessary to ensure security throughout the entire certification process and shall have measures in place to take corrective actions when security breaches occur. |  |  |  |  |  |
| 7.4.2 | Security policies and procedures shall include provisions to ensure the security of examination materials, taking into account the following:   1. the locations of the materials (e.g. transportation, electronic delivery, disposal, storage, examination centre); 2. the nature of the materials (e.g. electronic, paper,  test equipment); 3. the steps in the examination process (e.g. development, administration, results reporting); 4. the threats arising from repeated use of examination materials. |  |  |  |  |  |
| 7.4.3 | Certification bodies shall prevent fraudulent examination practices by:   1. requiring candidates to sign a non-disclosure agreement or other agreement indicating their commitment not to release confidential examination materials or participate  in fraudulent test-taking practices; 2. requiring an invigilator or examiner to be present; 3. confirming the identity of the candidate; 4. implementing procedures to prevent any unauthorized aids from being brought into the examination area; 5. preventing candidates from gaining access to unauthorized aids during the examination; 6. monitoring examination results for indications of cheating. |  |  |  |  |  |

# 8 Certification schemes

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| **8.1** | There shall be a certification scheme for each category of certification. | **SA + TA** |  |  | |  | |  | |  |
| **Result of review of documents and records:** | | | | |  |  |  | |  | |

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| **8.2** | A certification scheme shall contain the following elements:   1. scope of certification; 2. job and task description; 3. required competence; 4. abilities (when applicable); 5. prerequisites (when applicable); 6. code of conduct (when applicable).   [🡺Note 1, 2] | **SA + TA** |  |  | |  | |  | |  |
| **Result of review of documents and records:** | | | | |  |  |  | |  | |

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| **8.3** | A certification scheme shall include the following certification process requirements:   1. criteria for initial certification and recertification; 2. assessment methods for initial certification  and recertification; 3. surveillance methods and criteria  (if applicable); 4. criteria for suspending and withdrawing certification; 5. criteria for changing the scope or level  of certification (if applicable). | **SA + TA** |  |  | |  | |  | |  |
| **Result of review of documents and records:** | | | | |  |  |  | |  | |

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| **8.4** | The certification body shall have documents  to demonstrate that, in the development and review of the certification scheme, the following are included:   1. the involvement of appropriate experts; 2. the use of an appropriate structure that fairly represents the interests of all parties significantly concerned, without any interest predominating; 3. the identification and alignment of prerequisites, if applicable, with the competence requirements; 4. the identification and alignment of the assessment mechanisms with the competence requirements; 5. a job or practice analysis that is conducted and updated to:  * identify the tasks for successful performance; * identify the required competence for each task; * identify prerequisites (if applicable); * confirm the assessment mechanisms and examination content; * identify the recertification requirements and interval.   [🡺Note 1] | **SA + TA** |  |  | |  | |  | |  |
| **Result of review of documents and records:** | | | | |  |  |  | |  | |

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| **8.5** | The certification body shall ensure that the certification scheme is reviewed and validated on an on-going, systematic basis. | **SA + TA** |  |  | |  | |  | |  |
| **Result of review of documents and records:** | | | | |  |  |  | |  | |

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| **8.6** | When the certification body is not the scheme owner of a certification scheme it implements,  the certification body shall ensure that the requirements contained in this clause (Clause 8) are met. | **SA + TA** |  |  | |  | |  | |  |
| **Result of review of documents and records:** | | | | |  |  |  | |  | |

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| **Result of assessment:** Findings / justification of findings / sectorspecific provisions / notes: | | | |
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# 9 Certification process requirements

## 9.1 Application process

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| **Result of review of documents and records:** | | |  |  |  |  |

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| 9.1.1 | Upon application, the CB shall make available an overview  of the certification process in accordance with the certification scheme. As a minimum, the overview shall include the requirements for certification and its scope, a description  of the assessment process, the applicant's rights, the duties  of a certified person and the fees. |  |  |  |  |  |
| 9.1.2 | The CB shall require the completion of an application, signed by the applicant seeking certification, which includes as a minimum the following:   1. information required to identify the applicant, such as name, address and other information required by the certification scheme; 2. the scope of the desired certification; 3. a statement that the applicant agrees to comply with the certification requirements and to supply any information needed for the assessment; 4. any supporting information to demonstrate objectively compliance with the scheme prerequisites; 5. notice to the applicant of his/her opportunity to declare, within reason, a request for accommodation of special needs (see 9.2.5).   [🡺Note] |  |  |  |  |  |
| 9.1.3 | The CB shall review the application to confirm that the applicant complies with the application requirements of the certification scheme. |  |  |  |  |  |

## 9.2 Assessment process

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|  | **SA + TA** |  |  |  |  |  |
| **Result of review of documents and records:** | | |  |  |  |  |

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| 9.2.1 | The CB shall implement the specific assessment methods and mechanisms as defined in the certification scheme. |  |  |  |  |  |
| 9.2.2 | When there is a change in the certification scheme which requires additional assessment, the CB shall document and make publicly accessible without request the specific methods and mechanisms required to verify that certified persons comply with changed requirements. [🡺Note] |  |  |  |  |  |
| 9.2.3 | The assessment shall be planned and structured in a manner which ensures that the scheme requirements are objectively  and systematically verified with documented evidence to confirm the competence of the candidate. |  |  |  |  |  |
| 9.2.4 | The CB shall verify the methods for assessing candidates. This verification shall ensure that each assessment is fair and valid. |  |  |  |  |  |
| 9.2.5 | The CB shall verify and accommodate special needs, within reason and where the integrity of the assessment is not violated, taking into account national regulation [see 9.1.2 e)]. |  |  |  |  |  |
| 9.2.6 | Where the CB takes into account work performed by another body, it shall have appropriate reports, data and records to demonstrate that the results are equivalent to, and conform with, the requirements established by the certification scheme. |  |  |  |  |  |

## 9.3 Examination process

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| **Result of review of documents and records:** | | |  |  |  |  |

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| 9.3.1 | Examinations shall be designed to assess competence based on, and consistent with, the scheme, by written, oral, practical, observational or other reliable and objective means. The design of examination requirements shall ensure the comparability of results of each single examination, both in content and difficulty, including the validity of fail/pass decisions. |  |  |  |  |  |
| 9.3.2 | The CB shall have procedures to ensure a consistent examination administration. |  |  |  |  |  |
| 9.3.3 | Criteria for conditions for administering examinations shall be established, documented and monitored. [🡺Note] |  |  |  |  |  |
| 9.3.4 | When technical equipment is used in the examination process, the equipment shall be verified or calibrated where appropriate. |  |  |  |  |  |
| 9.3.5 | Appropriate methodology and procedures (e.g. collecting and maintaining statistical data) shall be documented and implemented in order to reaffirm, at justified defined intervals, the fairness, validity, reliability and general performance of each examination, and that all identified deficiencies are corrected. |  |  |  |  |  |

## 9.4 Decision on certification

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| 9.4.1 | The information gathered during the certification process shall be sufficient:   1. for the CB to make a decision on certification; 2. for traceability in the event, for example, of an appeal  or a complaint. |  |  |  |  |  |
| 9.4.2 | Decisions for granting, maintaining, recertifying, extending, reducing, suspending or withdrawing certification shall not be outsourced. |  |  |  |  |  |
| 9.4.3 | The CB shall confine its decision on certification to those matters specifically related to the requirements of the certification scheme. |  |  |  |  |  |
| 9.4.4 | The decision on certification of a candidate shall be made solely by the CB on the basis of the information gathered during the certification process. Personnel who make the decision on certification shall not have participated in the examination or training of the candidate. |  |  |  |  |  |
| 9.4.5 | The personnel who make certification decisions shall have sufficient knowledge of and experience with the certification process to determine if the certification requirements have been met. |  |  |  |  |  |
| 9.4.6 | Certification shall not be granted until all certification requirements are fulfilled. |  |  |  |  |  |
| 9.4.7 | The CB shall provide a certificate to all certified persons. The CB shall maintain sole ownership of the certificates. The certificate shall take the form of a letter, card or other medium, signed or authorized by a responsible member of the personnel of the CB. |  |  |  |  |  |
| 9.4.8 | The certificates shall contain, as a minimum, the following information:   1. the name of the certified person; 2. a unique identification; 3. the name of the CB; 4. a reference to the certification scheme, standard  or other relevant documents, including issue date,  if relevant; 5. the scope of the certification including, if applicable, validity conditions and limitations; 6. the effective date of certification and date of expiry. |  |  |  |  |  |
| 9.4.9 | The certificate shall be designed to reduce the risks of counterfeiting. |  |  |  |  |  |

## 9.5 Suspending, withdrawing or reducing the scope of certification

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| 9.5.1 | The CB shall have a policy and (a) documented procedure(s) for suspension or withdrawal of the certification, or reduction of the scope of certification, which shall specify the subsequent actions by the CB. |  |  |  |  |  |
| 9.5.2 | Failure to resolve the issues that have resulted in the suspension, in a time established by the CB, shall result in withdrawal of the certification or reduction of the scope of certification. |  |  |  |  |  |
| 9.5.3 | The CB shall have enforceable arrangements with the certified person to ensure that, in the event of suspension of certification, the certified person refrains from further promotion of the certification while it is suspended. |  |  |  |  |  |
| 9.5.4 | The CB shall have enforceable arrangements with the certified person to ensure that, in the event of withdrawal of certification, the certified person refrains from use of all references to a certified status. |  |  |  |  |  |

## 9.6 Recertification process

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| 9.6.1 | The CB shall have (a) documented procedure(s) for implement-tation of the recertification process, in accordance with the certification scheme requirements. |  |  |  |  |  |
| 9.6.2 | The CB shall ensure during the recertification process that it confirms continued competence of the certified person and ongoing compliance with current scheme requirements by the certified person. |  |  |  |  |  |
| 9.6.3 | The recertification period shall be based upon the scheme requirements. The rationale for the recertification period  shall take into account, where relevant, the following:   1. regulatory requirements; 2. changes to normative documents; 3. changes in the relevant scheme requirements; 4. the nature and maturity of the industry or field in which the certified person is working; 5. the risks resulting from an incompetent person; 6. ongoing changes in technology, and requirements  for certified persons; 7. requirements of interested parties; 8. the frequency and content of surveillance activities,  if required by the scheme. |  |  |  |  |  |
| 9.6.4 | The selected recertification activity/activities shall be adequate  to ensure that there is impartial assessment to confirm the continuing competence of the certified person. |  |  |  |  |  |
| 9.6.5 | In accordance with the certification scheme, recertification  by the CB shall consider at least the following:   1. on-site assessment; 2. professional development; 3. structured interviews; 4. confirmation of continuing satisfactory work  and work experience records; 5. examination; 6. checks on physical capability in relation  to the competence concerned.   [🡺Note] |  |  |  |  |  |

## 9.7 Use of certificates, logos and marks

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| 9.7.1 | A CB that provides a certification mark or logo shall document the conditions for use and shall appropriately manage the rights for usage and representation. [🡺Note] |  |  |  |  |  |
| 9.7.2 | The CB shall require that a certified person signs an agreement for the following reasons:   1. to comply with the relevant provisions of the certification scheme; 2. to make claims regarding certification only with respect to the scope for which certification has been granted; 3. not to use the certification in such a manner as to bring the CB into disrepute, and not to make any statement regarding the certification which the CB considers misleading or unauthorized; 4. to discontinue the use of all claims to certification that contain any reference to the CB or certification upon suspension or withdrawal of certification, and to return any certificates issued by the CB; 5. not to use the certificate in a misleading manner.   [🡺Note] |  |  |  |  |  |
| 9.7.3 | A CB shall address, by means of corrective measures, any misuse of its certification mark or logo. |  |  |  |  |  |

## 9.8 Appeals against decisions on certification

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| 9.8.1 | The CB shall have a documented process to receive, evaluate and make decisions on appeals. The appeals-handling process shall include at least the following elements and methods:   1. the process for receiving, validating and investigating the appeal, and for deciding what actions are to be taken in response to it, taking into account the results of previous similar appeals; 2. tracking and recording appeals, including actions undertaken to resolve them; 3. ensuring that, if applicable, appropriate corrections and corrective actions are taken. |  |  |  |  |  |
| 9.8.2 | The policies and procedures shall ensure that all appeals are dealt with in a constructive, impartial and timely manner. |  |  |  |  |  |
| 9.8.3 | A description of the appeals-handling process shall be publicly accessible without request. |  |  |  |  |  |
| 9.8.4 | The CB shall be responsible for all decisions at all levels of the appeals-handling process. The CB shall ensure that the decision-making personnel engaged in the appeals-handling process are different from those who were involved in the decision being appealed. |  |  |  |  |  |
| 9.8.5 | Submission, investigation and decision on appeals shall not result in any discriminatory actions against the appellant. |  |  |  |  |  |
| 9.8.6 | The CB shall acknowledge receipt of the appeal and shall provide the appellant with progress reports and the outcome. |  |  |  |  |  |
| 9.8.7 | The CB shall give formal notice to the appellant of the end of the appeals-handling process. |  |  |  |  |  |

## 9.9 Complaints

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| 9.9.1 | The CB shall have a documented process to receive, evaluate  and make decisions on complaints. |  |  |  |  |  |
| 9.9.2 | A description of the complaints-handling process shall be accessible without request. The procedures shall treat all parties fairly and equitably. |  |  |  |  |  |
| 9.9.3 | The policies and procedures shall ensure that all complaints are handled and processed in a constructive, impartial and timely manner. The complaints-handling process shall include at least the following elements and methods:   1. an outline of the process for receiving, validating, investigating the complaint and deciding what actions are to be taken in response to it; 2. tracking and recording complaints, including actions undertaken in response to them; 3. ensuring that, if applicable, appropriate corrections and corrective actions are taken. |  |  |  |  |  |
| 9.9.4 | Upon receipt of a complaint, the CB shall confirm whether the complaint relates to certification activities for which it is responsible and, if so, shall respond accordingly. |  |  |  |  |  |
| 9.9.5 | Whenever possible, the CB shall acknowledge receipt of the complaint and shall provide the complainant with progress reports and the outcome. |  |  |  |  |  |
| 9.9.6 | The CB receiving the complaint shall be responsible for gathering and verifying all necessary information to validate the complaint. |  |  |  |  |  |
| 9.9.7 | Whenever possible, the CB shall give formal notice of the end of the complaints-handling process to the complainant. |  |  |  |  |  |
| 9.9.8 | Any substantiated complaint about a certified person shall also be referred by the CB to the certified person in question at an appropriate time. |  |  |  |  |  |
| 9.9.9 | The complaints-handling process shall be subject to requirements for confidentiality, as it relates to the complainant and to the subject of the complaint. |  |  |  |  |  |
| 9.9.10 | The decision to be communicated to the complainant shall be made by, or reviewed and approved by, personnel not previously involved in the subject of the complaint. |  |  |  |  |  |

# 10 Management system requirements

## 10.1 General

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|  |  | Option A | General management system requirements (according to 10.2) | | | | | | |
|  |  | Option B | Management system requirements in accordance with ISO 9001 (according to 10.2)  ***Note:*** *In the case* *that option B was chosen, the assessors have to assess and  to review the implementation of the requirements according to clause 10.2.* | | | | | | |
| **Result of review of documents and records:** | | | | |  |  |  |  | |

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| **Objective evidence / Reviewed documents (OE/RD) during the assessment:** | | | |
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| **Result of assessment:** Findings / justification of findings / sectorspecific provisions / notes: | | | |
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|  | The CB shall establish, document, implement and maintain a management system that is capable of supporting and demonstrating the consistent achievement of the requirements of this International Standard. In addition to meeting the requirements of Clauses 4 to 9, the CB shall implement a management system in accordance with either option A or option B, as follows:   * option A: a general management system which fulfils  the requirements of 10.2; or * option B: a body that has established and maintains  a management system, in accordance with the requirements of ISO 9001, and that is capable of supporting and demonstrating the consistent fulfilment of the requirements of this International Standard (ISO/IEC 17024), fulfils the management system requirements of 10.2. |  |  |  |  |  |

## 10.2 General management system requirements

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|  | * **SA** (If no SA used: LA for 10.2.5 and 10.2.6) * **SA + TA:** For 10.2.4 and 10.2.7 |  |  |  |  | |  |
| **Result of review of documents and records:** | | |  |  |  |  | |

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| Findings / justification of findings / specifics / notes: | | | |
|  | | | |
| **Objective evidence / Reviewed documents (OE/RD) during the assessment:** | | | |
| No. | OE | Title / Description | Date / Version |
|  |  |  |  |
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| **Result of assessment:** Findings / justification of findings / sectorspecific provisions / notes: | | | |
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| **10.2.1** | **Genera**l  The CB shall establish, document, implement and maintain a management system that is capable of supporting and demonstrating the consistent achievement of the requirements of this International Standard.  The CB's top management shall establish and document policies and objectives for its activities.  The top management shall provide evidence of its commitment to the development and implementation of the management system in accordance with the requirements of this International Standard. The top management shall ensure that the policies are understood, implemented and maintained at all levels of the CB's organization.  The CB's top management shall appoint a member of management who, irrespective of other responsibilities, shall have responsibility and authority that include:   1. ensuring that processes and procedures needed for the management system are established, implemented and maintained; 2. reporting to top management on the performance of the  management system and any need for improvement. |  |  |  |  |  |
| **10.2.2** | **Management system documentation**  Applicable requirements of this International Standard shall be documented. The CB shall ensure that the management system documentation is provided to all relevant personnel. |  |  |  |  |  |
| **10.2.3** | **Control of documents**  The CB shall establish procedures to control the documents (internal and external) that relate to the fulfilment of this International Standard. The procedures shall define the controls needed to:   1. approve documents for adequacy prior to issue; 2. review and update as necessary and re-approve documents; 3. ensure that changes and the current revision status  of documents are identified; 4. ensure that relevant versions of applicable documents  are provided at points of use; 5. ensure that documents remain legible and readily identifiable; 6. ensure that documents of external origin are identified  and their distribution controlled; 7. prevent the unintended use of obsolete documents  and apply suitable identification if they are retained  for any purpose.   [🡺Note] |  |  |  |  |  |
| **10.2.4** | **Control of records**  The CB shall establish procedures to define the controls needed for the identification, storage, protection, retrieval, retention time and disposition of its records related to the fulfilment of this International Standard.  The CB shall establish procedures for retaining records for a period consistent with its contractual and legal obligations. Access to these records shall be consistent with the confidentiality arrangements. [🡺Note] |  |  |  |  |  |
| **10.2.5** | **Management review** |  |  |  |  |  |
| 10.2.5.1 | General  The CB's top management shall establish procedures to review its management system at planned intervals, in order to ensure its continuing suitability, adequacy and effectiveness, including the stated policies and objectives related to the fulfilment of this International Standard. These reviews shall be conducted at least once every 12 months and shall be documented. |  |  |  |  |  |
| 10.2.5.2 | Review input  The input to the management review shall include information related to the following:   1. results of internal and external audits  (e.g. accreditation body assessment); 2. feedback from applicants, candidates, certified persons  and interested parties related to the fulfilment of this International Standard; 3. safeguarding impartiality; 4. the status of preventive and corrective actions; 5. follow-up actions from previous management reviews; 6. the fulfilment of objectives; 7. changes that could affect the management system; 8. appeals and complaints. |  |  |  |  |  |
| 10.2.5.3 | Review output  The output from the management review shall include as a minimum decisions and actions related to the following:   1. improvement of the effectiveness of the management system and its processes; 2. improvement of the certification services related to the fulfilment of this International Standard; 3. resource needs. |  |  |  |  |  |
| **10.2.6** | **Internal audits** |  |  |  |  |  |
| 10.2.6.1 | The CB shall establish procedures for internal audits to verify that it fulfils the requirements of this International Standard and that the management system is effectively implemented and maintained. [🡺Note] |  |  |  |  |  |
| 10.2.6.2 | An audit programme shall be planned, taking into consideration the importance of the processes and areas to be audited, as well as the results of previous audits. |  |  |  |  |  |
| 10.2.6.3 | Internal audits shall be performed at least once every 12 months. The frequency of internal audits may be reduced if the CB demonstrates that its management system continues to be effectively implemented in accordance with this International Standard and has proven stability. |  |  |  |  |  |
| 10.2.6.4 | The CB shall ensure that:   1. internal audits are conducted by competent personnel, knowledge-able in the certification process, auditing and the requirements of this International Standard; 2. auditors do not audit their own work; 3. personnel responsible for the area audited are informed  of the outcome of the audit; 4. any actions resulting from internal audits are taken in a timely and appropriate manner; 5. any opportunities for improvement are identified. |  |  |  |  |  |
| **10.2.7** | **Corrective actions**  The CB shall establish (a) procedure(s) for identification and management of nonconformities in its operations. The CB shall also, where necessary, take actions to eliminate the causes of nonconformities in order to prevent recurrence. Corrective actions shall be appropriate to the impact of the problems encountered. The procedures shall define requirements for the following:   1. identifying nonconformities; 2. determining the causes of nonconformity; 3. correcting nonconformities; 4. evaluating the need for actions to ensure  that nonconformities do not recur; 5. determining and implementing the actions needed  in a timely manner; 6. recording the results of actions taken; 7. reviewing the effectiveness of corrective actions. |  |  |  |  |  |
| **10.2.8** | **Preventive actions**  The CB shall establish (a) procedure(s) for taking preventive actions to eliminate the causes of potential nonconformities. Preventive actions taken shall be appropriate to the probable impact of the potential problems. The procedures for preventive actions shall define requirements for the following:   1. identifying potential nonconformities and their causes; 2. evaluating the need for action to prevent the occurrence  of nonconformities; 3. determining and implementing the action needed; 4. recording the results of actions taken; 5. reviewing the effectiveness of the preventive actions taken.   [🡺Note] |  |  |  |  |  |

# Further issues of the assessment

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| **Additional requirements** | | **Responsible** | **Reference documents** | **Appraisal** | | | | **No. of** |
|  | |  | **for the implementation** | **1** | **2** | **3** | | **NC** |
| * **Use of the accreditation symbol / References to the accreditation** | **SA** (If no SA used: LA) | |  |  |  |  | |  |
| Compliance of the rule 71 SD 0 011 on the use of the accreditation symbol in certificates, business letters, offers, letterhead, website, other documents and advertising media as well as on other cross references to the accreditation **(Not applicable for the assessment for initial accreditation)** | | |
| **Result of review of documents and records:** | | | |  |  | |  |  | |

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| Findings / justification of findings / specifics / notes: | | | |
|  | | | |
| **Objective evidence / Reviewed documents (OE/RD) during the assessment:** | | | |
| No. | OE | Title / Description | Date / Version |
|  |  |  |  |
|  |  |  |  |
| **Result of assessment:** Findings / justification of findings / sectorspecific provisions / notes: | | | |
|  | | | |

|  | **Compliance of relevant IAF-Rules** | | **Responsible** | **Reference documents** | **Appraisal** | | | **No. of** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | |  | **for the implementation** | **1** | **2** | **3** | **NC** |
| **IAF MD 4** | IAF Mandatory Document for the Use of Information and Communication Technology (ICT) for Auditing/Assessment Purposes | | **SA + TA** |  |  |  |  |  |
| Applicable: | Yes | No |  | | | | | |

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| Remarks: |  |

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| * Is the certification body notified for the assessed scope in the frame of **EU directives/modules or is the notification requested**? | | | **SA + TA** |  |  | | | |
| Yes | No | | | | | | | |
| * Implementation of additional requirements according to relevant **directives/modules** (taking into account  EA 2/17, Decision No. 768/2008/EC) | | | **SA + TA** |  |  |  |  |  |
| Yes | No | Not applicable | **If the answer is „Yes“ or „No“, please note the next line!** | | | | | |

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| Remarks: | *If the previous question was answered in the affirmative, this field must explicitly address the implementation of the essential directive-specific requirements by the certification body with reference to the applicable articles of the directive (corresponding to article R 17 of decision 768/2008/EC) (e.g. independence, subcontracting, participation in the coordination group, notification obligations to the notifying authority).* |

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| * Fulfilment of imposed conditions and implementation of the corrective actions from the previous assessment | | | **SA + TA** |  |
| Yes | No | Not applicable | | |

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| Remarks: |  |

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| **Preliminary assessment of documents and records completed on:** |  |

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| --- | --- | --- | --- | --- |
| **No. of non-conformities:** | Non critical: |  | Critical: |  |

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| **Reductions of the scope of accreditation (indication of certification methods):** |

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| **Summary, remarks and improvement potential** |
| Appropriateness of personnel and other resources • fulfilment of additional requirements (e. g. flexible scope accreditation) •  overall impression with respect to the certification body’s particularities, strengths and areas requiring improvement, appraisal  of the appropriateness and effectiveness of the quality system including potential for improvement • final evaluation • key  aspects/considerations for the following assessment, if applicable |

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| **Recommendation on accreditation:**[[6]](#endnote-6)), [[7]](#endnote-7)) | | | **Yes** | **No** | |
| Place: |  | Date: |  | Signed *Assessor Name:* | [[8]](#endnote-8) |

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| **Report reviewed by the case manager:** | | |  | | |
| Place: |  | Date: |  | Signed *Case manager:* |  |

Note: The assessor does not confirm the complete correctness of the reference documents of the conformity assessment body.

\* Grading of fulfilment the requirements of a section of the standard to be entered by the assessor:

1 **No** non-conformity

2 **Non critical** non-conformity

3 **Critical** non-conformity

\*\* NC = Non-conformity

1. Under assessment type, the assessment technique is to be indicated, whereby several assessment types can be used in the context of an assessment. Please select the applicable element or combination of elements from the following options to indicate the type of assessment:

   On-site assessment / Remote assessment / Witness audit (on-site) / Witness audit (remote) / Witness examination / Document review / Other assessment activity (please specify if necessary) [↑](#endnote-ref-1)
2. Status in the assessment team: LA=Lead Assessor; SA=System Assessor; TA=Technical Assessor; O=Observer [↑](#endnote-ref-2)
3. Only if the review of documents and records reveals that an assessment cannot be performed, the assessor prepares   
   a separate partial assessment report/checklist for the review of documents and records according to this form. [↑](#endnote-ref-3)
4. As an alternative to entering the OE/RD here, the separate form provided for this purpose can be used. [↑](#endnote-ref-4)
5. “Objective evidence” are to be distinguished from „Reviewed documents“ by marking with a cross „x“. [↑](#endnote-ref-5)
6. In the closing meeting the laboratory was informed about the preliminary result of the assessment, non-conformity reports   
   were handed over, if applicable. [↑](#endnote-ref-6)
7. Subject to a sufficient correction of non-conformities [↑](#endnote-ref-7)
8. This report was prepared personally by on . [↑](#endnote-ref-8)