**Application form for**

**Certification Body Accreditation**

**Revision 06**

**January 2019**

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| **AUTHOR** | **REVIEWER** | **APPROVER** |
| Md. Towhidur RahmanAssistant Director | Md. Nasirul IslamDeputy Director | Md. Monwarul IslamDirector General |

**Application for Certification Body Accreditation to ISO/IEC 17021-1: 2015 -Requirements for bodies providing audit and certification of management systems**

Bangladesh Accreditation Board (BAB) is the National Accreditation Authority established in 2006 as an autonomous organization upgrading the quality assurance infrastructure and conformity assessment procedures in Bangladesh and enhancing the recognition and acceptance of products and services in international, regional and domestic markets. This board offers accreditation for different types of Conformity Assessment Bodies in accordance with the international principles.

**Instructions:**

1. This application form should be completed in full and returned with two copies of the applicant organization's Quality Manual, application fee and other associated documents.
2. Bank Draft / Pay Order for the application fee should be made payable and other relevant documents submitted to:

**Bangladesh Accreditation Board (BAB)**

1. Additional information may be provided by the applicant organization on supplementary sheets, which should be clearly cross-referenced with the question numbers to which they refer.
2. Accreditation fee excluding VAT and Tax. Applicant shall pay VAT and Challan is to be submitted with payment
3. Additional information may be obtained from the BAB website.
4. Award of accreditation will be subject to the applicant organization agreeing to and complying with the Accreditation requirements, the BAB Terms and Conditions, and the other components of the legally enforceable BAB agreement for Accreditation. The meaning and scope of such Accreditation Criteria and Contract are defined in the BAB Terms and Conditions available on the BAB website at [**http://www.bab.org.bd**](http://www.bab.org.bd/)
5. Please refer to relevant BAB policies, mandatory and guidance documents available from the BAB website.

We apply for BAB accreditation of our Certification Body as per details given below:

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| ⬜ Initial Accreditation⬜ Renewal of Accreditation⬜ Extension of Scope |
| Pre-Assessment Requested\* | Yes | ⬜ |  No | ⬜ |  |

\* Note that all certification bodies that have never been accredited MUST undergo a pre-assessment

**Section-1: General Information**

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| **1.** | **Name, address, telephone, fax and e-mail of the applicant**  |
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| Name: |
| Postal Address: |
| Post code: |
| Telephone: |  | Fax: |
| Mobile: |  |
| E-mail: |  |
| Note: these details will be used in BAB directories, certificates etc. |

**If the organization is operating at multi sites, then complete 2 under. If not then go to 3**

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| **2.** | **Name of the facility/site, address, telephone, fax and e-mail of the applicant** |
| Name of the facility/site: |
| Postal Address: |
| Post code: |
| Telephone: |  | Fax: |
| Mobile: |  |
| E-mail: |  |
| Facility/site web address (optional): |
| Note: these details will be used in BAB directories, certificates etc. |

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| **5.** | **Name and position of the organization's representative with authority to commit the applicant organization to the requirements for accreditation.** |
| Name (nominated person): |
| Position: |
| Address (business postal): |
| Telephone: | Fax: |
| Mobile: | E-mail: |
| I hereby nominate the above person to be our authorized representative. The applicant hereby agrees to be bound by the Bangladesh Aaccreditation Act, 2006, Regulations of BAB and the Terms and Condition for Accreditation SP01. |
| Name of Nominating Person: |
| Signature: | Date: |
| Acceptance of Nomination (to be completed by the nominated authorized representative) |
| I, the above mentioned nominated person hereby accept nomination as the facility's authorized representative. I undertake to use my best endeavors to ensure compliance with the BAB Act 2006, Regulations of BAB and the Terms and Condition for Accreditation SP01. I am authorized, on the accreditation of the facility to enter my name, as the facility's authorized representative, in the register of members. |
| Signature of authorized representative: | Date: |

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| **7.** | **Name and position of the applicant organization's main contact with Bangladesh Accreditation Board (BAB). (This is the person to whom all correspondence from BAB will be addressed).** |
| Name: |
| Position: |
| Address (business postal): |
| Telephone: | Fax: |
| Mobile: | E-mail: |

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| **8.** | **Name and position of the applicant organization's deputy contact with Bangladesh Accreditation Board (BAB). (This is the person to whom all correspondence from BAB will be addressed if main contact are unavailable).** |
| Name: |
| Position: |
| Address (business postal): |
| Telephone: | Fax: |
| Mobile: | E-mail: |

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| **9.** | **Invoicing Contact Name, address, telephone, fax and e-mail**  |
| Name: |
| Position: |
| Address (business postal): |
| Telephone: | Fax: |
| Mobile: | E-mail: |

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| **10.** | **Additional information** |
| Is the Quality Manual attached with Application form submission: | Yes |  |  No |  |  |
| If yes, how many copies are attached **(BAB requires 2 copies of quality manual)** |  |
| If no, please give the reason |  |
| **11** | **Application Fee** (Please note that BANK DRAFT/PAY ORDER is the only method for payment) |
| Is the Bank Draft/Pay Order attached?  | Yes |  |  No |  |  |
| Bank Draft/Pay Order No: |  |
| Dated: |  |
| Name of Payer Bank: |  |
| Bank Draft/Pay Order issued to: | Bangladesh Accreditation Board (BAB) |
| Amount (in digit): |  |
| Amount (in words): |  |
| **12** | **Legal Documents** |
| Registraion No: |  |
| Is the Document of Registraion attached? | Yes |  |  No |  | Details: |
| License No: |  |
| Is the Document of License attached? | Yes |  |  No |  | Details: |
| If the Certification Body is part of government, mention the Act/Ordinance etc. on which the Certification Body has been established |  |
| **14** | **Other Documents (with version/revision and date)** |
| a |  |  |
| b |  |  |
| c |  |  |

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| **15** | **Completed by those applicants that have been accredited earlier by foreign Accreditation Body (AB)** |
| Name and address of Accreditation body: |
| Date of last surveillance visit by foreign AB |
| Accreditation number (unique identification of accreditation) |
| Scope of accreditation, Please the standard against which accreditation has been granted (see section 6) |
| Do you wish BAB to conduct pre-assessment prior to Assessment: | Yes 🗆 No 🗆 |

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| **16.** | **Declaration/undertaking**  |
| The applicant is familiar with, and will follow the requirements for accreditation as given in BAB terms and condition SP01 and BAB’s general guidelines. The applicant will give BAB the possibility to ensure that the requirements for accreditation are fulfilled. The applicant will give the personnel from BAB – including hired assessors – access to documents, personnel and accommodations that are considered necessary by BAB. The applicant accepts the economic conditions given in BAB SP04 (accreditation fees schedule) and will meet its contractual obligations independent of an accreditation being granted or not. The undersigned is authorised to sign on behalf of the applicant. |
| Name and authority of signing person | Signature with date |

**SECTION-2: Specific Inormation**

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|  **STANDARD – PLEASE INDICATE WHICH STANDARD OF ACCREDITATION YOU ARE APPLYING FOR**  |
| ISO/IEC 17021-1 (QMS - Quality) | ☐ | ISO/IEC 17065 (Product / Process / Service) | ☐ |
| ISO/IEC 17021-1 (EMS - Environmental) | ☐ |
| ISO/IEC 17021-1 (FSMS - Food Safety) | ☐ | ISO/IEC 17024 (Certification of Persons) | ☐ |
| ISO/IEC 17021-1 (EnMS - Energy) | ☐ | ISO 14065 (Greenhouse Gas Verification) | ☐ |
| ISO/IEC 17021-1 (ISMS - Information Security) | ☐ | Other (please specify below): | ☐ |
| ISO/IEC 17021-1 (ITSMS - IT Service) | ☐ |
| ISO/IEC 17021-1 (H&SMS - Health & Safety) | ☐ |
| ISO/IEC 17021-1 (ABMS - Anti-Bribery) | ☐ |
| ISO/IEC 17021-1 (CMS - Competence) | ☐ | Is this application linked to an application to a Bangladeshi competent authority for the purposes of appointment as a notified body? (If ‘Yes’ then  **please provide details below**):**\*** Please ensure that your organisation has communicated BAB to share relevant information with the competent authority. | **Yes\* No**☐ ☐ |
| ISO/IEC 17021-1 (AMS - Asset Management) | ☐ |
| ISO/IEC 17021-1 (BCMS - Business Continuity) | ☐ |
| ISO/IEC 17021-1 (SCSMS - Supply Chain Security) | ☐ |
| ISO/IEC 17021-1 (PSCMS - Private Security Companies) | ☐ |
| ISO/IEC 17021-1 + sector scheme(s) e.g. **TickIT** (please describe below): | ☐ |

*Please complete a separate application form for each standard.*

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| **ADDITION OF KEY LOCATION AND/OR ACTIVITIES TO BE PERFORMED AT KEY LOCATION(S)** |
| **Location Address** | **Country** | **Activities to be performed at this location** | **Does this location hold accreditation with another EA/IAF MLA signatory? If yes please specify.** |
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| **Defining the Scope for BAB Accreditation**Scope descriptions need to be stated in the following manner: |
| ISO/IEC 17021-1 (AMS), (BCMS), (EMS), (H&SMS), or (QMS) |  Please state in terms of IAF Reference code (as listed IAF ID 1:2014) For QMS, please also state whether this is for ISO 9001 and/or ISO 13485 Where you require a limitation within a IAF code, please describe the limited activities you require to the relevant IAF code in terms of the NACE Industrial Classification Codes |
| ISO/IEC 17021-1 (FSMS) | Please state ISO/TS 22003 Category Code(s) as listed in Annex A |
| ISO/IEC 17021-1 (ISMS), (ITSMS), (PSCMS) | No scope definition required |
| ISO/IEC 17021-1 (SCSMS) | No scope definition required; please state if ISO 28007-1 is included |
| ISO/IEC 17021-1 (EnMS) | Please state ISO/IEC 50003 Technical Areas as listed in clause 6.3 |
| ISO/IEC 17021-1 (CMS) | Please state the specific scheme |
| ISO/IEC 17021-1 (ABMS) | Please state Scope Description Groups and geographical scoping  |
| Sector Schemes | Please list the sector scheme(s) and enter the specific scope detailed in the relevant sector scheme |
| ISO/IEC 17065 or ISO/IEC 17024 | Please state in terms of the applicable standards and/or schemes |
| ISO 14065 |  Please state the specific scheme* Refer to relevant national/International regulations
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| **With respect to your Management System, which *Option* does your organisation follow (as outlined in ISO/IEC 17021-1 Section 10, ISO/IEC 17065****Section 8.1 or ISO/IEC 17024 Section 10)?** |
| Option A **☐**  | Option B **☐** |

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| **COUNTRIES WHERE THE CERTIFICATION WILL OPERATE** |
|  | **Number** | **Countries of Operation** |
| **Existing clients in new scope area** |  |  |
| **Potential clients in new scope area** |  |  |

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| **SCOPE(S) REQUESTED** |
| **No.** | **CODE/SCHEME****(If Applicable)** | **Scope Description** |
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| **Required documents to be submitted**The certification Body must submit the following documents, as a minimum, where it is applicable. Applications submitted with no supporting documentation will not be accepted. |
| **DOCUMENTATION** | **‘Check’ if supplied** | **Justification for non-submission** |
| Evidence of development activities, in accordance with your design process, leading to the implementation of the new/existing certification activity. | ☐ |  |
| Evidence of the involvement of the Scheme/Impartiality committees in the certification activities applied for. | ☐ |  |
| Evidence to demonstrate auditor, contract review and decision maker competence for the certification activities applied for (e.g. – Competence Criteria, CVs, witnessed audits, competence tests). | ☐ |  |
| Competence Criteria relating to the certification activity that is being applied for and details as to how it has been defined. | ☐ |  |
| Copies of any revised/procedures required for the certification activity applied for. | ☐ |  |
| Calculation of audit time/man-day according to IAF MD 11 for integrated systems. | ☐ |  |
| Where the application relates to the addition of a new critical location: Copies of any agreement(s) with subsidiary/different legal entity established at the critical location along with the documentation stated above to demonstrate the competence of operations at the critical location. | ☐ |  |
| Any other relevant document of organisation to be audited. | ☐ |  |

**Questionnaire**

| **ISO/IEC 17021-1:2015 and** **IAF Mandatory Documents (as applicable)** | **CB documents References with clause no.** | **Conforms (AB to complete)****Yes/No** | **AB Comments****Include date new comment is added** |
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| 5.1.1 Legal entity. |  |  |  |
| 5.1.2 Certification agreement. |  |  |  |
| 5.1.3 Responsibility for certification decisions. |  |  |  |
| 5.2.1 Conformity assessment activities shall be impartial. CB shall be responsible and not allow commercial, financial or other pressures. |  |  |  |
| 5.2.2 Top management commitment to impartiality. Policy on impartiality. |  |  |  |
| 5.2.3 Impartiality analysis and top management review of residual risk to determine acceptable level of risk. |  |  |  |
| 5.2.4 Not certifying another CB for its quality management systems. |  |  |  |
| 5.2.5 No management systems consultancy. |  |  |  |
| 5.2.6 No internal audits of certified clients. |  |  |  |
| 5.2.7 Not certifying a client when the CB’s relationship with a management systems consultancy for a minimum of two years.  |  |  |  |
| 5.2.8 Not outsourcing audits to a management system consultancy organization. |  |  |  |
| 5.2.9 No CB marketing linked to management systems consultancy. |  |  |  |
| 5.2.10 Ensuring no conflict of interest of personnel. |  |  |  |
| 5.2.11 Response to any threats to impartiality. |  |  |  |
| 5.2.12 Personnel, internal and external, and committees shall act impartially. |  |  |  |
| 5.2.13 Requiring personnel, internal and external, to reveal any potential conflict of interest. |  |  |  |
| 5.3.1 Risk and liability analysis. |  |  |  |
| 5.3.2 Evaluation of finances and sources of income for threats to impartiality, and review by the impartiality committee. |  |  |  |
| 6.1.1 Organizational structure documented, including duties, responsibilities and authorities for personnel and committees, and relationships to any other parts of the organization. |  |  |  |
| 6.1.2 Structured and managed to safeguard impartiality. |  |  |  |
| 6.1.3 Top management authority and responsibility. |  |  |  |
| 6.1.4 Formal rules for committees. |  |  |  |
| 6.2.1 CB shall have a process for the effective control of certification activities. CB shall consider the risk that these activities. |  |  |  |
| 6.2.2 CB shall consider the appropriate level and method of control of activities undertaken. |  |  |  |
| 7.1.1 Processes for determining and demonstrating competence of all personnel involved in certification. |  |  |  |
| 7.1.2 Documented process for determining competence criteria. |  |  |  |
| 7.1.3 Documented processes for the initial evaluation and ongoing monitoring of competence and performance. |  |  |  |
| 7.1.4 Access to necessary technical expertise. |  |  |  |
| 7.2.1 Competence of personnel managing audit programs. |  |  |  |
| 7.2.2 Access to sufficient auditors and technical experts |  |  |  |
| 7.2.3 Informing each person of their duties, responsibilities and authorities. |  |  |  |
| 7.2.4 Defined processes for selecting, training, authorizing and monitoring of auditors, and selection of experts, including the observation of an on-site audit for initial competence evaluation. |  |  |  |
| 7.2.5 Documented processes for achieving and demonstrating effective auditing, including the use of auditors with generic auditing knowledge and skills and knowledge and skills for auditing in specific technical areas.  |  |  |  |
| 7.2.6 Ensuring auditors/experts familiar with processes and requirements and access to up-to-date documented procedures and instructions. |  |  |  |
| 7.2.7 Identification of training needs, provision of training and use of auditors/experts and other personnel with demonstrated competence. |  |  |  |
| 7.2.8 Certification decisions by personnel who understand standard and certification requirements and have demonstrated competence to evaluate the outcomes of audit processes. |  |  |  |
| 7.2.9-7.2.11 Documented procedures for monitoring and measurement of performance and competence of personnel involved in audit and certification activities, including on-site observation. |  |  |  |
| 7.3 Written agreement for external auditors/experts. |  |  |  |
| 7.4 Up-to-date personnel records. |  |  |  |
| 7.5.1 Process and legally enforceable arrangements for outsourcing. |  |  |  |
| 7.5.2 Not outsource the certification decision. |  |  |  |
| 7.5.3 CB responsibility for outsourced certification activities. |  |  |  |
| 7.5.4 Process for approval and monitoring of all bodies that provide outsourced services. Records of competence maintained.  |  |  |  |
| 8.1.1 CB shall maintain and make public without request, information. |  |  |  |
| 8.1.2 CB shall provide upon request information. |  |  |  |
| 8.1.3 Information provided is accurate and not misleading. |  |  |  |
| 8.2.1-8.2.2 Certification documents content. |  |  |  |
| 8.3.1 CB policy governing any mark it authorizes certified clients to use. |  |  |  |
| 8.3.2 CB shall not permit its marks to be applied to laboratory test, calibration or inspection reports. |  |  |  |
| 8.3.3 Rules for governing use of any statement on product packaging or accompanying information. |  |  |  |
| 8.3.4 CB’s requirements of the client organization regarding reference to certification. |  |  |  |
| 8.3.5 CB ownership of marks and reports and control of use and references. |  |  |  |
| 8.4.1-8.4.7 Policy and arrangements to safeguard confidentiality. |  |  |  |
| 8.5.1 Information provided by the CB to its clients. |  |  |  |
| 8.5.2 Notice to clients of changes by the CB. |  |  |  |
| 8.5.3 Notice to the CB of changes by a client. |  |  |  |
| 9.1.1 Application and required information. |  |  |  |
| 9.1.2 Application review by CB. |  |  |  |
| 9.1.3.1 Development of an audit program for the full certification cycle. |  |  |  |
| 9.1.3.2 Audit program for initial, surveillance and recertification. Three-year certification cycle and subsequent cycles. |  |  |  |
| 9.1.3.3 Surveillance audits at least once in a calendar year. |  |  |  |
| 9.1.3.4 Taking account of certification or other audits. |  |  |  |
| 9.1.3.5 Consideration for shift work. |  |  |  |
| 9.1.4 Documented procedures for determining auditor time, justification and records, including 9.1.4.1 through 9.1.4.4. |  |  |  |
| 9.1.5 Program for multi-site sampling. |  |  |  |
| 9.1.6 Audit planning for multiple management systems |  |  |  |
| 9.2.1.1-9.2.1.2 Determining audit objectives. |  |  |  |
| 9.2.1.3 Determining audit scope. |  |  |  |
| 9.2.1.4 Determining audit criteria. |  |  |  |
| 9.2.2.1 Process for selecting and appointing audit teams for competence needed, including 9.2.2.1.1 through 9.2.2.1.5. |  |  |  |
| 9.2.2.2 Program for use of observers, technical experts and guides; includes 9.2.2. 2.1 through 9.2.2.2.3. |  |  |  |
| 9.2.3 Preparation of the audit plan and related communications; includes 9.2.3.1 through 9.2.3.2. |  |  |  |
| 9.2.3.3 Communicating the defined tasks of the audit team to the audit team and client. |  |  |  |
| 9.2.3.4 Audit plan and dates communicated to client. |  |  |  |
| 9.2.3.5 Providing information about audit team members to provide the client sufficient time to object. |  |  |  |
| 9.3.1 Initial certification audit in two stages. |  |  |  |
| 9.3.1.2 Stage 1 audit; includes 9.3.1.2.1 through 9.3.1.2.2 |  |  |  |
| 9.3.1.2.3 Stage 1 audit readiness, and concerns communicated to the client. |  |  |  |
| 9.3.1.2.4 Interval between stage 1 and 2 and consideration of stage 2 audit arrangements based on stage 1 audit findings. |  |  |  |
| 9.3.1.3 Stage 2 audit process. |  |  |  |
| 9.3.1.4 Analysis of stage 1 and stage 2 audit information and evidence for initial certification audit conclusions. |  |  |  |
| 9.4.1 Process for conducting on-site audits. |  |  |  |
| 9.4.2 Conducting the opening meeting. |  |  |  |
| 9.4.3 Communication during the audit; includes 9.4.3.1 through 9.4.3.3. |  |  |  |
| 9.4.4 Obtaining and verifying information; includes 9.4.4.1 and 9.4.4.2 |  |  |  |
| 9.4.5 Identifying and recording audit findings to enable an informed certification decision; includes 9.4.5.1 through 9.4.5.4. |  |  |  |
| 9.4.6 Preparing audit conclusions. |  |  |  |
| 9.4.7 Conducting the closing meeting; includes 9.4.7.1 through 9.4.7.3. |  |  |  |
| 9.4.8.1 Written audit report for each audit. |  |  |  |
| 9.4.8.2 and 9.4.8.3 Audit team leader responsible for the content of the audit report, which shall provide an accurate, concise and clear record of the audit to enable an informed decision, including a through r. |  |  |  |
| 9.4.9 CB requirements for client to analyze cause and describe correction and corrective actions within a defined time. |  |  |  |
| 9.4.10 CB review of corrections, identified causes, and corrective action by client to determine these are acceptable. CB shall verify effectiveness of actions. Evidence shall be recorded. Client shall be informed of the review and verification. |  |  |  |
| 9.5.1.1 Certification decision by person(s) different from those that carried out the audits and has appropriate competence. |  |  |  |
| 9.5.1.2 Certification decision by person(s) employed by, or under legally enforceable arrangement; includes 9.5.1.3. |  |  |  |
| 9.5.1.4 Record of each certification decision. |  |  |  |
| 9.5.2 Actions prior to making a decision. |  |  |  |
| 9.5.3.1 Minimum information for the initial certification decision. |  |  |  |
| 9.5.3.2 Time restriction for closure of major nonconformities from stage 2. |  |  |  |
| 9.5.3.3 Transfer certification information sufficient for decision. |  |  |  |
| 9.5.4 Information for granting recertification. |  |  |  |
| 9.6.1 Maintaining certification – demonstration of continued satisfaction of the requirements. |  |  |  |
| 9.6.2.1.1-9.6.2.1.2 Surveillance activities. |  |  |  |
| 9.6.2.2 Surveillance audit content. |  |  |  |
| 9.6.3.1.1 Recertification audit planning to evaluate continued conformity and effectiveness of the management system as a whole. |  |  |  |
| 9.6.3.1.2 Recertification activity shall consider performance over the period of certification, including review of surveillance audit reports. |  |  |  |
| 9.6.3.1.3 For recertification audit planning consideration of the need for a stage 1 for significant changes. |  |  |  |
| 9.6.3.2.1 Recertification audit shall include an on-site audit that addresses effectiveness, improvement, and achievement of policies and objectives. |  |  |  |
| 9.6.3.2.2 Time limit and verification of corrective action(s) for major nonconformities before expiry date.  |  |  |  |
| 9.6.3.2.3 Process for recertification based on existing expiry date when recertification activities completed prior expiry date. |  |  |  |
| 9.6.3.2.4 Process for recertification when corrective actions for major nonconformities are not implemented before expiry date. |  |  |  |
| 9.6.3.2.5 Process for restoration of expired certification. |  |  |  |
| 9.6.4.1 Process for expansion of scope including special audits. |  |  |  |
| 9.6.4.2 CB process for short notice audits in response to complaints or suspension. |  |  |  |
| 9.6.5.1-9.6.5.5 Suspending, withdrawing or reducing certification process(es). |  |  |  |
| 9.7.1-9.7.8 Appeals process. |  |  |  |
| 9.8.1-9.8.11 Complaints process. |  |  |  |
| 9.9.1-9.9.4 Records on clients and applicants. |  |  |  |
| 10.1 Management system requirements options A or B – indicate option selected. |  |  |  |
| 10. 2 Option A: General management system requirements |  |
| 10.2 1 General management system requirements |  |  |  |
| 10.2.2 Management system manual or associated documents |  |  |  |
| 10.2.3 Control of documents process. |  |  |  |
| 10.2.4 Control of records process. |  |  |  |
| 10.2.5 Management review process; includes 10.2.5.1 through 10.2.5.3. |  |  |  |
| 10.2.6 Internal audit process; includes 10.2.6.1 through 10.2.6.4. |  |  |  |
| 10.2.7 Corrective action process |  |  |  |
| 10.3 Option B: based on ISO 9001 |  |
| 10.3.1 System in accordance with ISO 9001 that supports ISO 17021-1. |  |  |  |
| 10.3.2 Management system scope. |  |  |  |
| 10.3.3 Customer focus considerations. |  |  |  |
| 10.3.4 Management review additional inputs. |  |  |  |
| IAF MD 1 Certification of Multiple Sites Based on Sampling |  |  |  |
| IAF MD 2 Transfer of Accredited Certification of Management Systems  |  |  |  |
| IAF MD 3 Advanced Surveillance and Recertification Procedures (ASRP)  |  |  |  |
| IAF MD 4 Use of Computer Assisted Auditing Techniques (CAAT) for Accredited Certification of Management Systems |  |  |  |
| IAF MD 5 Duration of QMS and EMS Audits  |  |  |  |
| IAF MD 9 Application of ISO/IEC 17021 in Medical Device Quality Management Systems (ISO 13485) |  |  |  |
| IAF MD 11 Application of ISO/IEC 17021 Audits of Integrated Management Systems (IMS) |  |  |  |
| IAF MD 15 Collection of Data to Provide Indicators of Management System Certification Bodies’ Performance |  |  |  |
| Relevant MD documents, if necessary |  |  |  |

**Information on BAB**

Before lodging an application for accreditation, you should closely examine the following documents:

* 1. BAB Accreditation Procedure;
	2. The international standard applicable to the accreditation;
	3. The application document relevant to your area of operation;
	4. BAB’s Terms and Condition for maintaining Accreditation (SP01).
	5. BAB fee schedule for Certification and Inspection Bodies(SP04)

BAB staff will be pleased to answer any questions you may have on BAB’s requirements for accreditation or the processing of your application for accreditation.

**Privacy**

BAB respects and upholds the rights of individuals to privacy protection under the National Privacy Principles. A copy of BAB’s Privacy Policy can be obtained from the BAB website. This policy describes how BAB manages the personal information we hold.