



Accreditation Board For International Standards

**APPLICATION FOR
ACCREDITATION OF INSPECTION BODY**

You may require about 30 minutes to fill in this form.

PART 1 – ORGANISATION DATA

1. Inspection Organisation

Name of Organisation:

Address:

Tel:

Fax:

Email:

2. Inspection Body (if different from inspection organisation)

Name of Organisation:

Address:

Tel:

Fax:

Email:

3. Authorised Representative

Signature:

Name:

Designation:

4. Field(s)/ Area(s) of Inspection



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5. Scope of Accreditation

Please complete the following table as precisely as possible and include, wherever possible, standard methods and specifications involved. These may be national, international standards or the inspection body's documented procedures. The title of the method or specification, its number and date of issue should be listed.

(Use extra sheets if necessary)

Items, Materials or Systems Inspected:	Specific Types of Inspection:	Standards/ Codes or Specific Inspection Method:	Inspection frequency per year



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6. Inspection Equipment

Please provide the list of equipment used to perform the inspections for which accreditation is sought and the calibration status of the equipment.
(Use extra sheets if necessary)

Equipment (Name, Made, Capacity, etc.)	Calibration Status		
	Calibration Organisation	Frequency of Calibration	Date of Last Calibration



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7. Key Personnel

a. Please list the names, technical qualifications and relevant experience of the following staff

i. Technical Manager (or equivalent) of inspection body

Name:	Designation:
Technical Qualifications:	
Relevant Experience:	

ii. Quality Manager (or equivalent) of inspection body

Name:	Designation:
Technical Qualifications:	
Relevant Experience:	

iii. Deputy Technical Manager (or equivalent) of inspection body

Name:	Designation:
Technical Qualifications:	
Relevant Experience:	

iv. Deputy Quality Manager (or equivalent) of inspection body

Name:	Designation:
Technical Qualifications:	
Relevant Experience:	



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b. Number of staff in inspection body

	Full Time	Part Time
Professional:		
Technical:		
Administrative:		

8. Approved Signatories' Particulars

Please provide the list of approved signatories with their particulars and scope of inspection. (Use extra sheets if necessary)

The approved signatory's detailed resume and training records relevant to the applied areas of inspection must be attached.

Name:	Designation:
Qualifications:	
Professional Memberships:	
Inspection/ Experience:	
Familiarity with standards: (state standards and degree of familiarity in their use)	
Scope of Inspection:	



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PART 2 – INFORMATION ABOUT ORGANISATION/INSPECTION BODY

Date of establishment:

Country of Origin:

Others: (please specify)

Legal Status (e.g. Limited Company, partnership, local authority, etc)

Is inspection the main activity of the parent company?

- Yes
 No, describe the main activities of the parent company

Which type of inspection body is your organisation, as defined in ISO/IEC 17020 clause 4.2?

- Type A
 Type B
 Type C

Does your organisation carry out inspection work International (If yes, please specified the types of inspection works and the countries in which they are carried out)

Which are the industries that your inspection activities are supporting? (E.g. Precision Engineering, Marine & Offshore, Chemical, Building & Construction, etc)

Other Accreditation/Certifications

Name of Scheme	Terms of Accreditation / Certification (Certificate Number)	Period of Accreditation / Certifications
<input type="text"/>	<input type="text"/>	<input type="text"/>

9. Option of Preliminary Assessment

We * do / do not require a Preliminary Assessment to be conducted.
(* delete where appropriate)



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PART 3 – SUBMISSION CHECKLIST

10. Please ensure that the following documents are submitted together with the application form:

- Quality Manual;
- Copies of the most recent calibration reports for major inspection equipment;
- Sample copies of the work sheets and reports applicable to inspection activities for which accreditation are sought;
- Copy of the most recent internal quality audit report, if any.
- Curriculum Vitae of all approved signatories.

PART 4 – DECLARATION

11. I hereby submit this application for participation in the Accreditation Scheme for Inspection Bodies and agree to comply with the terms and conditions of the scheme. I declare that the information given in this application is correct to the best of my knowledge and belief.

The application fee of \$2000 plus prevailing GST is enclosed.

Cheque No.:

Bank:

Note:

1. Cheque(s) shall be crossed and made payable to Accreditation International Association for Certification Bodies
2. Please forward the complete application form to admin@aiacacc.org

Signature of authorised representative:

Name:

Designation:

Date:

Note: Scan this last page separately for email.