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| DAkkS_Logo600dpi |  |
| Deutsche Akkreditierungsstelle GmbH  **Application Service and New Client Support**  Spittelmarkt 10  10117 Berlin  GERMANY  [a-nkb@dakks.de](mailto:a-nkb@dakks.de) | Application number: |
| (Will be filled-in by DAkkS GmbH) |

**- Application -  
Note: This form shall only be used by applicants outside the European Economic Area (EEA)**

**Please checkmark,**  **add or complete**

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| **This application relates to the following accreditation case no.** (if already assigned)**:*****XX-YYYYY-ZZ*** |

| **1. Applicant Data | PLEASE ENTER THE EXACT DESIGNATION OF THE APPLICANT LEGAL ENTITY** | | | | | |
| --- | --- | --- | --- | --- | --- |
| Name and legal status of the applicant: | ***(Please enclose proof of structure and legal status, e.g. certificate of registration, excerpt of the commercial register.)*** | | | | |
| Street: |  | | | | |
| Postal Code: |  | Place: |  | Country: |  |

| **2. Address for receiving invoices, if different to the address in section 1** | | | | | |
| --- | --- | --- | --- | --- | --- |
| Company name: | *max. 80 signs* | | | | |
| Department (optional): | *max. 50 signs* | | | | |
| Street **or** P. O. Box: |  | | | | |
| Postal code: |  | Place: |  | Country: |  |
| Contact person: | |  | | E-Mail: |  |
| Order number/reference (optional): | |  | | | |

| **3. Address for receiving the accreditation certificate(s), if different to the address in section 1** | | | |
| --- | --- | --- | --- |
| Company name: |  | | |
| Street: |  | | |
| Postal Code: |  | Place: |  |
| Country: |  | | |

| **4.** **CAB information, if different to the address in section 1** | | | | | |
| --- | --- | --- | --- | --- | --- |
| Name of CAB[[1]](#footnote-1): |  | | | | |
| Number of employees[[2]](#footnote-2): |  | | | | |
| Street: |  | | | | |
| Postal Code: |  | Place: |  | | |
| Country: |  | | | | |
| **Does the CAB operate on several sites within the applied scope  of accreditation?[[3]](#footnote-3)**  **If yes, further locations of CAB:**  **see attachment** | | | | **Yes** | **No** |
| Street:  Postal Code/City:  Country: |  | | | Number of employees: |  |
| Street:  Postal Code/City:  Country: |  | | | Number of employees: |  |
| Street:  Postal Code/City:  Country: |  | | | Number of employees: |  |

| Description of relations to supervisory or subordinated organizations (legal persons, individual persons, parent company, subsidiaries). Please add organization charts. |
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| **5. Contact data** | | | |
| --- | --- | --- | --- |
| **Contact Person[[4]](#footnote-4)** | | | |
| Name: |  | Tel.: |  |
| E-Mail: |  | Fax: |  |
| **Head of the CAB** | | | |
| Name: |  | Tel.: |  |
| E-Mail: |  | Fax: |  |
| **Deputy head** | | | |
| Name: |  | Tel.: |  |
| E-Mail: |  | Fax: |  |

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| **6. Type of Conformity Assessment Body (CAB) Only one type of CAB can be selected, for every type of CAB a separate form must be used!** |
| **Testing laboratory ISO/IEC 17025**  **Calibration laboratory ISO/IEC 17025**  **Medical laboratory ISO 15189**  **Inspection body ISO/IEC 17020 Type A**  **Inspection body ISO/IEC 17020 Type B**  **Inspection body ISO/IEC 17020 Type C**  **Certification body for management systems ISO/IEC 17021-1**  **Certification body for persons ISO/IEC 17024**  **Reference material producers ISO 17034**  **Certification body for products, processes and services ISO/IEC 17065**  **Proficiency Test Provider ISO/IEC 17043**  **Validation/Verification body ISO/IEC 17029 with ISO 14065**  **Biobank ISO 20387** |

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| **7. Application for** |
| **Initial Accreditation**  **Re-Accreditation**  **Change of Accreditation (e. g. of the name of the CAB, change of scope, locations etc.)** |

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| **8. Accreditation with flexible scope (only for testing, calibration and medical laboratories)[[5]](#footnote-5)** | |
| **Note:**  For the possibility of accreditation with a flexible scope (category I or II) according to the **DAkkS rule** [**71 SD 0 002**](http://www.dakks.de/en/content/accreditation-flexible-scope-testing-laboratories-calibration-laboratories-and-medical) please contact your customer manager.  Applications can be made informally to your customer manager in due time before the assessment.  Accreditation with a flexible scope may be not possible in some technical sectors.  Accreditation for a flexible scope requires increased assessment expenditure because of specific requirements  to be fulfilled by the applicant. | |
| Application for Accreditation with Flexible Scope (Category III) | **Yes** |

| **9. Specifications to former accreditations (only for initial accreditations and reaccreditations)** | | |
| --- | --- | --- |
| Are there further accreditation files for which the applicant is accredited by DAkkS? **If yes, case no.:** | **Yes** | **No** |
| Is the CAB already accredited by another accreditation body?If yes, information to the accreditation body:   **Case no:** | **Yes** | **No** |
| Are there any existing or applied notifications, permissions or applications of the CAB? | | |

| **10. Questions with regard to the local accreditation body of the applicant[[6]](#footnote-6)** | | |
| --- | --- | --- |
| Is there a local accreditation body? | **Yes** | **No** |
| Is the local accreditation body a signatory to the IAF MLA or ILAC MRA respectively? | **Yes** | **No** |
| Does the local accreditation body offer the required scope? | **Yes** | **No** |
| If the questions above are all answered with yes, what are the reasons for applying for accreditation by DAkkS instead of the local accreditation body? | | |

| **11. Application for the use of the accreditation symbol[[7]](#footnote-7)** | | |
| --- | --- | --- |
| Application for the use of the accreditation symbol:[[8]](#footnote-8)(Please consider DAkkS rule [71 SD 0 011\_e](https://www.dakks.de/de/dokument-detail.html?id=rules-for-accredited-conformity-assessment-bodies-on-the-use-of-the-accreditation-certificate-the-accreditation-symbol-of-the-deutsche-akkreditierungsstelle-gmbh-as-well-as-other-references-to-the-accreditation71-sd-0-011-e) ) | **Yes** | **No** |
| Application for a combined accreditation symbol?(ILAC-DAkkS or IAF-DAkkS)[[9]](#footnote-9) | **Yes** | **No** |

| **12. Annex** |
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| **Please attach a separate list about standards, methods, procedures, schemes for which accreditation as a conformity assessment body is applied.**  **See sample list** [**LI-Antrag GB\_EN**](https://www.dakks.de/de/dokument-detail.html?id=directory-of-annexes-for-application-for-accreditation-to-apply-for-the-scope-of-accreditation-by-subject-areasli-antrag-gb-en)  **If applicable, the updated annex of the accreditation certificate can be enclosed.** |
| **Conformity assessment procedures to be accredited – scope of accreditation (mandatory)** |
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| **With signature the applicant body declares to recognize and take note of the following conditions:** | | |
| --- | --- | --- |
| a) To fulfil the requirements of the Deutsche Akkreditierungsstelle GmbH (DAkkS) continually and verifiable for those scopes the accreditation/reaccreditation has been applied or granted and to adapt all changes in requirements of the accreditation/reaccreditation,  b) To cooperate as is necessary to enable DAkkS to verify fulfilment of accreditation requirements,  c) To provide access to conformity assessment body personnel, locations, equipment, information, documents and records as necessary to verify the fulfilment of the accreditation requirements,  d) To ensure to carrying out witness-audits of the services of the conformity assessment body to be accredited when requested by DAkkS,  e) To have, where applicable, legally enforceable arrangements with their clients binding them to provide access to assessment teams of DAkkS on request, to assess the conformity assessment body’s performance when carrying out conformity assessment activities at the client’s site,  f) To claim accreditation only with respect to the scope for which it has been granted,  g) To commit to the regulations of DAkkS when using the accreditation symbol,  h) Not to use the accreditation in any way that brings DAkkS into disrepute,  i) To inform DAkkS without delay about changes or occurrences in written form which may affect the technical competence and suitability of the conformity assessment. These include in particular changes in management- / key personnel, its legal, commercial, ownership or the organizational status of the conformity assessment body, changes of resources and locations, changes within the scope of accreditation as well as changes regarding essential spatial and equipment requirements for the accreditation,  j) To pay fees as determined by DAkkS,  k) To assist in the investigation and resolution of any accreditation-related complaints about the conformity assessment body referred to it by the accreditation body,  l) To grant the consultation of the respective local accreditation body to the extent specified by DAkkS for each assessment of locations of the conformity assessment body outside of Germany or of conformity assessment activities which are processed outside of Germany,  m) DAkkS will inform the local accreditation body about the application;  n) DAkkS may cooperate with the local accreditation body with regard to:  - Exchange of information taking into account factors such as language, local laws and regulations, culture, relevant local accreditation requirements etc., as well as technical competence requirements,  - include personnel from the local accreditation body on the assessment team, as observer or for translation service. | | |
| **,** **TT.MM.JJJJ** | |  |  | |
| Place, Date | | Signature of the authorized representative of the applicant | Name in block letters | |
| **, TT.MM.JJJJ** | |  |  | |
| Place, Date | | Signature of the authorized representative of the applicant | Name in block letters | |

1. Applicant as well as the name of the CAB (if different) will usually be referred in the accreditation certificate. [↑](#footnote-ref-1)
2. Number of employees working in the area to be accredited, including external employees (e.g. samplers, inspectors, auditors), regardless of whether they have a part-time or full-time position. [↑](#footnote-ref-2)
3. Please enclose attachments if space is not sufficient. [↑](#footnote-ref-3)
4. Technical contact person of the CAB for planning and realization of the accreditation procedure. [↑](#footnote-ref-4)
5. Please take notice of the DAkkS rule 71 SD 0 002 before applying for accreditation with a flexible scope. [↑](#footnote-ref-5)
6. DAkkS is signature to the IAF Multilateral Recognition Arrangement (MLA) and ILAC Mutual Recognition Arrangement (MRA). DAkkS strengthens the international network of accreditation bodies through the IAF MLA and ILAC MRA and complies with the rules for cooperation between accreditation bodies. [↑](#footnote-ref-6)
7. DAkkS strongly recommends the application for the use of the accreditation symbol. Accredited bodies show their status with the accreditation symbol, e.g. on test reports, inspection reports, validation- and verification reports or certificates. Users of reports and certificates are able to recognize the status of conformity assessment with the accreditation symbol. [↑](#footnote-ref-7)
8. DAkkS Rule 71 SD 0 011 applies „Rules for accredited conformity assessment bodies on the use of the accreditation certificate and the accreditation symbol of the Deutsche Akkreditierungsstelle GmbH“. Each type of use shall be announced to and approved by DAkkS before use. [↑](#footnote-ref-8)
9. Usage of combined ILAC-DAkkS- and/or IAF-DAkkS-symbol is possible after signing corresponding sublicense agreement. Rules from ILAC and IAF are to be considered. [↑](#footnote-ref-9)