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| Company Details |
| Company Name | Click here to enter text. |
| UKAS Ref (Existing Customers Only) |   |

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| Standard - Please indicate which standard of accreditation you are applying for |
| ISO/IEC 17021-1 (ABMS - Anti-Bribery) |[ ]  ISO/IEC 17065 (Product / Process / Service) | [ ]  |
| ISO/IEC 17021-1 (AMS - Asset Management) |[ ]  ISO/IEC 17024 (Certification of Persons) | [ ]  |
| ISO/IEC 17021-1 (BCMS - Business Continuity) |[ ]  Other (please specify below):  | [ ]  |
| ISO/IEC 17021-1 (CBRMS - Collaborative Business Relationship) |[ ]   |  |
| ISO/IEC 17021-1 (CMS - Competence) |[ ]   |  |
| ISO/IEC 17021-1 (EMS - Environmental) |[ ]   |  |
| ISO/IEC 17021-1 (EnMS - Energy) |[ ]   |  |
| ISO/IEC 17021-1 (FRMS - Fire Risk) |[ ]   |  |
| ISO/IEC 17021-1 (FSMS - Food Safety) |[ ]  Is this application linked to an application to a UK competent authority for the purposes of appointment as an Approved Body (for GB market / UKCA Marking) or UK Notified Body (for Northern Ireland market / CE-UKNI Marking)? *(See UKAS publication GEN 5 for information including definitions)*If ‘Yes’ then please provide details below):\* Please ensure that your organisation has signed *a* [*Confidentiality Waiver - Approved Bodies (F378)*](https://www.ukas.com/wp-content/uploads/2021/02/F378-Confidentiality-Waiver-Approved-Bodies.docx)allowing UKAS to share relevant information with the competent authority | Yes\* No[ ]  [ ]  |
| ISO/IEC 17021-1 (H&SMS - Health & Safety) |[ ]   |  |
| ISO/IEC 17021-1 (ITSMS - IT Service) |[ ]   |  |
| ISO/IEC 17021-1 (ISMS - Information Security) |[ ]   |  |
| ISO/IEC 17021-1 (NSC-QMS - Nuclear Supply Chain) |[ ]   |  |
| ISO/IEC 17021-1 (PSCMS - Private Security Companies) |[ ]   |  |
| ISO/IEC 17021-1 (QMS - Quality) |[ ]   |  |
| ISO/IEC 17021-1 (QMS: MD - Quality: Medical Devices) |[ ]   |  |
| ISO/IEC 17021-1 (QMS: HC - Quality: Healthcare) |[ ]   |  |
| ISO/IEC 17021-1 (SCSMS - Supply Chain Security) |[ ]   |  |
| ISO/IEC 17021-1 + sector scheme(s) e.g. TickIT (please describe below):  |[ ]   |  |
|  |  |  |  |

*If you are applying for more than one standard (ticked above), please complete a separate AC 1 per standard*

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 UKAS Accreditation

Scope descriptions need to be stated in the following manner:

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| ISO/IEC 17021-1 (AMS), (BCMS), (EMS), (H&SMS), or (QMS)/(QMS-HC) | * Please state in terms of IAF References (as listed IAF ID 1)
* Where you require a limitation within an IAF code, please describe the limited activities you require to the relevant IAF code in terms of the NACE 2 Industrial Classification Codes
 |
| ISO/IEC 17021-1 (QMS-MD) | Please state in terms of Main Technical Areas/Technical Areas detailed in IAF MD 8 and IAF MD 9  |
| ISO/IEC 17021-1 (FSMS) | Please state ISO 22003-1 Category Code(s) as listed in Annex A |
| ISO/IEC 17021-1 (CBRMS), (ITSMS), (PSCMS), (EnMS) | Please state the business sectors within which you are operating |
| ISO/IEC 17021-1 (ISMS) | Please state the specific scheme, where applicable (e.g. ISO/IEC 27701 (PIMS) or tScheme) |
| ISO/IEC 17021-1 (SCSMS) | No scope definition required; please state if ISO 28007-1 is included |
| ISO/IEC 17021-1 (CMS) | Please state the specific scheme |
| ISO/IEC 17021-1 (ABMS) | Please state Scope Description Groups and geographical scoping *(see UKAS publication CIS 14 UKAS Guidance for Bodies Offering Certification of Anti-Bribery Management Systems)* |
| ISO/IEC 17021-1 (FRMS) | Please state the specific framework / standard |
| ISO/IEC 17021-1 (NSC-QMS) | Please state ISO/TS 23406 technological sectors as listed in Table A.2 |
| 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
* For ISO/IEC 17065 please also state the scheme type (see ISO/IEC 17067) and whether it relates to a product, process or service
 |

**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)?**

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| Option A [ ]  | Option B [ ]  |

**COUNTRIES WHERE THE CERTIFICATION WILL OPERATE**

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|  | **Number** | **Countries of Operation** |
| **Existing clients in new scope area** |   |   |
| **Potential clients in new scope area** |   |   |

**Scope(s) Requested:**

| **No.** | **CODE/SCHEME** **(If Applicable)** | **Scope Description** |
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**EXTENSIONS TO SCOPE ONLY:**

1. [ ]  I wish this extension to scope application to be processed now, (and understand this may require an extra visit by UKAS).

**Desired Timeframe for Assessment:**

[ ]  1-3 Months [ ]  3-6 Months [ ]  6-9 months [ ]  9-12 months

###### Please note standard UKAS timeframe for the assessment of extensions to scope is 3 months from receipt of application

2. [ ]  I wish this extension to scope application to be processed with my next surveillance/re-assessment visit.

3. [ ]  This application is to extend an existing limited scope.

4. [ ]  I would like to propose that this extension to scope application is considered for desktop review

*(Please note that the decision on the applicability of this proposal will be made by UKAS based on a number of factors including existing scope of accreditation and competences demonstrated)*

**SUPPORTING DOCUMENTATION:**

*For an extension to scope to be progressed by UKAS the following documentation must, as a minimum, be supplied 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 of the conformity assessment activity as required by the applied for certification standard, including as applicable:* Involvement with interested parties and access to expertise
* Consideration of the impartiality risks
* Scheme documents
* Definition of technical areas
* Competence criteria
* Competence evaluation methods
 |[ ]    |
| Evidence to demonstrate competence of resources for the applied for certification activities (e.g. competence criteria, CVs, witnessed audits, competence tests). |[ ]    |
| Copies of any revised/new procedures required for the certification activity. |[ ]    |
| Where the application relates to the addition of a new location, please provide copies of:* where applicable, risk assessments (IAF MD 23 refers)
* 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. |[ ]    |

Declaration:

* I declare that I am authorised, on behalf of the company, to submit this application, and that the information contained herein is both correct and accurate to the best of my knowledge and belief.
* By submitting this application I acknowledge that I have read, understood and accepted UKAS’ [**Standard Terms of Business**](https://ukasonline.sharepoint.com/%3Aw%3A/r/sites/ManagementSystem/Shared%20Documents/FIN%201001%20UKAS%20Standard%20Terms%20of%20Business.docx?d=wadf17ab825b6423a82e739dbd4b75cc1&csf=1&web=1&e=SvUoK8).
* If this application relates to an extension to scope, I understand and accept that:
	+ An initial charge of 0.5 days at the standard day rate will apply to cover scoping of effort required
		- *This will not result in any additional charge to customers who proceed within 12 months of application. If a customer takes no action to progress an extension to scope application over a period of a year with no mitigating circumstances, UKAS reserves the right to withdraw the application. The initial charge is not refundable as it covers work already undertaken. Once an application is withdrawn, if the customer subsequently wishes to progress the extension to scope, they will need to reapply.*
	+ It may be necessary to revise our annual fees upon grant of the extension to scope

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| **Name:** |   |
| **Position:** |   |
| **Date:** | Click here to enter a date. |

Applications to be Submitted To:

**EMAIL:** **apps@ukas.com**

#### POST: Applications Unit, United Kingdom Accreditation Service, 2 Pine Trees, Chertsey Lane, Staines-upon-Thames, TW18 3HR