# General information

This form has to be completed for an **application to grant, extend or renew an accreditation**. The application process is described in the procedure *P001 – Processing of applications regarding accreditation*.

**To grant or renew an accreditation, please attach form *F001D – Obligations for conformity assessment bodies* completed and signed to this application form.**

OLAS respects the confidentiality of the information provided in the questionnaire and attached documents.

The documents forming part of an accreditation file, excluding the certificates of accreditation and the accreditation scopes, cannot be transferred to third parties by OLAS without prior written agreement of the body, except within the framework of a legal enquiry or a procedure of mutual recognition. The OLAS does not advertise the existence of an accreditation application in any way.

**Please do not fill in the fields that have not changed since the last application form.**

In addition, the body is responsible to inform OLAS of any changes to the information provided in this form. All information given will be made available to all OLAS assessors for each assessment, as well as to the accreditation Committee assessing the accreditation file.

All relevant documents to the operation of OLAS are available on the website [portail-qualite.lu](https://www.portail-qualite.lu/).

This duly completed form must be deposited or sent by post or e-mail to the following address:

**Address: ILNAS**

**Office Luxembourgeois d'Accréditation et de Surveillance**

**South Lane Tower I**

**1, avenue du Swing**

**L-4367 Belvaux**

**Tél.: (+352) 2477 4360**

**Fax: (+352) 2479 4360**

**E-Mail:** [**olas@ilnas.etat.lu**](mailto:olas@ilnas.etat.lu)

# General information

## Identification of the company or the institution which controls the applicant body

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | | |
| N° and street |  | | |
| City |  | | |
| Country |  | | |
| Postal code |  | | |
| Postal address |  | | |
| Name of legal representative |  | Position |  |
| Company name |  | | |
| Legal status |  | | |
| Trade register N° |  | | |
| Telephone |  | | |
| Fax |  | | |
| Website |  | | |
| E-Mail |  | | |

## Principal activities of the company or the institution

|  |
| --- |
|  |

## Is the company or institution part of a group?

|  |
| --- |
| If so, which one: |
|  |

## Does the company or the institution have any subsidiaries?

|  |
| --- |
| If so, please identify them: |
|  |

# Information about the applying inspection body

## Identification of the applying body if different from the company or the institution above

|  |  |
| --- | --- |
| Name |  |
| N° and street |  |
| City |  |
| Country |  |
| Postal code |  |
| Postal address |  |
| Telephone |  |
| Fax |  |
| Website |  |
| E-Mail |  |

## Personnel

|  |  |
| --- | --- |
| Applying bodies permanent staff or full-time equivalents |  |
| Applying bodies technical staff or full-time equivalents |  |

## Civil liability insurance

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Does your organization have a civil liability insurance? |  | YES |  | NO |
| If YES, please join a proof must to your application. | | | | |
| If NO, does your organisation disposes of sufficient financial reserves to cover the responsibilities resulting from its activities? |  | YES |  | NO |

## Reference language

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Your reference languages: |  | French |  | German |  | English |

## Principal activities of the applicant body if different from the company or institution

|  |
| --- |
|  |

## This application concerns

|  |  |
| --- | --- |
|  | an initial accreditation in accordance with the standard ISO/IEC 17020 |
|  | a renewal of the accreditation in accordance with the standard ISO/IEC 17020 |
|  | an extension of the scope of the accreditation in accordance with the standard ISO/IEC 17020 |
|  | a new version of the standard |
|  | a transfer of the accreditation to a new legal entity |

## Indicate for which type of inspection body given in Annex A of standard ISO/IEC 17020 the application for accreditation is made

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Type A |  | Type B |  | Type C |

## Locations where inspections are carried out

|  |  |
| --- | --- |
|  | My body conducts inspections on a territory other than that of the Grand-Duchy of Luxembourg (if so, please join the form F001E to your application) |
|  | within the facilities of the inspection body |
|  | on site (e.g. at the customer’s premises) |
|  | in mobile installations, please specify: |
|  |  |
|  | other types of sites; please specify: |
|  |  |

## Locations of activities in relation with conformity assessment activities (including virtual sites)

For more information, please refer to the annex *A013 - Accreditation of multi-site organizations*. If any site it located in another country, the annex *A014 - Cross-frontier Accreditation is applicable*.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Your body conducts conformity assessment activities in more than one site: |  | YES |  | NO |
| Your body conducts auxiliary activities in more than one site: |  | YES |  | NO |
| If yes for any of the two cases above, please fill in form F001E and enclose it to your application. | | | | |

## Metrological traceability of standards, reference materials and equipment

|  |  |
| --- | --- |
|  | Not applicable (no calibrations needed) |
|  | All calibrations are done by external providers |
|  | The following calibrations are performed internally: |
|  |  |

Note: **Calibration** should not be confused with **adjustment of a measuring system**, often mistakenly called “self-calibration”, nor with **verification** of calibration.

## Person in charge of the organization[[1]](#footnote-1)

|  |  |
| --- | --- |
| Full name |  |
| Position |  |
| Telephone |  |
| E-Mail |  |

## Contact person for OLAS[[2]](#footnote-2)

|  |  |
| --- | --- |
| Full name |  |
| Position |  |
| Telephone |  |
| E-Mail |  |

## List of accreditations or agreements issued by another authority, obtained or applied for, at national or international level

|  |
| --- |
| Please indicate the body that issued the accreditation or agreement, the domain of validity, the dates it was obtained and, when applicable, the expiry date as well as the date of the next surveillance. |
|  |

# Information relating to the application for accreditation

## Employment contracts

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Please indicate the existence and number of inspectors with a shared employment contract or who are made available to carry out activities within other subsidiaries or bodies within the organisation: | | | | | | |
| Shared contract: |  | OUI |  | NON | If yes, number: |  |
| Made available |  | OUI |  | NON | If yes, number: |  |
| Please indicate the name of the subsidiary or body, the company name and its principal activities | | | | | | |
|  | | | | | | |

## Other activities of the personnel, auditors, inspectors, experts

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Does your organization or personnel within your organization have links[[3]](#footnote-3) with organizations providing consultancy activities? |  | YES |  | NO |
| If YES, provide a list of the organizations, with, for each of these, its legal status, address, and the general nature of the activity carried out (whatever this activity) | | | | |
|  | | | | |

# Documents to be attached to the application:

* 1 copy of the quality manual,
* evidence of competence concerning the requested technical domain
* proof of civil liability insurance, if applicable
* one copy of the accreditation certificate and the accreditation scope if accreditation is issued by a body other than OLAS.

|  |  |  |  |
| --- | --- | --- | --- |
| Done at: |  | By: |  |
| On: |  |  |  |
|  |  |  | Signature[[4]](#footnote-4) |

# Scope of accreditation

Please prepare **a draft accreditation scope** based on the following template for accreditation scopes.

When requesting an extension of your accreditation scope, please include new domains only.

The **general and technical domains** are defined in the appendix *A005 – Accreditation domains covered by OLAS*.

*Template of accreditation scope for an inspection body:*

|  |  |  |  |
| --- | --- | --- | --- |
| Description: OLAS_MAIN_Logo | | | |
| **Organism:** |  | **Standard:** | ISO/IEC 17020 |
| **Contact:** |  | **Body Type:** |  |
| **Street:** |  | **Accreditation No:** |  |
| **Town:** |  | **Version:** |  |
| **Country:** |  |  | |
| **Telephone:** |  |
| **Fax:** |  |
| **E-mail:** |  |

|  |  |  |
| --- | --- | --- |
| **Accreditation scope for an inspection body** | | |
| **General domain:** (Please fill in one table for each general domain) | | |
| **Technical domains:** | | |
| **Object submitted to inspection**  Installations, buildings, devices, components, equipment… | **Phase and type of inspection**  Inspection before final, periodic, prior commissioning, before delivery, conformance, of new products, etc. | **Reference frames**   * standards, * regulations * European directives (+modules, annex, articles, if applicable) * reference documents * internal procedures * - technical specifications |
|  |  |  |

**Scope validation:**

|  |  |  |  |
| --- | --- | --- | --- |
| Done at: |  | By: |  |
| On: |  |  |  |
|  |  |  | Signature[[5]](#footnote-5) |

1. person who will contact OLAS in order to draw up and circulate documents of a contractual nature (declaration, scope of the application for accreditation, etc.) [↑](#footnote-ref-1)
2. person in contact with OLAS in relation to scheduling audits, exchanges of information and documents [↑](#footnote-ref-2)
3. the term link (guide EA/IAF-A4 4.2.1a) is understood to refer to the following in particular: participation in capital, participation in a body such as for example a board of directors or a surveillance board, making available personnel or shared personnel, use of an identical or similar name or one which is similar in terms of initials or logo, commercial agreement to promote and/or carry out communal actions, any agreement relating to a service provided on behalf of the organization, financing by means of a loan, grant or any other means (in particular: supply of certain resources free of charge). [↑](#footnote-ref-3)
4. signatory must be authorized to legally bind the organization [↑](#footnote-ref-4)
5. signatory must be authorized to legally bind the organization [↑](#footnote-ref-5)