



APPLICATION FOR LISTING AS AN ACCREDITED TEST HOUSE AND LABORATORY

Notes on completing this form

- 1 Read the form carefully before filling it in.
- 2. Please fill in with black or dark blue pen.
- 3 Photocopies of sample certificates supporting your application and your Terms & Conditions must be supplied with the completed form
- 4 You should not necessarily confine your remarks to this form and you may include an organisation structure if you wish to show your relationship to other organisations connected to your business.
- 5 An application form for accreditation cannot be accepted unless it is accompanied with the full application fee..
- When completed, this document must be sent to The Administration Manager of QABCB. at info@qabcb.com. Photocopies of sample certificates should also be included.
- 7.....In submitting this application the applicant agrees to abide by the terms and conditions of QABCB, amended if appropriate, if a contract is entered into.

NAME OF FIRM LEGAL STATUS E.G. Ltd = Limited Company, ST = Sole Trader, PT = Partnership, PLC = Public Limited Company, OT = Other. NOTE: Organisation must be a legal entity.			
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SURNAME AND FORENAME OF PRINCIPLE CONTACT			
NORKS-ADDRESS			
Post Code MOBILE			
PHONEFAX			
E' Mail			
ORGANISATIONAL STRUCTURE			
Please attach an organisation structure			
Managing Director			
Company Secretary			
Head of Testing			
Head of Calibration			
Note 1, full CV and evidence of skills and competence will be required for the above, and other key persons.			
Note 2, Add a separate organisation diagram. Note 3. Please indicate family or similar relationships between the above			





Please advise if in the last two years, you have had a business relationship with any laboratory, test house or certification body. If so please give name and summary details. Please advise reason for not continuing that relationship.
Please advise, if in the last two years, you have had a business relationship with any other laboratory, test house or certification body that may have lost its accredited status. Please state your role in that organisation.
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Please advise the reasons for seeking QABCB accreditation. (e.g. reputation, technical approach, market awareness, user-friendliness, cost effectiveness etc.).
Please advise any matter that may be deemed significant when adjudicating your application should it come to light at a later date.
Do you realise that it is a requirement for organisations seeking QABCB accreditation that they should be set up for, and implement a management system, in recognition of ISO 17025?
Do you have a documented management system for ISO 17025 at this time? If not, when will it be ready?
Do you have a documented management system in accordance with ISO 9001;2008 at this time? If not, when will it be ready?
How long have you been operating as a test house or a laboratory?
Do you have proof of your status as a legal entity?This should be provided.
Do you operate at sites other than the main address given on page 1
Where did you learn about QABCB
Have you worked with any other QABCB accredited organisation before
If yes, who
Do you realise that in order to be accredited there will need to be: (i) An extensive document review and examination of evidence which is only begun following receipt of the initial Administration Fee
Print Name



QABCB

State each type of service and applicable standards offered on a separate line. Attach a copy of the standards if they are unlikely to be recognised at a national level.

TEST OR CALIBRATION FUNCTION	APPLICABLE STANDARD	DESCRIPTION OF ACTIVITIES			
		Use continuation sheets if necessary			
Please attach a plant list of to	est and calibration equipme	nt			
Please describe the environn sample procedure if more co		ithin your organisation. (Attach appropriate or			
Please describe the traceability arrangements to national or international standards. (Attach appropriate or sample procedure if more convenient.)					



Please describe the methods to determine levels of uncertainty of measurements. (Attach appropriate or
sample procedure if more convenient.)

In order to assist us please give a brief and concise résumé of your organisation. Please provide a description of your organisations mission and target market sectors and any other information that you may feel would be helpful to QABCB in adjudicating your application. Indicate how long you have been trading. If you are a start up, indicate previous experience or attach a CV.

Turnover last FY: Turnover this current FY: Date trading started:
Number of tests last FY: Number of tests this FY: Typical value per test:

Other accreditations that are held:

Memberships of trade and professional bodies:

Other information about your organisation:

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1	Have you signed the confirmation on page 2?	
2	Have you provided proof of legal identity?	
3	Have you read the Terms & Conditions and Operation Conditions for Test Houses and Laboratories?	
4	Have you attached a plant list of test and calibration equipment	
5	Have you retained a copy of all pages of this form?	
Sig	ned Date	

A quotation will be sent following review of the above.

THIS FORM WILL BE RETURNED IF ALL SECTIONS ARE NOT APPROPRIATLY COMPLETED

Any section not applicable should be struck through and initialled

REFER TO GUIDE FOR INFORMATION ON BECOMING ACCREDITED

PLEASE COPY / SCAN AND RETURN THIS FORM TO:

QABCB. 196 Rose Street. Edinburgh. United Kingdom. EH2 4AT.

Tel: 07440 46 16 89 Fax: +44 1189 637 012 Email: info@qabcb.com

URL: http//:www.qabcb.com