



Accreditation Procedure
for
Validation and Verification Bodies

BCB 201 (VVB)-July 2025



(Effective: Immediate)



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NATIONAL ACCREDITATION BOARD FOR CERTIFICATION BODIES (NABCB)

Quality Council of India (QCI), World Trade Centre, J 200, Block J, Nauroji Nagar, New Delhi-110029

Phone: +91-11-2618 6680; E-mail: nabcb@qcin.org; Web: www.nabcb.qci.org.in

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0. Introduction

This document defines the procedure that has to be followed by the organizations seeking accreditation based on ISO/IEC 17029:2019 for offering services for validation and verification. The general information is contained in this procedure. NABCB, on request, will provide any specific information required by the organizations.

The other applicable procedures and information that are mandatory for the new applicant and the accredited organizations like Use of Symbol, Appeal procedures, fee schedule etc. are also to be considered and these documents can be downloaded from the NABCB website.

1. Criteria for Accreditation

1.1. Adoption of Criteria

- 1.1.1. NABCB shall adopt and document the accreditation criteria for Validation and Verification Bodies (VVBs) based on international standards and guidelines, supported by the mandatory/any other relevant documents prescribed by the International Accreditation Forum (IAF)/Asia Pacific Accreditation Cooperation (APAC).
- 1.1.2. Accreditation Criteria BCB 165-July 2025 has been adopted directly from international standards and are covered by copyright laws. For such documents, only the reference number and issue level is given.

1.2. Amendment to the Criteria

The amendment to the Criteria shall be based on the nature of change required. The Criteria for accreditation and the related documents shall be taken up for amendment based on following conditions individually or severally:

- Any change in the International standards and guidelines
- Any change in Sector specific Validation & Verification Programme/scheme
- Any change in the IAF/APAC documents for implementation of international standards and guidelines
- Feedback from the Peer Review assessment team that warrants amendment
- Feedback from the implementation of the criteria
- Any other reason as deemed fit by the NABCB or the Technical Committee for V&V, if any.

NABCB shall approve the amended criteria after completion of any one or more of the consultative processes

- Seek the advice of the Technical Committee, if any, or
- Views of the VVBs before approval of the amendment
- Seek public comments on the proposed changes through the Members of the NABCB Board and other representative bodies as the NABCB may deem fit.

The issue status of the Criteria document shall be identified by the month and/or year of the issue.

1.3. Communication of changes to the Criteria

- 1.3.1 Any change in the criteria shall be notified to the accredited / applicant VVB within a suitable time frame for implementing the modified criteria. Any transition policy announced by IAF would be adopted by the NABCB and communicated to the VVB. The accredited VVB shall communicate their objection, if any, in writing within 30 days of the receipt of the amended criteria. If the communication is not received within 30 days, it will be presumed that the accredited VVB body is willing to adopt the changed criteria.
- 1.3.2 The implementation of the changed criteria shall be verified during the surveillance assessment of each VVB. In the event of any major change in the criteria, NABCB reserves the right to carry out an additional assessment and the fee of such assessment visit shall be borne by validation and verification body.
- 1.3.3 In the event that an accredited VVB is not willing to adopt the changed criteria, it is allowed to opt out of the accreditation programme/scheme and the accreditation is withdrawn with effect from the date of the implementation of revised criteria. The accredited VVB in such cases shall forfeit their right to get the refund of the paid fees.

2 Accreditation Process

2.1 General

NABCB has decided to provide accreditation services to Validation and Verification Bodies (VVBs) established as legal entities within SAARC region as well as in other countries. It is expected that the bodies applying for accreditation would be registered entities as per applicable laws within their economies and can be sued in their own names. Any exception made regarding legal status would be only by a specific decision of the NABCB Board, keeping in view the legal provisions in the economy in which the VVB is established as a legal entity.

2.2 Scope of accreditation

For new programmes/schemes, whenever launched, relevant scope sector details shall be established by NABCB. For Scope related to Environment Programme / /scheme, please refer to Annex-1A.

- 2.2.1 To apply for accreditation as per ISO/IEC 17029 with or without other/multiple programmes/schemes, applicant VVBs shall demonstrate competence and knowledge of the specific programme/scheme requirements for each sector applied for. Where the requirements of such programme/scheme are additional to the requirements of ISO/IEC 17029, the requirements of these programmes /schemes shall also apply. Applicant VVB shall ensure that these requirements are built in its V&V system in line with ISO/IEC 17029 and applicable IAF Mandatory Documents (MDs). In addition, following requirements of ISO/IEC 17011:2017 pertaining to identification of the activity (validation or verification or both) shall also be complied:
- The standards, normative documents and/or regulatory requirements to which validation or verification or both is to be performed, as applicable;
 - Validation and/or verification programme/scheme, where relevant;
 - Industry sector, where relevant.

- 2.2.2 Any additional explanation needed by the applicant is provided by the CEO, NABCB or nominated person on behalf of the NABCB, on receipt of a specific request for the same, including necessary explanations on the specific programmes/schemes and scopes of accreditation that are covered under validation/ verification.
- 2.2.3 In legal terms, it shall be an organization which can sue and be sued in its own name as per the legal interpretation in the relevant economy. In India, it could be a government, public or private limited company, LLP, a trust or a society. Partnership firms and proprietary companies do not fit into this. Any exception regarding legal status would be made only by a specific decision of the Board keeping in view the legal provisions in the economy in which the V & V body is established as a legal entity.

2.3 Application for Accreditation

- 2.3.1 VVBs interested in getting accredited by the NABCB for their validation/verification activities can download the application form, BCB F 001 (VVB), from the NABCB website, www.nabcb.qci.org.in, along with the prescribed fee as per schedule or apply online.
- 2.3.2 The application available on the website includes the latest copies of following documents:
- | | |
|---|------------------|
| • Application Form | • BCB F001 (VVB) |
| • Fee Schedule | • BCB F002 |
| • Accreditation Criteria | • BCB 165 |
| • Accreditation Procedure | • BCB 201 (VVB) |
| • Use of Accreditation Mark | • BCB 202 |
| • Complaints, Disputes and Appeals | • BCB 203 |
| • Format of the accreditation agreement | • BCB F003 (VVB) |
| • Format of the Cross-Reference Matrix | • BCB F010 (VVB) |
- 2.3.3 Before applying for accreditation, the applicant body must have met the following conditions:
- The sector specific programme/scheme meets the requirements of NABCB policy on Conformity assessment programme/schemes (BCB 002) and is accepted by NABCB. NABCB may need to review the VVB programme / programme/scheme to determine its suitability for accreditation. The man-days for programme/scheme review would depend on extent of suitability determination. The application shall be accepted and registered only after determination of suitability of the programme (s) / /scheme(s).
 - Has operated the validation and verification systems and process for at least six months as a minimum including for any programme / scheme
 - Has completed one Internal Audit against the applicable criteria for VVB's accreditation
 - Has completed one Management Review
 - Has completed two Validations/Verifications as per ISO/IEC 17029. However, where VVB applies for ISO/IEC 17029 along with Sector specific programme/scheme, completed verifications and/or validations should have been done meeting Sector Programme/scheme requirement as well.
- 2.3.4 The completed application form for accreditation has to be duly signed by the authorized representative/s of the organization seeking accreditation and forwarded to the NABCB along with the application fee given in the fee schedule. The NABCB reserves the right to seek information on the antecedents of the owners / those managing activities of VVB before deciding to accept the application for further processing. Adverse decision of the NABCB would be communicated with reasons for rejecting the application. The applicant can appeal

against such decision. The application fee is non-refundable except when the application is rejected by the NABCB. Once accepted the application fee is non-refundable.

Note 1: Evidence of the documents and records relating to the completion of internal audit and Management review are to be submitted along with the application or are made available electronically.

- 2.3.5 The applicant must also enclose the required information and documents as specified in the application form and submit the same in online portal.
- 2.3.6 The application is reviewed by NABCB secretariat for completeness, clarity of accreditation requirements and the capability of NABCB to provide the services. Any mismatch is clarified and the outcome of the review is communicated to the applicant regarding acceptance of the application for further processing, or to complete any further requirements identified during the review.
- 2.3.7 In case the application is accepted for further processing, a formal quotation is sent for carrying out the assessment of the applicant body based on the fee schedule (BCB F_002. NABCB would publish in its newsletter, information about new applications for accreditation.
- 2.3.8 Further processing of application shall be taken up on receipt of acceptance of the quotation and confirmation by the applicant VVB that the “agreement for accreditation (BCB F003)” is acceptable.
- 2.3.9 If a preliminary visit is requested by the applicant VVB, or deemed necessary to effectively ascertain the readiness of the applicant, the NABCB organizes the same after obtaining the acceptance of the preliminary visit fee by the applicant VVB. Such a visit would solely be for the purpose of gaining a better understanding of the operations of the VVB and for the VVB to better understand the accreditation process and clarify the expectations of NABCB as regards the requirements of the standard. The visit may result in communication of findings to the VVB. Such a visit would not result in any decrease in the man-days for the initial assessment. NABCB has clear rules for the conduct of preliminary visits and due care is taken to avoid consultancy.
- 2.3.10 Any scopes that are added following the start of initial assessment process can be included in the assessment, depending upon the stage of initial assessment process and scope applied. Additional man-days may be required in such situations (refer Annex 2). For assessment at foreign locations, NABCB shall reserve the right to take the assistance of local IAF/APAC members, preferably MLA members, for assessments at foreign locations. The fee for such assessments shall depend on the fee structure of the local accreditation body. The applicant / accredited VVB shall have the opportunity to object to inclusion of specific assessor in the assessment team for reasons of conflict of interest. If the validation and verification body does not prefer to involve such local accreditation body, then the reasons for the same would have to be clearly indicated in writing. NABCB reserves the right to share such information with the concerned accreditation body / IAF / APAC.

3 Preparation for Assessment

3.1 Assessment Programme

NABCB prepares a draft assessment programme for the Initial Assessment as below:

- Review of the documented system of the VVB offsite,
- Assessment of office of the applicant including any critical location/other branch offices/sub-contractors as per its procedure based on risk and
- Witnessing of on-site V&V activities being carried out by the applicant VVB for the applied scopes. (Refer Annex 1A for Environment Programme)

3.2 Assessment Duration

The normal assessment duration for each stage of assessment is given in the Annex 2. The draft assessment programme may be prepared in stages as mentioned above depending on the information supplied. The clarifications regarding the scopes applied for, validator/verifier competence available with applicant, etc. shall be provided in advance for finalizing assessment programme; if necessary, the same shall be further verified as part of the office assessment.

3.3 Assessment of Branch/Subcontractor

The head office and branch/sub-contractor's offices shall be covered for the initial assessment based on a risk analysis by NABCB.

These may include all or some of the offices/sub contractor's offices from where critical activities are performed.

Critical activities shall include:

- Policy formulation and approval;
- Process and/or procedure development necessary for operations;
- Pre-engagement activities,
- Initial approval of validation and verification personnel or control of their training and personnel records which would also include their selection and appointments;
- On-going monitoring of validation and verification team;
- Application review;
- Assignment of validation and verification team;
- Planning and conducting of validation and verification in accordance with programme/scheme requirement.
- Independent review of the internal report or documentation and draft verification and verification statement;
- Final report reviews or validation and verification assertion, approval and decision on the results of validation and/or verification activities.
- Development of policies and procedures for resolution of appeals and complaints received by VVB

The inputs for the assessment programme shall be discussed with the authorized personnel of the applicant VVB to ensure an effective assessment plan at each stage.

3.4 Appointment of the assessment team

- 3.4.1 The assessment team, consisting of a Team Leader, Team member(s) and Technical Expert(s), if needed, is identified by the CEO/ Director from the pool of assessors and

technical experts maintained by NABCB. The assessment team for each stage of the initial assessment normally consists of two members. The team for Witness Assessment will normally have as many members in the team as the V/V team of the applicant VVB.

- 3.4.2 The names of the members of the assessment team, along with their CVs and details of any past/current affiliations/relationships, shall be communicated to the applicant VVB giving them sufficient time, to raise any objection against the appointment of any of the team members. Any objection by the applicant VVB against any of the team members must be accompanied in writing with adequate grounds for the objection. The CEO of the NABCB will evaluate the objection and decide whether to change the team member or to overrule the objection raised by the applicant body.
- 3.4.3 The decision of NABCB on the team members and the number of team members for any stage of accreditation assessment shall be final.
- 3.4.4 After acceptance of the assessment team by the applicant VVB, the assessment team is formally appointed.
- 3.4.5 Efforts are made to ensure that the team leader is not changed throughout the initial assessment process. If there is any change in the composition of the team members, the same shall be communicated to the applicant VVB for their acceptance.
- 3.4.6 The assessors/experts of NABCB are bound by confidentiality and declared absence of conflict of interest with the VVB.

3.5 Assessment Plan

- 3.5.1 An Assessment Plan shall be prepared by the Team Leader of the assessment team based on the draft assessment programme agreed by the CEO/ Director, NABCB and the applicant/ VVB.
- 3.5.2 For initial accreditation of VVB, the minimum number of witness assessments required to be undertaken shall be in accordance with the Witness Assessments as mentioned in Annex 1A.
- 3.5.3 For witness of VVB personnel, the Team Leader of the assessment team may identify the applicant VVB's validators/ verifiers that assessment team would wish to observe during the witness of validation/verification by applicant VVB, as per Annex 1A.

3.6 Document Review

- 3.6.1 The applicant VVB's documents shall be reviewed by the assessment team including Technical Expert, if required for compliance to the accreditation criteria including the programme/scheme for which the VVB has applied. NABCB may advise the applicant VVB to submit the required number of sets of the documentation for the assessors, in electronic form. The documentation includes manual, procedures, the approved formats, checklists, guidance/guides, instructions, or any other documentation which demonstrates compliance to the accreditation requirements.
- 3.6.2 For applications for specific programme/scheme, VVBs shall demonstrate knowledge of the specific programme/scheme requirements for each scope sector.

- 3.6.3 A summary report of deficiencies in the documentation against the accreditation criteria is forwarded by the Team Leader to the applicant VVB for its comments and compliance. If substantial changes in VVB's documentation are required based on the first review, a decision regarding a 'second review' of documents shall be taken by the CEO/Director.
- 3.6.4 The applicant VVB shall be informed if a 'second review' is needed in view of the substantial changes and the time period for submission for the second review. The second review shall be charged to the VVB.
- 3.6.5 NABCB secretariat may decide to conduct preliminary visit in case the need is felt in addition to conducting a second review.
- 3.6.6 After document review, NABCB would decide about the onsite visit and total time required in terms of man days which would also include time required to review the documentation issues (refer annex 4). Alternately, where required a preliminary visit would be planned as referred in Clause 2.2.12
- 3.6.7 The Applicant VVB shall ensure that the corrective actions for deviations observed during document review exercise are completed in a maximum time of six months. Any extension of this time limit would need a justification and be approved by the CEO.
- 3.6.8 In case the above condition is not met with, the application shall be liable to be rejected. Applicant VVB shall pay for document review charges.

3.7 Initial Assessment

- 3.7.1 The assessment plan for the office assessment shall be agreed to between the NABCB assessment team and applicant VVB.
- 3.7.2 The head office of the VVB shall be assessed by NABCB. In addition, assessments shall be conducted at other office sites / sub-contractors and any other locations based on risk analysis conducted by NABCB.
- 3.7.3 During the office assessment, NABCB assessment team shall evaluate the VVB's management system as per requirements of ISO/IEC 17029 along with the related standards and documents as mentioned in the accreditation criteria.
- 3.7.4 Sector specific programme/scheme requirements shall be additional to above requirements which shall be sought from VVB.
- 3.7.5 Wherever needed, to demonstrate the competence of the applicant VVB, the applicant VVB may submit the documents and records of assessments undertaken on the applicant/VVB by other IAF MLA Members or other equivalent internationally recognized programme such as in GHG Programme for CDM or any other projects under National or International protocol.
- 3.7.6 During the office assessment, the Team leader shall confirm that applicant VVB's declarations are correct including their declared branch offices and subcontractors for confirming critical activities involved. In case information collected during the office assessment requires inclusion of other locations in the assessment programme, including

any foreign location, the applicant shall be informed and the assessment programme shall be modified to cover such locations. Subsequent monitoring at these offices/ new locations shall depend on the nature of activities carried out by them and the extent of control demonstrated by the applicant VVB.

- 3.7.7 During the assessment or on demand at any time, the applicant/VVB shall provide unrestricted access to the documents that pertain to the validation/ verification process and the scope applied for.
- 3.7.8 NABCB assessment team shall explain the non-conformities/concerns observed during the office assessment at the end of assessment. The same shall be provided in the prescribed format in writing to the applicant VVB for corrective action plan and further action. The applicant VVB shall respond within stipulated timeline with the root cause analysis, and corrective action plan in response to the NCs. The time lines required for the closure of the nonconformities would be as per requirement as specified in this accreditation procedure. The team also provides an opportunity for the applicant VVB to ask any question about the findings and its basis during the meeting.
- 3.7.9 In case of any disagreement on the non-conformities/concerns, the VVB may escalate the matter to the CEO, NABCB. Representation on such disagreement should be made to CEO in writing by the VVB. NABCB will handle disputes in accordance with its internal procedure for the same.
- 3.7.10 The Team leader shall send a draft report to the applicant VVB, including details of the recommended witness assessments, as per the guidelines of the NABCB.
- 3.7.11 Based on the office assessment report and the nature and type of nonconformities/concerns issued, NABCB shall advise, at this stage, whether to await completion of the corrective actions to the non-conformities/concerns or to proceed with the witness assessment of the validation/verification scheduled to be carried out by the applicant.

3.8 Witness Assessment

- 3.8.1 The team, nominated by NABCB, shall carry out the witness assessment after office assessment as per the VVB's plan. Witness assessment selection and planning shall be as per Annex 1A for Environment Programme for each standard and activity separately, preferably for the new validation/ verification projects & organization facilities. The number of required witness assessments is determined by the scope of the accreditation applied.

Note 1: The validation activity would generally involve offsite review activities based on review of documents, may also involve a visit to site depending upon the programme requirements. Whereas verification activity would involve verification on site. Hence the witness activity would be conducted differently.

Note 2: For all witness assessments, the applicant VVB shall provide as a minimum, details of pre-engagement review including inputs received for contract review, impartiality assessment, records of competence of VV team and resources, validation/verification plan, document review report, and draft validation/ verification report, assertions calculation sheet assessed, documentation of the assessed organization such as plan, information, project description, baseline, methodology used, similar relevant documents for multi-facilities or



grouped projects, other programme requirements, and backup evidence seen by the VVB's team without causing undue disturbance to the validation/verification process.

Note 3: NABCB Assessment team may request for additional documents for review on case to case basis, for offsite review.

Note 4: In addition, applicant VVB shall provide details of the location and means of reaching the site(s) for effective planning and preparation of witness assessment plan.

All witness related documentations should be received by the NABCB assessment team at least a week before the scheduled onsite dates, to enable the NABCB assessment team to do the offsite review, and prepare itself. Specific programme/scheme requirements shall be assessed during witness assessment(s).

- 3.8.2 The applicant VVB shall include all organization facilities, projects and the relevant processes specific to the sectors of emissions in the witness assessment plan. All the witness assessments, collectively, shall demonstrate the ability of the applicant to validate and verify all the requirements of the applicable standard and the specific scope and sector for which the witness assessment is planned/conducted.
- 3.8.3 A physical or virtual closing meeting may be held on completion of witness assessments where the applicant shall be explained and communicated the non-conformities/concerns observed in writing for corrective action as per the guidelines established by the NABCB. The team also provides an opportunity for the applicant VVB to ask any question about the findings and its basis during the meeting.
- 3.8.4
- (a) For the witness assessment of validation activity, VVB shall submit its Validation Report duly reviewed by an independent reviewer for completeness and adequacy, along with Corrective action requests (CARs) or Clarification requests to be submitted to NABCB Assessment Team.
- (b) For the witness assessment of verification activity, VVB shall submit its Verification Report, duly reviewed by an independent reviewer for completeness and adequacy, along with open Corrective action requests (CARs) or Clarification requests to be submitted within seven days to NABCB Assessment Team.
- 3.8.5 NABCB Assessment Team shall finalize their witness assessment report and non-conformities/concerns based on the onsite visit/offsite observations, and/or of the witnessed personnel, and the applicant VVB's Validation/ Verification report. NABCB Assessment Team reserves the right to issue additional nonconformity or escalate the concern to nonconformity, based on the Validation/ Verification report. Such changes shall be reported to the applicant VVB as well as mentioned in the Witness assessment report. NABCB shall base its decision according to its assessment.
- 3.8.6 Where there is undue delay in receiving the corrective actions from the client to applicant VVB, in such a case, applicant VVB may make a representation to NABCB with proper justifications and evidences for extension of time to submit their report. The decision of NABCB shall be binding in such a case.

3.9 Assessment Report

- 3.9.1 The assessment team shall prepare a report at each stage of the assessment – office assessment, branch office assessment, and witness assessments. Non-conformities and concerns, if any, shall be communicated to the VVB representative(s) at the end of each assessment, in writing.
- 3.9.2 The draft assessment report for each assessment shall be sent by the NABCB assessment team within 15 days of the assessment to the VVB. If no comments are received within 7 days of sending the report, then the report is considered to be acceptable to the VVB and is deemed final. For any comments received on the report, NABCB assessment team shall try to resolve them within 10 days. NABCB assessment team shall submit the report at the end of this period along with unresolved comments from VVB to the NABCB, who would review and/or coordinate, as needed.
- 3.9.3 For any witness assessments, the process described in 3.8 shall be followed.
- 3.9.4 After completion of various stages of assessments, NABCB Assessment Team Leader shall prepare the Final Assessment Report based on the Document Review report, Office Assessment(s) and Witness assessment(s) with the recommendations to NABCB. The Final Assessment Report shall be prepared in case of Initial with witness assessments.
- 3.9.5 The assessment report shall include the following:
- details indicating the level of conformity of the validation and verification body's management system against the NABCB accreditation requirements
 - the non-conformities observed during various stages of the assessment and actions taken by the validation and verification body on the non-conformities.
 - Recommendations of the NABCB assessment team.
 - The scope of accreditation recommended based on the assessments
- 3.9.6 The report shall be prepared as per the laid down guidelines and criteria by the team leader / team members in the prescribed formats listing the level of compliance to the requirement of the accreditation criteria of the NABCB.
- 3.9.7 This report would be sent to VVB for review and comments. In case the report sent to the applicant VVB contains any difference from the information presented to the applicant VVB by the assessment team at the closing meeting (of each stage of assessment), the same is highlighted and the explanation of the differences shall be provided.
- 3.9.8 The report would be reviewed by reviewers nominated by NABCB in cases of initial assessment, reaccreditation assessment and scope extension. The purpose is to ensure that the report is as per laid down criteria and guidelines and changes are made where necessary. The modified report, if any, is shared with VVB.
- 3.9.9 Applicant VVB may support its case with the assessments undertaken on the applicant by other accreditation bodies especially IAF MLA Members or programme owners. CEO, NABCB, shall ensure a detailed review, on a case to-case basis, and place a report on the same to the Accreditation Committee. The Annex 3 provides norms for using other Accreditation Body's reports for the grant of scopes based on such reports.

- 3.9.10 In the event of delay in getting witness assessment scheduled for different scope sectors applied for, the applicant VVB may apply in writing to the CEO/Director NABCB for “Partial Assessment of available scopes”. The CEO/Director NABCB shall have the right to accept or reject the request.

3.10 Time Duration for Assessment Process

A typical time line for the accreditation process is given in Annex 4. Accreditation process for initial assessment should be completed within one year from the date of acceptance of application. In the event that the process is not completed within this stipulated time, NABCB may grant additional period of further one-year subject to review of the progress of assessment process carried until then and after taking an undertaking from the applicant to complete the process at the earliest within this additional time. The grant of additional time shall be the prerogative of NABCB and will only be considered after clearing of all outstanding payments. In case, it is observed that the applicant is not progressing with the assessment process during the additional time, the application shall be closed by NABCB.

- 3.10.1 In the event that the process is not completed within one year, due to delays/deficiencies on the part of the applicant, an extension of one year may be given depending on the results of past assessments and/or applicant body’s assessment experience in other programme related to and/or if the applicant/VVB is accredited to other programme by NABCB. In such cases, the assessment process may be carried out afresh and shall be completed in one year.
- 3.10.2 Applications pending over 2 years shall be reviewed by NABCB for appropriate action including closure. Any extension of time shall be an exception.

3.11 Accreditation Decision

- 3.11.1 The process of closing the non-conformities/concerns and verification shall be completed in the specified time. If the applicant VVB delays the process of satisfactory submission of corrective actions beyond the limits specified, NABCB shall have the right to reject the application. The fees paid by such applicant is non-refundable.
- 3.11.2 NABCB shall submit a summary of assessments and its recommendation for each applicant VVB to the Accreditation Committee. The conclusions shall be based on the final assessment report including closed status of nonconformities and concerns as well as any unresolved issues.
- 3.11.3 The Accreditation Committee is responsible for taking decisions on granting, maintaining, suspending, reducing or withdrawing of Accreditation.
- 3.11.4 The decisions of the Accreditation Committee shall be based on the assessment report and other relevant information placed before it. The Accreditation Committee in its capacity shall have the right to ask for any further clarifications on the report and information submitted on the applicant’s system and the applicant shall not refuse to present such information.
- 3.11.5 Based on the available competence and/or the recommendation of the assessment team/secretariat, the Accreditation Committee may decide to restrict grant of

accreditation to a part of the broad scope or programme/scheme applied for by the applicant.

4 Conditions for Accreditation

4.1 Granting of Accreditation

4.1.1 The accreditation is granted to an applicant after the following conditions have been met by the applicant body:

- a) The applicant meets the criteria of accreditation and all non-conformities/concerns found against the criteria of accreditation during assessment have been closed to the satisfaction of the NABCB in accordance with the guidelines on the subject
- b) There are no adverse reports / information / complaints with the NABCB about the applicant regarding the quality and effectiveness of implementation of validation/ verification system as per the criteria of the NABCB.
- c) The clients of the applicant body and owner of the programme/scheme are satisfied by the conduct of the applicant body and its validation/ verification system.

Note: NABCB on regular basis, shall obtain through appropriate mechanism, feedback from a few of the clients of the validation/ verification body and owner of the programme/scheme to assess the integrity and compliance aspects of the validation/ verification body.

d) The applicant body has paid all the outstanding dues.

4.1.2 The initial accreditation shall be for a period of 3 years. Subsequent reaccreditations are for a period of 4 years subject to satisfactory operation of accredited validation/ verification programme and reasonable number of NABCB accredited certificates being issued by the VVB.

4.1.3 In the event of any adverse issue arising from the reasons specified at points c) and d) of 4.1.1, the applicant body will be given an opportunity to explain its position in writing to NABCB and present its case in person the Accreditation Committee. The final decision shall be taken in respect of granting of accreditation on the basis of facts and the results of such presentation.

4.1.4 NABCB would publish in its newsletter / website, grant of any new accreditation, for information and feedback from the industry / other stakeholders.

5 Accreditation Documents

5.1 Accreditation Agreement:

On being informed about the grant of accreditation, two copies of the accreditation agreement shall be signed by the applicant and the applicant shall ensure that the relevant fees are paid.

5.2 Accreditation Documents:

On receipt of the signed agreement and the fee as per the invoice, a set of accreditation documents shall be issued to the applicant body along with the artwork of the accreditation mark of the NABCB.

5.3 Accreditation Certificate:

The accreditation certificate in the standard template shall include the NABCB logo, the name of the Validation and Verification Body, address of the premises of the Validation and Verification Body, accreditation number, the scope of accreditation, programme/scheme included, if any, effective date of grant of accreditation and the date of expiry of the accreditation (BCB F018).

5.4 Validity of Accreditation Certificate:

The initial accreditation certificate shall be valid for three years and the date of issue and validity is indicated on the certificate.

5.5 Maintaining Accreditation

5.5.1 The Validation and Verification Body shall comply with the following, individually or severally. The accreditation given to a VVB shall be maintained for three years / four years under the following conditions:

- a) The accredited body continues to meet the criteria of accreditation and all non-conformities/ concerns found against the criteria of accreditation during surveillance assessment have been closed to the satisfaction of the NABCB as per laid down criteria.
- b) There are no adverse reports / information / complaint with the NABCB about the applicant regarding the implementation of validation and verification system as per the criteria laid down by the NABCB.
- c) The organizations who have availed validation and/ or verification services or used results of validation/verification in any manner of the accredited VVB are satisfied by the conduct of the VVB and its V/V system.
- d) The accredited VVB has paid all the outstanding dues.

5.5.2 In the event of any adverse issue arising from the reasons specified at points b) and c) of 5.5.1, the accredited VVB shall be given an opportunity to explain its position in writing to NABCB and present its case in person to the Accreditation Committee. The final decision shall be taken in respect of maintenance of the accreditation on the basis facts and the results of such presentation.

5.6 Surveillance Assessment

5.6.1 To ensure that each of the VVB accredited by the NABCB continues to comply with the accreditation requirements, a surveillance assessment (at the office) shall be carried out annually.

5.6.2 The surveillance assessment shall be consistent with the initial assessment and includes office assessment at head office every year and some of the locations performing critical activities and/or based on risk analysis.

5.6.3 All the branch offices/sub-contractors performing critical activities will generally be covered under assessment during one accreditation cycle as per the assessment programme but may

be modified based on risk analysis. Offices other than those performing critical activities may also be assessed.

- 5.6.4 All scopes for which the VVB has been accredited shall be witnessed during the accreditation cycle. VVB shall provide NABCB with complete information on its activities, to enable NABCB to choose and plan the witness assessment. Witness assessment planning shall be based on complexity, number of V/V activities per sector/ scope, number of multisite, grouped projects/ facilities, locations, amongst other things as described in Annex A1 for Environment Programme.
- 5.6.5 Assessment programme shall be updated annually based on risk analysis, surveillances and witness assessments planned, and scopes witnessed.
- 5.6.6 The Cross-frontier assessments may be clubbed with the NABCB assessments as requested as per given scope of activities. Assessment plan shall accordingly be made.
- 5.6.7 Witness assessments shall be part of the surveillance and conducted separately on the basis as per the six-monthly validation/verification data received by the VVB.
- 5.6.8 The witness assessment programme shall be based on:
- resources available with the accredited VVB,
 - number of accredited V/V conducted on stand-alone and / or other programme/scheme,
 - spread of locations,
 - single or group facility/ projects, complexity & risks involved,
 - stakeholders concern and the extent of control demonstrated by the VVB and observations of the office assessment.
 - selection process of witness assessments, refer to Annex 1A.
 - specific organizations or validators/ verifiers may be chosen for witnessing.
- 5.6.9 A plan for witness assessments shall be communicated to the accredited VVB as per laid down guidelines of the NABCB.
- 5.6.10 The number of NABCB assessors/experts in the witness assessment team would be generally as many as in VVB team but decided on case to case basis by NABCB, and the decision of NABCB shall be binding.
- 5.6.11 In selection of VVB to be witnessed, besides Annex 1A, NABCB will consider the following:
- a) Will normally not witness the same validators/verifiers that have been witnessed earlier for the given standard/programme/scheme and type;
 - b) Will normally not witness a VVB of any facility or project, which has been witnessed earlier.
 - c) Where a VVB is conducting both validations and verifications, both functions may be witnessed.
- 5.6.12 The first surveillance assessment shall be completed within 9 months from the date of initial accreditation. However, the accredited VVB, for valid reasons, may seek a postponement of the assessment for a maximum period of three months. Further surveillance assessments would be carried out every 12 months.

- 5.6.13 For deferring the surveillance, the accredited VVB shall give a written justification and obtain the approval of CEO, NABCB. It shall be ensured that the gap between two consecutive assessments shall not exceed 15 months.
- 5.6.14 The Surveillance Assessment Report and non-conformity reports of each of the surveillance assessment shall be forwarded to the accredited VVB by the NABCB AT for taking corrective action as per the laid down criteria for the maintenance of accreditation.
- 5.6.15 In the event of any critical and or major non-conformity that can affect the VVB process, NABCB shall inform the accredited VVB and shall call for a time bound corrective action plan. VVB shall be liable to suspension of accreditation keeping in view the seriousness of the non-conformities. The decision for an additional follow up visit to verify the implementation of the corrective action plan as committed by the accredited body shall be taken by NABCB in consultation with the Team leader of the assessment team. Such decision shall be binding on the accredited validation and verification body. The cost of the additional visit shall be borne by the accredited VVB. In the event accredited VVB has not shown evidence of completion of the corrective action agreed as per committed time period, NABCB shall prepare a status report and submit it along with the assessment report to the Accreditation Committee for further decision on suspension or reduction or withdrawal of accreditation.
- 5.6.16 The summary of the surveillance assessment reports shall be presented to the Accreditation Committee for consideration and decision regarding suspension (partial/full) of accreditation of the accredited VVB. Otherwise the reports would be reviewed at NABCB secretariat end.
- 5.6.17 The frequency of surveillance assessments shall be increased based on the type and nature of non-conformities observed, complaints received, market feedback etc. The accredited VVB shall be informed of the reasons for any change in the frequency.

5.6.18 Market Surveillance

a) Validation Audits for Market Surveillance

- NABCB would call for information on new V/V conducted on a quarterly basis and then may decide to seek V/V reports on a random basis. The reports would be reviewed and clarifications sought if needed. If a clear deviation from the requirement of the standard is established, then such findings would be raised as non-conformities requiring the accredited VVB to respond.
- Based on concerns noticed during the office assessment / market feedback / complaints CEO/Director or nominated person, NABCB may decide to arrange visits to validated / verified projects and or organizations directly. Such visits to client's organization/ project site and offices may be conducted independently or along with VVB. Applicant / VVBs shall, in their contract agreement with their clients provide for such independent or joint visits. Accredited VVBs shall be informed of any such NABCB's validation visits, the duration of such visits and the information planned to be collected.

If the visits indicate satisfactory operation of accredited VVB, then a reduction in normal witnessing could be considered. If however, the visits reveal unsatisfactory operation of the accredited VVB then NABCB would advise accredited VVB the actions to be taken, which could include a special office assessment, intensified witnessing, witnessing at the organization which revealed unsatisfactory operation

etc. Accredited VVB shall bear man-days and other charges for such Validation audits.

- VVBs may opt for such Validation audits in lieu of witnessing on their own. In such cases the number of Validation audits required, duration and charges to be levied would be communicated to the VVB by NABCB in advance for acceptance. Selection of samples would be done by NABCB. Witness Assessment Procedure as per Annex-1A shall be followed in such assessments as well.

5.7 Other Surveillance Activities

5.7.1 NABCB Secretariat would call for information on new validation and verifications activities and certificates issued on a quarterly basis and then may decide to seek assessment reports on a random basis. The Secretariat would have the reports reviewed and seek any clarification. If a clear deviation from the requirement of the standard is established, then such findings would be raised as non-conformities requiring the accredited VVB to respond. VVB would bear the cost of such reviews.

5.7.2 If the visits indicate satisfactory operation of accredited VVB, then a reduction in normal witnessing could be considered. If however, the visits reveal unsatisfactory operation of the accredited validation/verification programme/scheme, then NABCB would advise actions to be taken which could include a special office assessment, intensified witnessing, witnessing at the organization which revealed unsatisfactory operation etc.

5.7.3 VVB may opt for such interactions/validation visits in lieu of witnessing on their own. In such cases the number of validation visits required, duration and charges to be levied would be communicated to the VVB by NABCB secretariat in advance for acceptance. Selection of samples would be done by NABCB Secretariat.

5.8 Suspension of Accreditation (Partial or Full)

5.8.1 The validation/ verification body shall be subject to suspension of accreditation either fully or partially based on the following conditions individually or severally.

5.9 Extension / Reduction of the scope

5.9.1 Extension of the scope shall be allowed under the following situations

5.9.2 Type A Extension: When the scope is requested by VVB for a new sector, the application will be processed in a manner similar to the initial assessment which includes document review, office assessment, and witness assessment. In this case assessment for same shall be carried out as part of the surveillance visit, by increasing the number of assessor man-days as necessary. Alternatively, NABCB or the applicant may ask for a special assessment.

5.9.3 Type B Extension: When the scope is requested by VVB for a different activity within the same sector, for which the applicant has already been assessed/accredited. In this case applicant VVB is required to provide initial competence analysis and availability of competent resources to carryout V/V activities. An office assessment along with the surveillance assessment for the same shall be conducted by NABCB unless separately. Additional witness assessment will be required in such cases.

- 5.9.4 Where scope extension is requested by accredited VVB during the re-accreditation stage, the request should be made well in advance of the office assessment. Alternatively, NABCB may in consultation, advise the accredited VVB to undertake the assessment separately. NABCB will undertake the scope extension assessment off-site/ on-site review, as decided on case to case basis.
- 5.9.5 Scope Extension assessment quotation shall be agreed prior to undertaking the assessment and shall be charged as per prevailing fee structure. The invoice for scope extension assessments is sent to the accredited VVB. Further action related fresh certificate of accreditation, website update etc shall be initiated only on timely payment of fee for the extension visit. The procedure followed for the assessment and decision for extension of the scope is similar to the initial assessment as described in this document.
- 5.9.6 NABCB will undertake the reduction of the scopes based on following situations:
- The accredited VVB may like to reduce their scope of accreditation voluntarily.
 - In case of inadequate resources and competence as observed during assessments or otherwise
 - In case accredited VVB is placed under partial suspension on account of inadequate resources or inadequate competence.
 - The cases for extension and reduction of scope shall be submitted to the Accreditation Committee for decision.
- 5.9.7 NABCB would publish information about any reduction in the scope and sector of accreditation in its website for information of the industry / other stakeholders.

5.10 Reaccreditation

- 5.10.1 The accredited VVB shall apply for re-accreditation six months prior to completion of the accreditation cycle, and shall be informed about the reassessment process.
- 5.10.2 The reaccreditation process followed shall be as per initial assessment along with document Review in accordance with the relevant sections described in this document.
- 5.10.3 The office assessment should be organized at least 3 months in advance. If the assessment is not organized by the accredited VVB timely to be able to resolve the non-conformities/concerns, it could result in withholding reaccreditation.
- 5.10.4 The accredited VVB shall also be required to organize the minimum witness assessments as per NABCB guidelines and scope. The bases of decision of witness assessments would be based on witness conducted during the entire cycle.
- 5.10.5 On completion of the re-assessment, the accredited VVB shall initiate the root cause analysis and actions to take corrective actions on the identified non-conformities and concerns, if any, and complete all actions within defined timeline as per Annex 4. The assessment team shall prepare a report of all the aspects of the assessment of the office and witness assessments with recommendations. The assessment report is made in the following parts stating:



- Changes in the accredited VVB (refer clause 8), and its system.
 - Non-conformities/concerns observed during various stages of the assessment, including witness assessments.
 - Level of conformity as assessed for the VVB's management system against accreditation requirement.
- 5.10.6 The report shall be prepared as per the laid down guidelines and criteria by the team leader / team members in the established formats listing the level of compliance to the requirement of the accreditation criteria of the NABCB. The CEO, NABCB presents the report of the re-assessment with the corrective actions taken by the accredited VVB to the Accreditation Committee for a decision.
- 5.10.7 If the decision by the Accreditation Committee is to grant reaccreditation, a fresh set of accreditation documents shall be issued to the accredited VVB.
- 5.10.8 The renewal shall be for a period of 4 years subject to satisfactory operation of accredited V/V programme/scheme by the VVB and reasonable number of NABCB accredited certificates being issued by the VVB.
- 5.10.9 If the decision of the Accreditation Committee is not favourable, it shall be communicated to the accredited VVB for initiating appropriate actions including any corrective action. The NABCB reserves the right to withdraw accreditation based on the decision of the Accreditation Committee.
- 5.10.10 All reassessment activities shall be completed prior to the expiry of accreditation. In case there is a delay in decision-making, the accreditation may continue, if the report of the assessment team is satisfactory. The decision of the Accreditation Committee shall be binding on the accredited VVB in such cases.
- 5.10.11 The reaccreditation may be withheld if there are unresolved issues from the reaccreditation assessments and especially if major/critical non-conformities are pending. The withholding of reaccreditation will generally not be for more than 6 months and if issues are not resolved within this timeline, the accreditation would be allowed to expire. If however, reaccreditation is granted, the reaccreditation shall be from the due date and the period from the expiry date to the decision for reaccreditation shall be treated as suspension.

6 Suspension and Withdrawal of Accreditation

6.1 Decision on Suspension and Withdrawal of Accreditation

Accreditation Committee is authorized for taking decisions on the suspension, withdrawal of accreditation or revocation of decision of suspension.

6.2 Suspension of Accreditation (Partial or Full)

- 6.2.1 The validation/ verification body shall be subject to suspension of accreditation either fully or partially based on the conditions referred in clause 7.1.1 individually or several:
- a. No / ineffective corrective action in response to the non-conformities observed during surveillance assessment or reassessment.

- b. Non-payment of outstanding dues
- c. Any major change has taken place in the legal status, ownership, impartiality etc. without information to NABCB
- d. Any wilful misuse of the logo of NABCB
- e. Any wilful mis-declaration in the application form
- f. Any wilful non-compliance to the accreditation agreement
- g. Any non-compliance to the terms and conditions of accreditation including organizing assessments within timelines prescribed.
- h. Inability or unwillingness of VVB, to ensure compliance of the organizations validated and/ or verified by the accredited body to the applicable standards.
- i. Excessive and/or serious complaints against the validation & verification system of the accredited VVB.
- j. Evidence of lack of control over the V/V process and or willful by-passing of V/V procedures
- k. Evidence of unethical V/V practices including providing incorrect information to NABCB, faking of validation/ verification records
- l. Non-availability of resources in some of the technical areas covered under accreditation.
- m. Non-compliance to the revised requirements of the standards before deadline set as per the NABCB policy
- n. Any other situation deemed appropriate by the Accreditation Committee
- o. providing validation/ verification to IAF MLA Level 1 to 4 standards (refer IAF MD 7)

6.2.2 A notice citing reasons and intention to suspend shall be sent to the VVB inviting response within 15 days.

6.2.3 The accredited VVB shall be given an opportunity to explain its position in writing to the NABCB and present its case in person to the Accreditation Committee. The final decision shall be taken in respect of suspension of accreditation (Partial or full) on the basis or facts and the results of such presentation.

6.2.4 Notwithstanding the above provision for a representation by the VVB, the Accreditation Committee may decide to suspend accreditation without any notice if there is sufficient evidence of wilful misrepresentation of facts or wilful non-compliance to accreditation criteria. The period of suspension shall be formally communicated as per the criteria laid down by the NABCB.

6.2.5 The information about suspension of the accreditation of the validation/ verification body (partially or full); would be published in website for information. In the situation as per 3.3 (r) which leads to suspension of accreditation, NABCB shall also inform its decision with reason to IAF Secretariat in line with IAF MD7. NABCB shall inform the Scheme/Programme owner about the suspension.

6.2.6 VVB may seek suspension citing its own reasons on voluntary basis.

6.2.7 The suspension would normally not exceed six months. NABCB shall have the right to withdraw the accreditation if the accredited VVB does not take suitable corrective action to the satisfaction of the NABCB and its assessment team within six months,

- 6.2.8 For revoking suspension, the accredited VVB shall formally apply to NABCB as per the established guidelines. The suspension shall be revoked after an assessment has been carried out to verify that the corrective action has been implemented and is effective in eliminating the reasons for suspension.
- 6.2.9 In the event of part / full suspension of the accreditation, the accredited VVB shall be informed and shall be barred from issuing VV assertions for the scopes for which the accreditation has been suspended.

6.3 Withdrawal of Accreditation

- 6.3.1 The validation/ verification body shall be subject to withdrawal of accreditation based on the conditions under Cl 7.1.1 individually or severally:
- If an accredited body voluntarily relinquishes its accredited status
 - If the non-conformities are not appropriately addressed in spite of suspension for a period not more than six months
 - If no action is taken by the accredited body in response to the suspension on any other grounds.
 - Complaints are received about the validation/ verification process / certified organizations and established to be based on facts
 - If there is any evidence of unethical conduct or fraudulent behaviour
 - Any situation which is serious enough to warrant withdrawal
 - providing validation/ verification to IAF MLA Level 1 to 4 standards (refer IAF MD 7)
- 6.3.2 A notice of the intention to withdraw accreditation and citing reasons shall be sent to the VVB. The VVB shall respond within 15 days.
- 6.3.3 The accredited validation/ verification body shall be given an opportunity to explain its position in writing to the NABCB and present its case in person to the Accreditation Committee. The final decision shall be taken in respect of withdrawal of accreditation on the basis of facts and the results of such presentation
- 6.3.4 The withdrawal of accreditation shall be formally communicated as per the criteria laid down by the NABCB.
- 6.3.5 NABCB would publish information about any withdrawal of accreditation in its website for information of the industry / other stakeholders. In the situation as given under 6.3.1, which leads to Withdrawal of accreditation, NABCB shall also inform its decision with reason to IAF Secretariat in line with IAF MD7. Further, NABCB shall also inform the withdrawal status to the respective Scheme Owner
- 6.3.6 In the event of the decision to withdraw the accreditation, VVB shall be asked to return the original accreditation certificate and the enclosure of scopes to the NABCB and to stop using the accreditation mark of the NABCB forthwith. The CEO/Director NABCB shall also notify the legal course for initiating any penalty of such misuses if it is reported and found supported by facts and evidences.
- 6.3.7 Withdrawal of an accreditation has consequences on the customers of VVB. Accredited certificates issued shall be considered as unaccredited once the accreditation is withdrawn.

VVB shall provide its customers with information on the withdrawal of its accreditation and on its consequences.

6.3.8 Following withdrawal of accreditation, VVB would be eligible to seek fresh accreditation as a new applicant only after a lay off period of minimum one year.

6.4 Public Information of Suspension or Withdrawal of Accreditation or Withholding of reaccreditation or reduction of scope

6.4.1 The information about reduction of scope, suspension (partial or full), or withdrawal of accreditation or withholding of reaccreditation shall be placed on the NABCB website. NABCB may also make a public declaration by other means like newspapers. The charges for making the information public through newspapers shall be recovered from VVB involved before revoking the suspension or renewal of accreditation.

6.4.2 The information so published in public media will be open for the feedback from the industry / other stakeholders. Any feedback so obtained at any stage of accreditation, shall be addressed by NABCB appropriately.

7 Non-Conformities and Corrective Actions

7.1 The Non-conformities observed shall be classified in three categories:

7.1.1 Critical:

- Any evidence that indicates that the certificates issued by the VVB may not be based on sound judgment and objective evidences and may not be a true reflection of the compliance to the standards.
- Any failure of implementation of the Validation and verification rules as per accreditation criteria and raises doubts on the operation and practice of the validation and verification and the results of the VV system being operated by the VVB.
- Any evidence that indicate possibility of fraudulent/irregular behaviour by the VVB, such as issuance of certificates without audit or minimal audit, violation of impartiality requirements which indicates an unacceptable threat to impartiality, issuance of Validation and verification certificates to a client not observed to be fit for VV during validation assessments, etc.
- Critical non-conformities shall call for the immediate correction and corrective actions based on appropriate root cause analysis. Such actions shall be completed and non-conformities addressed within 30 days of the date these have been observed by the assessment team as per the Annex 4. Critical NC shall be brought to the immediate notice of Director/CEO NABCB by the Team Leader of the NABCB AT. The VVB may be liable for suspension/withdrawal of accreditation with due notice if such NCs are raised even as it takes action to address them. In case the corrective action is not completed within the stipulated time frame, the accreditation may be liable for suspension partially or completely or withdrawal based on the nature of non-conformity.

7.1.2 Major:

- Any evidence that casts doubt on the system of validation and verification and is less severe than in case of the critical (which bring into question the validity of certificate

issued) and is evident in failure of certain elements of the criteria individually (e.g. absence of liability insurance or internal audit system not working). It may have less direct impact on the VV system and its results or any minor non-conformities that have not been acted upon within the stipulated time frame. A number of minor nonconformities associated with the same requirements or issue may be considered as major nonconformity if it indicates a systemic failure.

- Major non-conformities shall call for the early correction and corrective actions based on appropriate root cause analysis. Such actions shall be completed and non-conformities addressed as per the timelines stipulated in Annex 4. . In case the NC is not addressed within the stipulated time frame, the accreditation may be liable for suspension partially or completely based on the nature of the non-conformity.

7.1.3 Minor:

- Any evidence that indicates a non-compliance to the accreditation criteria and the application documents, which has negligible impact on the validation and verification system and its results.
- Minor non conformities shall be addressed and corrected as early as possible but not later than 3 months (90days) from the date these have been observed by the assessment team, as per the timelines stipulated in Annex 4. In case of minor NCs also the VVBs will be required to undertake appropriate root cause analysis before deciding the corrective action. One of the analysis it will require to do is to establish whether it is an isolated case or there are other instances the same finding is observed since the rigour of the corrective actions decided will depend on the same.

Note 1: Multiple Minor NCs with related impact on the system of VVB shall result in a Major non-conformity based on the judgement of the assessment team.

Note 2: NCs remaining unresolved after the prescribed timelines are liable to be upgraded to the next higher category.

7.1.4 Concerns:

NABCB assessment teams may also raise concerns under the following circumstances:

- minor gaps/inadequacies observed, in VVBs documented system or practices, which do not directly amount to non-compliance. However, if no action is taken they are likely to result in nonconformities.
- Issues observed during witness assessments, which may require further review and assessment of the systems of the VVB in the office.
- Findings of minor nature where, in the judgement of the assessment team, root cause analysis is not required
- Issues from documentation review, minor in nature, which have remained unresolved subsequent to office assessment, where the practice of the VVB was observed to be complying with the requirements of the standard.
- Concerns are findings which do not require the VVB to carry out any root cause analysis. It can directly inform the correction/corrective actions it has taken or intends to take (where it would take time). In certain cases, where these are unresolved issues from documentation review, the NABCB AT may ask the VVB to submit the evidence of Corrective actions for the resolution of the concerns.

- 7.1.5 The VVB shall be given only two chances/iterations for acceptance of corrective actions (proposed/implemented) and closure of non-conformities/concerns and from 3rd iteration onwards, they would be charged for the additional review accordingly (0.5/1 man-day as decided on case- to case basis).
- 7.1.6 The time for addressing the NCs/Concerns shall be reckoned from the day the non-conformities are handed over to the validation and verification body.
- 7.1.7 Non-conformities of critical or major nature shall normally call for a follow up visit either to the office or on-site as per recommendation of the assessment team. Such a follow up visit shall be charged as per prevailing fee structure.
- 7.1.8 In case of minor non-conformities, a declaration in respect of completion of the corrective action by the authorized person of the VVB may be accepted. However, during surveillance, if it is found that the Minor non-conformity is not effectively addressed, the non- conformity shall be upgraded into major non-conformity and shall have to be treated as per the criteria laid down for Major Non-conformity.

Note: The assessment team may also identify opportunities for improvement and convey the same to the VVB as observations and include in their final report.

8 Changes in the Accredited VVB

8.1 As a part of application for accreditation applicant/accredited VVB undertakes to inform NABCB within 30 days if any change takes place in any of the aspects of its status or operation that affects its:

- a) Legal, commercial or organizational status
- b) Organization and management, for example key managerial staff
- c) Policies or procedures, where appropriate
- d) Premises
- e) Personnel, equipment, facilities, working environment or other resources, where significant
- f) Capability to undertake validation or verification activities
- g) Scope/ Sectors of accredited activities
- h) Conformance with the requirements of the accreditation criteria
- i) Addition/Closure/Cancellation of any new branches / sub-contractors (within India or outside India, with complete details on activities undertaken specifically), the foreign locations where clients are located / operations related to validation/ verification are performed
- j) Any complaint/ feedback of serious nature received from V/V programme/scheme owners or intended user/ stakeholders on its performance.
- k) any deregistered/ unaccredited status of other programme/scheme applicable under this V/V programme/scheme on accreditation, reduction of scope /suspension/ withholding/ withdrawal by other accreditation bodies the VVB may be accredited under that r programme/scheme.
- l) Any other force majeure condition rendering accredited VVB incapable and unable to discharge its normal functioning, including the Change-Management Actions initiated in such instances.

8.2 On receipt of the information of change in any of the above parameters, the CEO/Director decides whether a special visit is necessary or the change shall not affect the operation of the validation/ verification system within the accredited scope and sector. If the CEO/Director recommends a surveillance visit, such surveillance visit shall be charged as per prevailing fee structure. The invoice for such surveillance visit is sent to the accredited VVB. Further action

shall be initiated only on receiving the timely payment of fee for the surveillance visit. The procedure of surveillance assessment shall then be followed.

- 8.3 During regular surveillance the accredited VVB shall be required to confirm if there are any changes in the parameters mentioned above or any other aspect that will affect the V/V ability and capability since the last assessment. The VVB shall also submit the relevant documents. This shall be verified by NABCB assessment team.

8.4 In case an accredited VVB is found to have given a wilful wrong / incomplete declaration, the NABCB shall initiate suitable action and also shall reserves the right to suspend / withdraw the accreditation.

9 Fee Payable for the Accreditation Process and Annual Fee

- 9.1 The approved fee structure of NABCB shall apply for the Validation and Verification accreditation programme. Refer BCB_F_002 Fee Structure for Validation and Verification Bodies).
- 9.2 The total fee shall depend on the actual assessment days and other parameters as specified in the fee schedule.
- 9.3 Each accredited VVB shall pay annual operating fee as identified in the current approved schedule.
- 9.4 NABCB shall have the comprehensive rights to revise the fee schedule at the end of every financial year.
- 9.5 NABCB shall take the following actions if any applicant or accredited VVB fails to pay the fee as invoiced.
- Stop further processing of the application
 - Does not offers accreditation
 - Suspend and/or withdraw the accreditation
- 9.6 If the applicant VVB fails to pay the invoiced fee within 90 days, the application for accreditation will be rejected. In the event of the rejection of the application, the fee paid till date will not be refunded.
- 9.7 Fees for any assessment on foreign locations carried out by the local accreditation body shall be charged at the current rates of the local accreditation body.
- 9.8 Additional charges may be levied on the applicant VVB on account of following and as described in their relevant sections.
- Corrective Actions Review resulting from Document Review.
 - Corrective Actions and Implementation Review resulting from Nonconformities.
 - Scope Extension Reviews and Assessments
 - Providing NABCB accreditation application documents for the V/V programme on specific request, where they are available on NABCB's website as well.

- Unscheduled visits or assessments resulting from changes in the accredited VVB/ market surveillance/ feedback or complaint/dispute/appeal analysis or any other means.
- Publication in the newspaper for the purpose of public information.
- Foreign location assessment of the client or office of accredited VVB.
- Any other reason upon the discretion of NABCB after consultation with the applicant/ VVB.

10 Complaints

- 10.1 Any person or body has the right to send a complaint on the activities and actions of the NABCB and its procedures.
- 10.2 The complaint must be made in writing to NABCB with complete details of the complainant and description of the problem. The NABCB shall arrange to acknowledge the complaint within 7 days (excluding postal time) with brief details on the approach and approximate time required for addressing the complaint.
- 10.3 If the complaint has no details of the complainant or the description is not adequate, NABCB shall have the right of dealing with such complaint as deemed fit.
- 10.4 If the complaint is against the non-compliance of accreditation criteria by any applicant VVB, then NABCB shall encourage the complainant to utilize the procedure for complaints of the respective applicant VVB. NABCB may carry out an investigation in accordance with the procedure BCB 203. The report of the analysis is sent to both the parties along with the invoice as applicable to recover the cost of such complaint analysis.
- 10.5 NABCB shall follow each complaint to conclusion and initiate possible corrective and preventive actions.
- 10.6 NABCB shall maintain record of each complaint, the corrective & preventive actions taken and the effectiveness of such action.

11 Appeals and Disputes

11.1 Appeals

- 11.1.1 The applicant / VVB may file an appeal against the decision of the NABCB to the Chairman of the NABCB through the CEO. The appeal against the decision of the NABCB must be made within 30 days of the notification of that decision. The CEO/Director or nominated person shall acknowledge the appeal and indicate the approximate time required to resolve the same within 7 days.
- 11.1.2 All appeals against a decision of NABCB shall be filed in writing along with all the necessary documents in support of the appeal.
- 11.1.3 The CEO/Director or nominated person shall arrange to verify the documents for completeness and may ask for additional documentary support if necessary. Once the documents are complete, the CEO or nominated person acknowledges the receipt of the appeal and forwards the same to the Chairman. The Chairman of the NABCB has the right

to either disallow the appeal or to form an Appeals Committee based on the merit of the contents of the appeal.

11.1.4 The Appeals Committee shall be headed by one of the NABCB Board Members nominated by the Chairman. The nominated head of the Appeals committee is allowed to take assistance of any of the assessors, staff or experts of the NABCB as necessary to discharge the appeal.

11.1.5 The Head of the Appeals Committee shall ask the appellant to present the facts in person to the appeals committee if necessary. The appeals committee shall have the right to ask any of the staff, committee or empanelled assessors and staff for the facts to help in discharging the appeal based on facts.

11.1.6 The Appeals committee shall give its recommendation to the Chairman of the NABCB for necessary action to discharge the appeal to the satisfaction of the appellant and regarding the preventive actions, if any, that must be taken to avoid such recurrences. The Chairman of the NABCB shall give the decision on the appeal based on the recommendation by the appeals committee.

11.1.7 In case the decision is unacceptable to the appellant, an appeal can be made to the Chairman, Quality Council of India. Chairman, QCI in consultation with Chairman of the NABCB shall decide on the representation made by the appellant. Decision of Chairman, QCI shall be final.

11.2 Disputes

11.2.1 The disputes about the accreditation system, assessment process etc. should be forwarded to the CEO of the Board in writing along with the information on the issue supported by the documentary evidence. Such issues may be resolved through negotiations/reference to regional / international organizations - APAC / IAF. On technical issues the decision / views of IAF / APAC shall be considered in the resolution of disputes. On all administrative issues, the decision of NABCB shall be binding.

11.2.2 The CEO/Director shall keep all the records pertaining to the complaints, disputes and appeals and the corrective & preventive actions taken by the NABCB.

11.2.3 If the Complaint, Disputes or Appeal is resolved without undertaking any travel or additional assessment, no financing shall be needed for such resolutions. If the resolution calls for undertaking travel and assessment, the cost shall be borne by the defaulting party.

12 Public Information & Availability of Accreditation Programme/scheme

12.1 NABCB shall make public announcement of the accreditation programme/scheme, criteria of accreditation, application for accreditation, fee schedule, cross-reference matrix and other related documents on its website and make them available on specific request on chargeable basis.

12.2 NABCB shall maintain a list of the accredited VVB on its website. It also makes this information available on request

12.3 This accreditation programme is open to all applicants within the capability and scope of the NABCB.

12.4 NABCB shall make public information about suspension and withdrawal of accreditation.

13 Confidentiality and Disclosure

13.1 The information obtained regarding the VVB system of the applicant bodies and accredited bodies that are not of the nature of public information shall be kept confidential by all the staff, members of the NABCB, panel of assessors, experts and the committee members.

13.2 If NABCB has to share any confidential information due to any legal situation, the concerned VVB body shall be informed of the extent of disclosure and the body to whom the disclosure has been made.

14 Obligations of the Accredited VVB and NABCB

The general obligations of the applicant / accredited VVB and NABCB as below.

14.1 Obligations of accredited VVB during accreditation

During the period of accreditation, accredited VVB shall ensure that:

- (a) It has a policy / procedure governing the protection and use of accreditation mark and its symbol. An accredited VVB is allowed to use this symbol on its reports or certificates issued within the scope of its accreditation.
- (b) The accreditation symbol shall have, or be accompanied with, indication of activity (validation and/ or verification, as per applicable programme/scheme) and the related accreditation.
- (c) It fully conforms with the requirements of NABCB for claiming accreditation status, when making reference to its accreditation (including reference to other programme/scheme) in communication media such as the Internet, documents, brochures, or advertising,
- (d) It only uses the accreditation symbols for premises of the accredited VVB, that are specifically included in the accreditation,
- (e) It does not make any statement regarding its accreditation that NABCB may consider misleading or unauthorized,
- (f) takes due care that no report or certificate nor any part thereof is used in a misleading manner.

VVB may also refer to Annex 5 to review the other obligations.

14.2 Obligations of VVB during Suspension, Withholding or Withdrawal of Accreditation

During the stage of suspension, withholding or withdrawal of accreditation VVB would not claim of accreditation status which will involve discontinuation of accreditation in all advertising matter that contains any reference to an accredited status and symbols.

NABCB shall take suitable action in case it is noticed that there is incorrect claim of accreditation status, or misleading use of accreditation symbols.

NOTE: Suitable actions include request for corrective action, withdrawal of accreditation, publication of the transgression and, if necessary, legal action.

ANNEX 1A
ACCREDITATION SCOPES AND WITNESS ASSESSMENTS FOR ENVIRONMENT PROGRAMME/SCHEME
1 OBJECTIVE:

To provide guidance on the classification of Scope for the purpose of accreditation and planning for witness assessments.

2 SCOPE:

This Annex applies to the Accreditation of Environment Sector by NABCB for following activities:

2.1 GHG V&V as per ISO 14065:2020 and ISO 14064-1:2018 & ISO 14064-2:2019

For GHG accreditation, where VVB applies only for ISO 14064-1 only, two completed organization level verifications should have been done meeting Sector Programme/scheme requirement. Where VVB applies for both ISO 14064-1 and ISO 14064-2, two completed validation and/or verifications should have been done, of which one should be a validation project and the other verification at organization or project level meeting Sector Programme/scheme requirement as well ISO 14064-3:2019 or any other globally recognised Programme/schemes which are largely based on ISO 14065.

2.2 Scope classification: NABCB shall accredit the Validation and Verification Bodies based on the sectors for Greenhouse Gas Validation and Verification based on Annex A.

For the purpose of witnessing and grant of accreditation, the sectors have been classified based on complexities and grouped from A-G for each of the ISO 14064-1: 2018 and ISO 14064-2:2019 standards as below:

Table A.1-ISO 14064-1 Verification scopes

S. No.	Sectors	Example of Included Activities	Complexity	Witness Groups
1.	Power Generation and Electric Power Transactions	Transmission of electricity	Complex	A
		Generation of bulk electric power		
		Transmission of generating facility to distribution centres and/or distribution to end users		
		Renewable energy system		
		Purchased electricity and steam		
2.	General Manufacturing (physical or chemical transformation of	Manufacturing –Electric and Electronics equipment, industrial machinery	Complex	A
		Manufacturing – Food processing		



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S. No.	Sectors	Example of Included Activities	Complexity	Witness Groups
	materials or substance into new products)	Civil engineering e.g. construction will cover under this sector		
3.	Oil & Gas Extraction, Production and Refining; and pipeline distribution, including Petrochemicals	Conventional exploration and production	Complex	B
		Oil sands and heavy oil upgrading		
		Coal bed methane production		
		Gas processing plants		
		Gas well completions		
		Transportation and distribution		
		Natural gas storage and LNG operations		
		Crude oil transportation		
		Refining		
		Petrochemical manufacturing		
		Emissions from process vents in oil and gas treatment		
		Process emissions (eg. Glycol dehydration, acid gas removal/Sulphur recovery, hydrogen production, fluid catalytic cracker (FCC) catalyst regeneration)		
		Venting emissions (e.g. vessel loading, tank storage and flashing, and venting associated gas)		
		Fugitive emissions (e.g. leaks from equipment and piping components)		
		Non routine events (e.g. gas releases during planned pipeline and equipment maintenance, releases from unplanned events)		
4.	Metals Production	Production of processing of ferrous metals	Complex	C
		Production of secondary aluminium		
		Processing of non-ferrous metals including production of alloys		
		Production of Coke		
		Metal ore roasting or sintering, including palletisation		
		Production of pig iron or steel including continuous casting		
5.	Aluminium Production	Primary aluminium	Complex	C



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S. No.	Sectors	Example of Included Activities	Complexity	Witness Groups
6.	Mining and Mineral Production	Production of cement clinker and production of lime or calcinations of Dolomite or Magnetite	Complex	C
		Glass and ceramic, mineral wool		
7.	Pulp, Paper and Print		Complex	D
8.	Chemical Production	Production of Carbon black	Complex	D
		Production of Ammonia		
		Production of bulk organic chemicals by cracking, reforming, partial or full oxidation or by similar processes		
		Production of hydrogen and synthesis gas by reforming or partial oxidation		
		Production of Soda ash and sodium bicarbonate		
		Production of Nitric acid		
		Production of Adipic acid		
		Production of Glyoxal and Glyoxylic acid		
9.	Carbon Capture & Storage	Capture and transport of GHG by pipelines for geological storage	Complex	G
		Geological storage of GHG in a storage site		
10.	Transport	Aviation	Complex	A
		Other transportation		
11.	Waste handling and disposal	Water and waste water treatment	Non Complex	E
		Landfill and Composting Facilities		
12.	Agriculture, Forestry and Other Land Use (AFOLU)		Non Complex	F
13.	General	Building Services/ Facility Management	Non Complex	A
		Education		
		Hospital		
		Others		

Table A.2-ISO 14064-2: Project Validation & Verification

S. No.	Sectors	Example of Included Activities	Complexity	Witness Groups
1.	Energy industries (renewable/non-renewable sources)	Thermal energy generation from fossil fuels and biomass including thermal electricity from solar	Complex	A
		Energy generation from renewable energy sources		
2.	Energy distribution	Electricity distribution	Non-Complex	A
		Heat distribution		
3.	Energy demand	Energy demand	Non-Complex	A
4.	Manufacturing industries	Cement sector	Complex	B
		Aluminium		
		Iron and steel		
		Refinery		
5.	Chemical industry	Chemical process industries	Complex	D
6.	Construction	Construction	Non-Complex	A
7.	Transport	Transport	Non-Complex	A
8.	Mining/mineral production	Mining and mineral processes, excluding oil and gas industry, coal mine methane recovery and use	Complex	C
		Oil and gas industry, coal mine methane recovery and use		
9.	Metal Production	Metal production	Non-Complex	B
10.	Fugitive emissions from fuels (solid, oil and gas)	Mining and mineral processes, excluding oil and gas industry, coal mine methane recovery and use	Non Complex	B
		Oil and gas industry, coal mine methane recovery and use		
11.	Fugitive emissions from production and consumption of halocarbons and Sulphur Hexafluoride	Chemical process industries	Non Complex	D
		GHG capture and destruction		
12.	Solvents use	Chemical process industries	Complex	D
13.	Waste handling and disposal	Waste handling and disposal	Non-Complex	F

S. No.	Sectors	Example of Included Activities	Complexity	Witness Groups
		Animal Waste Management		
14.	Afforestation and Reforestation		Non-Complex	E
15.	Agriculture	Agriculture	Non-Complex	F
16.	Carbon Capture of CO2 in geological formations	Carbon Capture of CO2 in geological formations	Complex	G

3 Witness Assessment

3.1 The witness assessment selection and planning would depend on various factors including:

- type of Validation and/or Verification activities involved,
- agreed level of assurance, materiality level, objectives and scope;
- complexity involved in the environmental assertion, project plan and inventory,
- size of the validation/ verification activity,
- spread of validations/ verifications conducted per standard per scope/ technical area,
- grouped projects and/or several facilities within organization verification,
- multi-site location validation/ verification projects/ organizations,
- geographical location and spread of the validation/ verifications,
- Organizational links and interactions between stakeholders, responsible parties, client, intended users; and programme/scheme requirement.
- the number of Validator and Verifiers employed / empanelled by the VVB,
- feedback from the market and complaints received,
- inputs from any office assessment,
- any other point of relevance as per applicable IAF Mandatory Documents, which NABCB considers pertinent

3.2 Witness assessment for Initial Accreditation

Witness Assessment for initial accreditation shall be as below:

3.2.1 For accreditation and grant of scopes/sectors under ISO 14064-1 and ISO 14064-2, witness assessments shall be separately conducted for the respective standards.

3.2.2 One witness assessment shall be required as minimum for each standard and each scheme for which accreditation is being sought by the VVB. However, depending on the standard, scope and the sector for which accreditation is being sought, NABCB will decide and may enhance the witness assessment requirements.

3.2.3 Each group shall require one witness from complex sectors (Refer Table A.1 and A.2).

3.2.4 If VVB has applied for only one programme/ scheme (refer BCB 165, Annexure -A), then at least one witness assessments is required.

3.2.5 If VVB has applied for more than one programme/ scheme (refer BCB 165, Annexure -A), then NABCB would witness at least one audit per programme/ scheme.

3.2.6 Witness Assessment for ISO 14064-1:2018

- One Witness assessment is required at Organizational Level Verification for ISO 14064-1: 2018. If Witness is offered for a sector with highest complexity, all other sectors with lower complexity within the same group can be granted.
- Non-complex sectors within other group(s) shall be granted without any witness based on office assessment (Refer Table A.1) subject to complying with 3.2.2 above.

3.2.7 Witness Assessment for ISO 14064-2:2019

- One Witness assessment is required at Project Level Validation for ISO 14064-2:2019. If Witness is offered for a sector with highest complexity, all other sectors with lower complexity within the same group can be granted.
- One Witness assessment is required at Project Level Verification per Group for ISO 14064-2:2019. If Witness is offered for a sector with highest complexity, all other sectors with lower complexity within the same group can be granted.
- Witness of Project Level Validation will allow the grant of both Project Level Validation & Verification for the applied sectors.
- Witness of Project Level Verification will allow the grant of only Project Level Verification and not Project Level Validation for the applied sectors;
- 3.2.8 Non-complex sectors within the same group shall be granted without any witness based on document review/office assessment (Refer Table A.1 and A.2) subject to complying with 3.2.2 above.
- Non-complex sectors within other group(s) shall be granted without any witness based on office assessment (Refer Table A.2) subject to complying with 3.2.2 above.

3.2.9 In case there are no clients available for a particular scope/sector, the scope(s) may still be considered for accreditation subject to complying with 3.2.2 above. In such cases, NABCB reserves the option to review the first client file/Witness Assessment in that scope /sector after grant of accreditation. It would be the responsibility of the VVB to keep NABCB informed of undertaking validation/ verification in such scopes/ sector, prior to the issue of validation/ verification statement. In case of regulatory scheme, accreditation cannot be granted without witness assessment.

3.3 Restriction in Scopes

Based on the available competence and / or the recommendation of the assessment team, the Accreditation Committee may decide to restrict grant of accreditation to a part of the broad scope and sectors described. The accreditation schedule would indicate the actual coverage in terms of specific sectors and specific technical area.

3.4 Witness assessments for surveillance

- 3.4.1 Witnessing is a part of the surveillance and shall be conducted for each of the standards/scheme separately.
- 3.4.2 NABCB may demand to witness a specific Validator and/or Verifier or any organization issued with validation / verification statement.
- 3.4.3 VVBs shall offer at least one audit of client for witness assessment for complex sectors under each standard / programme in a year.
- 3.4.4 There may be increase in number of witness assessments based on the number of validations and/or verifications (V/V) as well as the number of Validators and Verifiers employed / empanelled by the VVB.
- 3.4.5 In case of regulatory requirements, NABCB may decide to increase number of witness assessments.
- 3.4.6 In case, multiple sectors have been granted to VVB, WA for other sectors to be offered which have not been offered previously.
- 3.4.7 NABCB shall cover the scope of accreditation granted to VVB through the use of the various mechanisms:
- Office assessment activities
 - Witnessing activities and
 - Other assessment activities like offsite review of the client file, other ABs witness assessment reports.

3.5 Other Witness assessment requirements

- 3.5.1 The witness assessment team shall have appropriate number of assessors vis-à-vis the number of validators/ verifiers from the VVB. However, the number of assessors may remain the same as the number of validators/verifiers considering the complexity and the associated risk involved.
- 3.5.2 In case of multi-sites/ grouped projects or facilities for organization verification; all sites/ projects/ facilities as covered by the VVB, shall be covered by NABCB assessment team.
- 3.5.3 The witness assessment team may have technical experts, for same time period and shall be on chargeable basis.
- 3.5.4 Minimum man-days required for witness assessment shall be decided by NABCB.
- 3.5.5 Documentations supporting validation/ verification activities, competence of personnel with approvals and basis, procedures, etc should be sent for offsite review prior to conducting witness assessment.
- 3.5.6 NABCB Assessment team shall assess methodology of VVB in qualifying its personnel involved in the validation and verification activity, including persons performing pre-engagement and independent review for sectors within the Groups.
- 3.5.7 Where witness assessment is considered unsatisfactory, during any stage of assessment, additional witness assessment shall be conducted in addition to the evidencing closure of findings, where applicable.

ANNEX 2

ASSESSMENT DURATION AND MANDAYS AS PER ISO/IEC 17029

The normal assessment duration would be as follows :

- Document review (Manuals, procedures, other documents as needed – 3 man-days
- Review of corrective actions and revised documents – to be estimated by NABCB Secretariat
- Office assessment – Minimum 4 mandays for one VVB programme, at least one man-day would be added for each extra programme/scheme covered in assessment. Need for any additional man-days for specific situations would be estimated by NABCB Secretariat and informed to the VVB in advance
- Addition of Programme/scheme - One man-day each for addition of new programme/scheme.
- Witness assessments – At least one man-day.
- Follow up assessments – To be estimated by NABCB secretariat
- In case of initial accreditation assessment, the preparation of final report by team leader - 1.5 man-day
- In case of reaccreditation assessment (if witnessing and number of offices are part of the process) - preparation of final report by team leader - 1.0 man-day.
- Review of response to NCs – as per document on timelines for assessment process
- Surveillance assessments – At least 2 man-days for VVB but same may be additional depending upon the number of programme covered.
- Any extension of scope assessment – May require both office assessment and witnessing an estimation of which would be informed by NABCB secretariat.
- Branch office / sub-contractor assessment – generally 1 man-day depending on the activities carried out in the branch

ANNEX 3

NORMS FOR USING REPORTS FROM OTHER ACCREDITATION BODIES FOR USE IN NABCB ACCREDITATION PROCESS

A. Background:

NABCB, as a MLA signatory of APAC & IAF, is obliged to recognize accreditations issued by other MLA signatory accreditation bodies. A provision exists in the MLA procedures of APAC & IAF for exchange of documents among ABs and to recognize the work done by each other.

NABCB Procedure for accreditation BCB 201 (VVB) also includes a provision for using reports issued by other accreditation bodies.

The recommendations by NABCB may take into account the results of assessments by other IAF MLA members.

Therefore, NABCB would consider reports of other ABs who are signatory to IAF/APAC MLA for GHG (ISO 14065), or ISO/IEC 17029, when established.

For the purpose of GHG related validation and verification accreditation, NABCB will take into consideration the accreditation assessment and performance assessments on validation and verification conducted by other non-IAF/APAC members under other internationally recognized GHG programs and standards, such as Clean Development Mechanism (CDM), Voluntary Carbon Standard (VCS), Gold Standard (GS) etc. Other such agencies include United Nations Framework for Climate Change Convention (UNFCCC), VCS, etc.

B. Framework for use of reports from other ABs for initial assessments

1. NABCB would carry out its own office assessment. Use of reports from other ABs would be restricted to witness assessment reports only for the present.
2. NABCB would carry out at least one witness assessment to confirm the VVBs process for auditing before using reports from other ABs. If, however, NABCB has witnessed an audit for another AB such a report would be acceptable in lieu.
3. NABCB would witness assessments in sectors identified as critical in its procedure/criteria.
4. Reports of witness assessments should be reasonably current – not older than 2 years on the date of NABCB assessment and audit witnessed should meet the general NABCB criteria – a) should be either an initial audit / renewal audit covering all the requirements of the Management system standard; b) at least a few critical processes of the scope sector are audited
5. NABCB would follow the IAF Guidance on exchange of documents among IAF MLA signatories. The reports would be sought from the AB directly based on the information provided by the VVB. It shall be the responsibility of the VVB to ensure that the AB concerned releases the reports
6. The competence of the VVB for the specific scope sector relevant to the report and other scope sectors covered by NABCB grouping relevant to the report shall be established during the office assessment and reported in the office assessment report

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Quality Council of India (QCI), World Trade Centre, J 200, Block J, Nauroji Nagar, New Delhi-110029

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7. The VVB shall also confirm that there had been no issues raised by the other accreditation body on auditor competency requirements during their previous assessment.
8. NABCB / Accreditation Committee may decide not to use such reports citing clear reasons.

C. Framework for use of reports from other ABs for Surveillance Assessments

NABCB may utilize any witness assessment report of an IAF MLA signatory and non IAF MLA signatories in lieu of its own witnessing requirements. The process would be similar to that detailed above except that any report of surveillance audits would also be acceptable.

ANNEX 4
TIMELINES FOR ACCREDITATION PROCESS

(Section 3.2 of BCB XXX)

Timelines - The normal time period for the various stages of the accreditation process would be as follows:

SI.	Accreditation Process		Time Norms
1.	Application review by Dealing Officer (from the date of receipt of application)		1 week
2.	Recording of Application (from date of receipt of complete application)		1 week
3.	Letter of Acknowledgement sent to CAB along with Team allocation (from the date of receipt of complete application)		1 week
4.	DR to be completed by AT and sent to CAB & NABCB Secretariat by Team Leader (from the date of receipt of complete application)		4 weeks
5.	CAB to respond to comments on DRR (from the date of receipt of DRR)		2 weeks
6.	Preliminary Visit to be fixed if DR issues are not resolved within 2 rounds (from date of receipt of Round 2 response on DRR from CAB)		4 weeks
7.	Report of Preliminary Visit (from the date of the visit)		2 weeks
8.	OA to be carried out (from the date DR is deemed satisfactory)		4 weeks
9.	OA Report to be submitted by AT to CAB as well as NABCB (after completion of assessment)		3 weeks
10.	Dates of WA to be fixed by CABs (after completion of OA ,if there are no NCs on Competence)		2 weeks
11.	CAB to respond to Findings of OA		
	Critical NC	Proposed Corrective Actions	Within 3 days of the date on which the NC is observed by the AT
		Implementation of Corrective Actions and closure of NC	Within 30 days of the date on which the NC is observed by the AT



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	Major NC	Proposed Corrective Actions	Within 10 days of the date on which the NC is observed by the AT
		Submission of evidence of implementation of accepted Corrective Actions	Within 15 days of acceptance of proposed corrective actions by the AT
		Closure of NC	Within 60 days of the date on which the NC is observed by the AT
	Minor NC/Concern	Proposed Corrective Actions	Within 15 days of the date on which the NC is observed by the AT
		Implementation of Corrective Actions and closure of NC	Within 90 days of the date on which the NC is observed by the AT
12.	NABCB Response on Findings		
	Critical NC	Proposed Corrective Actions	Within 2 days from the receipt
	Major NC	Proposed Corrective Actions	Within 10 days from the receipt
		Evidence of implementation of accepted corrective actions	Within 15 days from the receipt
	Minor NC/Concern	Proposed Corrective Action	Within 15 days from the receipt
13.	WAs to be carried out (from the date of notification by CAB)		Implementation of Corrective Action
14.	CAB to submit the required documents for WAs (before the date of assessment)		Min 1 week before the WA
15.	CAB to provide report of witnessed audit/inspection to AT (after completion of assessment)		Max 1 week after the WA
16.	WA Report to be submitted by AT to CAB as well as NABCB (after receipt of witnessed audit/inspection report from CAB)		3 weeks

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17.	CAB to respond to Findings of WA	As given at SI. No. 11 above
18.	NABCB Response on Findings	As given at SI. No. 12 above
19.	Consolidated IA Report (in case of Initial Accreditation)	1 week after closure of all issues in OA/WAs by CAB
20.	Technical Review of IA Report (after receipt of IA report from TL)	1 week
21.	IA report to be sent to CAB (after Technical Review)	1 week after review
22.	Announcement of decision of grant (from the day of approval of minutes of the AC meeting)	1 day
23.	Once decision of accreditation is announced by NABCB, CAB has to pay the fees and sign the agreement	1 week
24.	Accreditation certificate to be issued by NABCB (after signing of agreement/clearance of payment)	1 day
25.	CAB to ensure that SA is completed (before the month of validity)	3 months
26.	RA application to be received from CAB of last accreditation cycle	6 months before date of expiry of accreditation
27.	Re accreditation OA to be completed	3 months before the date of expiry
28.	Case for Grant of Reaccreditation to AC	Within the month of validity of accreditation



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Timelines for Scope Extension:

Sl No.	Scope Extension Process		Time Norms
1.	Preliminary Scrutiny of application for completeness with regard to documentation and fees (from the date of receipt of application)		2 days
2.	Application review by Dealing Officer (from the date of receipt of application)		2 days
3.	Letter of Acknowledgement sent to CAB along with Team allocation (from the date of receipt of application)		3 days
4.	Offsite review of documents to be completed by AT/assessor and sent to CAB		2 weeks
5.	Findings of offsite review to be addressed by CAB (if any) (from the completion of offsite review)		1 week
6.	Carrying out onsite assessment (if required) (from the date issues in offsite review addressed)		4 weeks
7.	Report to be submitted by AT to CAB (from date of onsite assessment)		2 weeks
8.	CAB to respond to Findings of OA – (from the last date of assessment)		
	Critical NC	Proposed Corrective Actions	Within 3 days of the date on which the NC is observed by the AT
		Implementation of Corrective Actions and closure of NC	Within 30 days of the date on which the NC is observed by the AT
	Major NC	Proposed Corrective Actions	Within 10 days of the date on which the NC is observed by the AT
		Submission of evidence of implementation of accepted Corrective Actions	Within 15 days of acceptance of proposed corrective actions by the AT
		Closure of NC	Within 60 days of the date on which the NC is observed by the AT



NATIONAL ACCREDITATION BOARD FOR CERTIFICATION BODIES (NABCB)

Quality Council of India (QCI), World Trade Centre, J 200, Block J, Nauroji Nagar, New Delhi-110029

Phone: +91-11-2618 6680; E-mail: nabcb@qcin.org; Web: www.nabcb.qci.org.in

	Minor NC /Concern	Proposed Corrective Actions	Within 15 days of acceptance of proposed corrective actions by the AT
		Implementation of Corrective Actions and closure of NC	Within 90 days of the date on which the NC is observed by the AT
9.	NABCB Response on Findings		
	Critical NC	Proposed Corrective Actions	Within 2 days from the receipt
	Major NC	Proposed Corrective Actions	Within 10 days from the receipt
		Evidence of implementation of accepted corrective actions	Within 15 days from the receipt
	Minor NC /Concern	Proposed Corrective Actions	Within 15 days from the receipt
10.	Technical Review of OA Report (from the date of closure of findings)		5 days
11.	WA to be carried out (from the date of completion of OA)		Desirable 2 weeks from the day CAB offers WA; max 4 weeks
12.	CAB to submit the required documents for WAs		1 week before the date of assessment
13.	CAB to provide audit/inspection report to AT (after completion of WA)		1 week
14.	WA Report to be submitted by AT to CAB (after receipt of audit/inspection report from CAB)		2 weeks
15.	CAB to respond to Findings of WA		As given at SI. No. 8
16.	NABCB Response on Findings		As given at SI. No. 9
17.	WA Report review to be completed (from the day of closure of findings)		3 days
18.	Announcement of decision of grant (from the day of approval of minutes of the AC meeting)		1 day
19.	Accreditation certificate to be issued by NABCB (from the day of approval of minutes of the AC meeting)		3 days

ANNEX 5

**OBLIGATIONS OF THE APPLICANT / ACCREDITED VALIDATION AND
VERIFICATION BODIES**

The obligations of the applicant / accredited Validation and Verification body are:

- a) The VVB shall commit to fulfil continually the requirements for accreditation set by NABCB for the scopes for which accreditation is sought or granted including adapting to changes in the requirements for accreditation as and when communicated and shall also commit to provide evidence of fulfilment.
- b) When requested, the VVB shall afford such accommodation and cooperation as is necessary to enable the accreditation body to verify fulfilment of requirements for accreditation. This applies to all locations where the activities of VVB take place.
- c) The VVB shall provide access to NABCB for its personnel, locations, equipment, information, documents and records as necessary to verify fulfilment of requirements for accreditation.
- d) The VVB shall provide access to those documents that provide insight into the level of independence and impartiality of the VVB from its related bodies, where applicable.
- e) The VVB shall arrange the witnessing of their activities when requested by NABCB
- f) The VVB shall have, where applicable, legally enforceable arrangements with their clients that commit the clients to provide, on request, access to NABCB assessment teams, to assess the VVB's performance when carrying out validation and verification activities at the client's site.
- g) The VVB shall claim accreditation only with respect to the scope for which it has been granted accreditation.
- h) The VVB shall commit to follow NABCB's policy for the use of the accreditation symbol
- i) The VVB shall not use its accreditation in such a manner as to bring NABCB into disrepute.
- j) The VVB shall pay fees as determined by NABCB timely.
- k) The VVB shall inform without delay, any significant changes relevant to its accreditation, in any aspect of its status or operation relating to:
 - 1. Its legal, commercial, ownership or organizational status,
 - 2. The organization, top management and key personnel,
 - 3. Main policies,
 - 4. Resources and locations,
 - 5. Scope of accreditation, and
 - 6. Other such matters that can affect the ability of the VVB to fulfil requirements for accreditation.



- l) The VVB shall assist in the investigation and resolution of any accreditation related complaints about itself, referred to it by NABCB.

Obligations of NABCB

- a) NABCB shall provide information on accreditation to the accredited VVB that shall identify the following:
- i. the identity and where relevant, NABCB logo
 - ii. the name of the accredited VVB and the name of the legal entity, if different
 - iii. scope of accreditation
 - iv. locations of the accredited VVB and as applicable the validation and verification activities performed at each location and covered by the scope of accreditation
 - v. the unique accreditation identification of the accredited VVB
 - vi. the effective date of accreditation and, if applicable, its expiry or renewal date, and
 - vii. a statement of conformity and a reference to the international standard(s) and or other normative document(s) including issue or
 - viii. used for assessment of the VVB
- NABCB shall make all the above information publicly available. NABCB shall also make publicly available, where applicable, information on withholding of reaccreditation, extension of validity of accreditation and suspension or withdrawal of accreditation, including dates and scopes.
- b) NABCB shall, where applicable, provide information about international arrangements in which it is involved.
- c) NABCB shall give due notice of any changes to its requirements for accreditation. It shall take account of views expressed by interested parties before deciding on the precise form and effective date of the changes. Following a decision on, and publication of, the changed requirements, it shall verify that each accredited body conforms to the changed requirements.

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Amendment Record

Date	Auth. by	Description of Amendment
January 2022	CEO	To align it with the requirements of new standard ISO/IEC 17029:2019
December 2022	CEO	Clarity has been brought out on witnessing requirements under Annex-1A
December 2023	CEO	-Addition of IAF MD 7:2023 requirements under clause 3.3 & 3.4 - Clarity in retention period for scope extension application
July 2025	CEO	Deletion of IAF MD 14 reference as withdrawn by IAF