



Application for Listing as an Accredited Test House and Laboratory RE: ISO 17025

Notes on completing this form

1. Read the form carefully before filling it in.
2. Please type your answers where possible.
3. Photocopies of sample certificates supporting your application and your Terms & Conditions must be supplied with the completed form
4. You should not necessarily confine your remarks to this form, and you may include an organisation structure if you wish to show your relationship to other organisations connected to your business.
5. An application must be accompanied with the full application fee.
6. When completed, this document must be sent to The Administration Manager of GBAR. at admin@gbar-ab.org Photocopies of sample certificates should also be included.
7. In submitting this application, the applicant agrees to abide by the terms and conditions of GBAR, amended if appropriate, if a contract is entered into.
8. **This application shall not be used for inspection bodies or for management systems certification bodies. For Medical Laboratories operating in accordance with ISO 15189 please request GBAR(F)62.**
9. If initial review by GBAR indicates a probability of success with this application, then you will be required to register more detailed information about personnel and tests online at www.gbar-ab.org

SECTION 1			
NAME OF LABORATORY:			
LEGAL STATUS (<i>Ltd = Limited Company, ST = Sole Trader, PT = Partnership, PLC = Public Limited Company, OT = Other.</i>) Note: Organisation must be a legal entity.:			
WORKS ADDRESS:			
SURNAME AND FORENAME OF PRINCIPLE CONTACT:			
PRINCIPLE CONTACT EMAIL:			
EMAIL FOR GENERAL ENQUIRES (<i>this will appear on the accreditation statement on the GBAR website</i>):			
TELEPHONE:		MOBILE:	
WEBSITE:		FAX:	
REQUESTED SCOPE:			

SECTION 2		ORGANISATIONAL STRUCTURE	
Please attach an organisation structure chart			
Managing Director			
Senior Director(s)			
Head of Inspection			
Head of Calibration			
Other key persons (please list)			



Note 1. Full CV and evidence of skills and competence will be required for the above, and other key persons. Note 2. Add a separate organisation diagram. Note 3. Please indicate family or similar relationships between the above	

SECTION 3 Please advise if in the last two years, you have had a business relationship with any laboratory, test house, certification or inspection body. If so please give name and summary details. Please advise reason for not continuing that relationship.

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SECTION 4 Please advise if in the last two years, you have had a business relationship with any other laboratory, test house, certification or inspection body that may have lost its accredited status. Please state your role in that organisation.

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SECTION 5 Please advise the reasons for seeking GBAR accreditation. (e.g. reputation, technical approach, market awareness, user-friendliness, cost effectiveness etc.).

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SECTION 6 Please advise any matter that may be deemed significant when adjudicating your application should it come to light later.

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SECTION 7	Do you realise that it is a requirement for organisations seeking GBAR accreditation that they should be set up for, and implement a management system, in recognition of ISO 17025?	Confirm
SECTION 8	Do you have a documented management system for ISO 17025 now? If not, when will it be ready?	Confirm
SECTION 9	Do you have a documented quality management system?	Confirm
SECTION 10	Is it in accordance with ISO 9001 (2015)?	Confirm



SECTION 11	If the management system is not available now, when will it be ready?	
SECTION 12	How long have you been operating as a test house or a laboratory?	
SECTION 13	Do you have proof of your status as a legal entity? This should be provided with this application form.	Confirm
SECTION 14	Do you operate at sites other than the main address given in Section 1? If yes, please give details below.	Confirm
OTHER SITES		
SECTION 15	Where did you learn about GBAR?	
SECTION 16	Have you worked with any other GBAR accredited organisation before? If yes, please state their name.	

SECTION 17	Do you realise that in order to be accredited there will need to be:	
(i)	An extensive document review and examination of evidence which is only begun following receipt of the initial Administration Fee	Confirm
(ii)	A visit by an GBAR officer(s) to your premises to verify the substance of documents and your arrangements as a test house or a laboratory	Confirm
(iii)	Witness of your test and calibration activities	Confirm
(iv)	Continuing levels of surveillance by GBAR	Confirm
(v)	Travel and accommodation at your expense and paid for in advance of the activity	Confirm
(vi)	An agreement for continuing payments to GBAR based upon a Memorandum of Understanding and a Contract?	Confirm

SECTION 18	Please confirm your understanding, agreement to the above statements and declaration that the information on this application form is correct to the best of your knowledge.	
	Signature:	
	Date:	
	Print name:	
	Position in the organisation (job title):	



SECTION 19 State each type of service and applicable standards offered on a separate line. Attach a copy of the standards if they are unlikely to be recognised at a national level.

TEST OR CALIBRATION FUNCTION	APPLICABLE STANDARD	DESCRIPTION OF ACTIVITIES	RELEVANT PROCEDURE

Use continuation sheets if necessary

SECTION 20 Please describe the environmental controls exercised within your organisation. (Attach appropriate or sample procedure if more convenient.)

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SECTION 21 Please describe the traceability arrangements to national or international standards. (Attach appropriate or sample procedure if more convenient.)

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SECTION 22 Please describe the methods to determine levels of uncertainty of measurements. (Attach appropriate or sample procedure if more convenient.)

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SECTION 23 Please give a brief and concise résumé of your organisation. Please provide a



description of your organisation's mission and target market sectors and any other information that you may feel would be helpful to GBAR in adjudicating your application. Indicate how long you have been trading. If you are a start-up, indicate previous experience or attach a CV.

Date trading started:

Turnover last year:

Turnover this current year:

Number of tests last year:

Number of tests this year:

Typical value per test:

Other accreditations that are held:

Memberships of trade and professional bodies:

Other information about your organisation:

SECTION 24 - CHECKLIST

1	Have you signed the confirmation in Section 18?	☐
2	Have you provided proof of legal identity?	☐
3	Have you read, understood and accepted the Terms & Conditions and Operation Conditions for Test Houses and Laboratories GBAR(G)53?	☐
4	Have you read, understood and accepted the General Accreditation Terms & Conditions, GBAR(G)02 and are you familiar with the appropriate accreditation standard?	☐
5	Have you attached a list of test and calibration equipment	☐
6	Have you retained a copy of all pages of this form?	☐
7	Have you sent CVs for each of the persons named?	☐
8	Have you completed all sections in the above form inserting N/A (Not applicable), if appropriate?	☐
9	You have read, understood and accepted document GBAR(G)32 regarding our authority and acknowledge that GBAR accreditation services are independent from government?	☐
10	Do you understand that a contract agreement will be necessary before you are awarded any level of accreditation? A sample contract is available upon request.	☐

Signed:

Date:



A quotation will be sent following review of the above.

Receipts/invoices will be sent upon request

**THIS FORM WILL BE RETURNED IF ALL SECTIONS ARE NOT
APPROPRIATELY COMPLETED**

**Any section not applicable should be struck through and
initialled**

**REFER TO GUIDE 51 FOR INFORMATION ON BECOMING
ACCREDITED**

PLEASE SCAN AND EMAIL THIS FORM TO:

admin@gbar-ab.org

OR SEND A COPY BY POST TO:

**GBAR 1015 Main Street P.O. Box 156 West Barnstable, MA
02668-9998, United States,**

URL: <http://www.gbar-ab.org>