ISO Certification Process

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Vol. Issue 03

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Table of Contents

Section	Title	Page No
A	Company Profile	03
1.0	Introduction	04
2.0	Application for Certification	04
3.0	Application Review	05
4.0	Accept / Decline Application	06
5.0	Submission of Proposal & Certification Agreement	06
6.0	Criteria for certification	07
7.0	Assessment	07
7.1	Audit Program	07
7.2	Appointment of the Assessment Team	08
7.3	Preparing the Audit Plan	08
7.4	Initial Certification Audit & Methodology	08
7.5	Surveillance Assessment	13
7.6	Follow-up Audit	14
7.7	Reassessment audit	14
7.8	Special Audit	15
7.9	Short-notice audit	16
7.10	Transfer Audit	17
8.0	Conditions for Certification	18
8.1	Granting of Certification	18
8.2	Maintaining Certification	19
8.3	Conditions for Suspension of Certification	20
8.4	Conditions for Withdrawal of Certification	21
8.5	Conditions for Extending and reducing the scope of Cert	22
8.6	Conditions for Cancellation of Certification	23
9.0	Appeals, Complaints & Disputes	23
10.0	Rules Governing use of Certificate and Logo	27
11.0	Disclaimer	32
12.0	Process-flow for third party audit and certification process	33

A. QRC Profile

Overview of the Company:

QRC – As the forerunners in Cyber Security Space, we support our customers to gain confidence on their compliances w.r.t Data Security and Privacy frameworks to protect their sensitive data from all Internal / External Threats and manage the confidentiality, Integrity, availability, Security, Privacy of such information systematically.

Established in 05TH Jan 2016 by Mr. Vamsi Krishna Maramganti, within 5 Years, QRC has made deep inroads into the Payment Card Industry Certifications globally by delivering 100% Quality Services and Integrated solutions in the Data Security & Privacy domain.

All information is published on the website of QRC Assurance and Solutions (www.qrcsolutionz.com).

QRC with proven assessment methodologies, support customers to protect their Data Security and Privacy by provisioning

- Compliance Services
- Security Testing Services
- Assessment / Certification Service

QRC Work Force:

The QRC team comprises adequate number of qualified professionals, with Industry Certifications like CISA, PCI QSA, CEH, ISO/IEC 27001, ISO/IEC 27701, AIMS, QMS, BCMS, CCNA, COBIT, PMP etc., QRC team is known Industry-wide for its skills, expertise. The key officials engaged in overall operations include Executive Partners, Team Leaders, Strategic Business Partners from various domestic and international levels. QRC has Independent Advisory Committee & Impartiality committee members, who at all times guide QRC leadership team in the right direction to achieve exceptional results.

1.0 Introduction

This document defines the procedure that has to be followed by applicant organizations seeking Certification based on the requirements of relevant management system standards. QRC, on request, will provide any specific information required by the applicant organization.

The other applicable procedures and information that are mandatory for the new applicant like Certification scheme, Appeals and dispute procedure etc., are provided along with the application pack.

2.0 Application for Certification

2.1 QRC is providing certification services to organizations established as legal entities within India and other countries. It is expected that the organizations applying for certification would be registered entities as per applicable laws within their country.

Any exception regarding legal status would be made only a specific decision of the QRC keeping in view the legal provisions in the economy in which the organization is established as a legal entity.

2.2 Organizations interested to get certification from QRC for their management system can send a request to the QRC. On receipt of the request QRC, will forward the application package to the applicant.

2.3 The application package includes the latest copies of the following documents:

1. Certification Process Document.
2. Client Information Form.
3. Any other information needed will be sent as Enclosures.

2.4 Any additional explanation needed by the applicant will be provided on receipt of a specific request for the same, including necessary explanations on the specific schemes and scope of accreditation.

2.5 Before applying for certification, the applicant organization must have met the following conditions:

- Implement the management systems for at least 3 months**.** This is necessary to assess the ability of the organization to carry out the process as per the documented management system.

- Carried out minimum one internal audit against the applicable criteria of certification, one management review for the documented management system prepared as per relevant management system.

2.6 The completed Client information form for certification has to be duly signed by the authorized representative/s of the applicant organization seeking certification and forwarded to the QRC along with necessary documents. QRC reserves the right to seek information on the concerned personnel before deciding to accept the application for further processing. Normally the receipt of the application would be communicated within 5 working days of receipt.

QRC requires that a client fills in client information form for various management systems or provides the similar information through tenders, signed by an authorized representative of the Organization.

QRC would require that the following information is reported in the client information form or enclosed with the application form or sent subsequently prior to onsite audit:

- General features of the applicant such as corporate entity, name, addresses, legal status and where relevant, human and technical resources.
- General information concerning implemented management system and the activities covered and seeking the scope for certification (Sometimes this may need revision)
- Description of the systems (products/processes/services) to be certified and the standards or other normative documents applicable to each.
- Copy of the systems manual and where required the associated documentation.

The information gathered from the application is used for the preparation of on-site assessment, where required and is treated with appropriate confidentiality. This information enables evaluation of the nature of the Organization's business and the activities that support it.

3.0 Application Review

Before proceeding with the audit, QRC will conduct a review of the application (or) tender and supplementary information for certification to ensure that:

a) The information about the applicant organization and its management system is sufficient for the conduct of the audit;

b) The requirements for certification are clearly defined and documented, and have been provided to the applicant organization;

c) Any known difference in understanding between the QRC and the applicant organization is resolved; and communicated to the organization.

d) QRC has the competence and ability to perform the certification activity with respect to the scope of certification sought, the location(s) of the applicant organization's operations, time required to complete audits and any other points influencing the certification activity are taken into account (language, safety conditions, threats to impartiality, etc.);

e) Records of the justification for the decision to undertake the audit are maintained.

4.0 Accept / Decline Application

Following the application review of the application, QRC will either accept or decline an application for certification. Adverse decision of the QRC would be communicated with reasons for rejecting the application.

5.0 Submission of Proposal & Certification Agreement

Based on this information Support staff of Business development will prepare a proposal and send to the applicant organization along with Certification Agreement where QRC specified the requirements for the certification.

In case of tenders, upon receiving the Letter of Acceptance from the client, the entire information is reviewed, and additional information is sought for exact estimation of man-days and competence.

Further processing of application shall be taken up on receipt of acceptance of the proposal and confirmation that the "Certification agreement" is acceptable. Upon acceptance of QRC proposal the applicant organization needs to submit the 'Certification agreement "duly signed.

Upon receipt of 'Certification Agreement', QRC will provide portal access to the applicant organization. Necessary information like username and passwords will be communicated to the concerned persons of the applicant organization.

Client needs to upload their relevant management system documents in the portal for review by QRC auditors before stage 1 audit to provide a better focus on the scope of the audit. The adequacy of the management system documentation with respect to implementation is reviewed during the offsite assessment and if found deficient appropriate comments are communicated to the auditee through Stage I report. (Optional)

Any organization that is registered as a legal entity in India / other nations shall be eligible for applying for the certification. However, locations outside the India would be included in the certification process depending on the nature of activities carried out in those locations.

6.0 Criteria for certification

QRC shall adopt and document the Certification criteria for organization based on relevant management system standard. Ex: ISO/IEC 27001 and ISO/IEC 27701 etc.,

6.1 Communication of changes to the Criteria

6.1.1 Any change in the criteria shall be notified to the certified organization by registered (AD) post / email other means, and a suitable time frame shall be given for implementing the modified criteria. Any transition policy announced by the accreditation body would be adopted by the QRC and Communicated to the certified clients. The certified organization shall communicate their objection, if any, acceptance in writing by registered post / email other means 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 certified organization is not willing to adopt the changed criteria.

6.1.2 The implementation of the changed criteria shall be verified during the surveillance assessment of each client. In the event of any major change in the criteria, the QRC reserves the right to carry out an additional assessment.

6.1.3 In the event that a certified organization is not willing to adopt the changed criteria, it is allowed to opt out of the certification and the certificate is withdrawn with effect from the date of the implementation of revised criteria.

7.0 Assessment

7.1 Audit program

a. QRC prepares a tentative audit program for the organization for next three years immediately after the application review. Which includes initial two stage audits, surveillance audit and renewal audit date prior to expiration of the certificate.

b. During any stage of the certification cycle this program may change due to the changes in the organization. It is the responsibility of the certified organization to inform QRC about any changes related to

a) the legal, commercial, organizational status or ownership,
b) organization and management (e.g. key managerial, decision-making or technical staff), collaborations and mergers,
c) contact address and sites, size of the organization,
d) scope of operations under the certified management system, and major changes to the management system and processes.

During the stage 1 audit, Team Leader confirms this audit program. He can make amendments in the audit program and the same will submit to QRC.

7.2 Appointment of the Assessment Team

7.2.1 The assessment team, consisting of a Team Leader and the members, is identified by the QRC from the pool of assessors and experts as per their availability.

7.2.2 The names of the members of the audit team, along with their profile and details of any current affiliations, shall be communicated to the organization along with the audit schedule giving them a time of two working days to raise any objection against the appointment of any of the team members. Any objection by the organization against any of the team members must be accompanied in writing with adequate grounds for the objection. QRC will evaluate the objection and decide whether to change the team member or to overrule the objection raised by the organization.

7.2.3 Efforts are made to ensure that the team is kept intact throughout the assessment process. If there is any change in the composition of the team members, the same shall be communicated to the certification body for their acceptance.

7.2.4 The team members are required to maintain confidentiality of the sensitive information about the operation of the applicant organization obtained as part of the assessment process.

7.3 Preparing the audit plan

7.3.1 Based on the draft audit program detailed audit schedule for each audit appropriate to the objectives and scope of the audit will be prepared by Team Leader / any competent person in that relevant management system in concurrence team leader before 7 working days and communicated to client organization for their acceptance.

7.3.2 While preparing this schedule, the team leader will take care of the individual persons knowledge and skills, experience in the related sector specific requirements.

Note: QRC will consider this audit team approved by the client, unless otherwise notified within 2 working days.

7.4 Initial Certification Audit

The certification audit is carried out in 2 stages:

a) Stage I
b) Stage II

QRC Methodology of Audit:

1. Interviews with the Personnel
2. Document reviews
3. Observation of the process, actions
4. Observe the system settings, configurations
5. Sampling

Wherever above said methods applicable.

7.4.1 Stage I Audit:

The following activities shall be performed during the Stage I audit:

a) to audit the client's management system documentation;

b) to evaluate the client's location and site-specific conditions and to undertake discussions with the client's personnel to determine the preparedness for the stage 2 audit;

c) to review the client's status and understanding regarding requirements of the standard, in particular with respect to the identification of key performance or significant aspects, processes, objectives and operation of the management system;

d) to collect necessary information regarding the scope of the management system, processes and location(s) of the client, and related statutory and regulatory

1)	**Can proceed for Stage-2 Audit**
2)	Can Proceed for Stage-2 Audit after complying with all the deficiencies identified during this Audit
3)	Follow-up Audit

aspects and compliance (e.g. quality, environmental, legal aspects of the client's operation, associated risks, etc.);

e) to review the allocation of resources for stage 2 audit and agree with the client on the details of the stage 2 audit;

f) to provide a focus for planning the stage 2 audit by gaining a sufficient understanding of the client's management system and site operations in the context of possible significant aspects;

g) to evaluate if the internal audits and management review are being planned and performed, and that the level of implementation of the management system substantiates that the client is ready for the stage 2 most.

QRC conducts the stage 1 audit at the client's premises in order to achieve the objectives stated above.

Stage 1 audit findings will be documented and communicated to the client in the form of Audit Report by the Team Leader. The same shall be submitted for technical review within 5 working days.

At the end of stage I audit, recommendation may be any one of the following depending upon the findings during the audit:

Adequate consideration shall be given to the time required by the client to resolve the areas of concern identified and accordingly Stage II audit shall be planned. The Stage II audit shall preferably be completed within 90 days from the Stage I audit so that the findings of Stage I audit still remain valid. QRC seek confirmation along with the action taken report from the client related to actions initiated to resolve the areas of concerns raised during the stage 1 within 90 days. Upon receipt of confirmation and acceptance only stage II audit will be initiated. If the documentation is determined to be meeting the certification criteria, after review of the changes made, QRC may seek evidence of implementation of changes to the system by the applicant organization.

If the organization is not able to conduct stage II audit within 90 days, it will lead to re conduct of stage 1 audit. QRC can take the decision on conducting fresh stage 1 audit with due consideration given to needs of the client to resolve the issues. Scheme Manager has the authority to extend the time interval between Stage 1 & Stage 2 audit on a case-to-case basis, however the maximum gap shall not exceed 180 days.

7.4.2 Stage II Audit:

Stage II audit shall cover all relevant functions / processes and clauses of the relevant management system. The audit is to be carried out on sampling basis. The audit team shall ensure that the sampling is relevant and adequate to represent the true picture of the status of Management System.

The purpose of the stage 2 audit is to evaluate the implementation, including effectiveness, of the client's management system. The stage 2 audit will take place at the site(s) of the client. It will include at least the following:

a) Information and evidence about conformity to all requirements of the applicable management system standard or other normative document;

b) performance monitoring, measuring, reporting and reviewing against key performance objectives and targets (consistent with the expectations in the applicable management system standard or other normative document);

c) the client's management system and performance as regards legal compliance;

d) operational control of the client's processes;

e) internal auditing and management review;

f) management responsibility for the client's policies;

g) links between the normative requirements, policy, performance objectives and targets (consistent with the expectations in the applicable management system standard or other normative document), any applicable legal requirements, responsibilities, competence of personnel, operations, procedures, performance data and internal audit findings and conclusions.

During the assessment or on demand at any time, the organization shall provide unrestricted access to the documents that pertain to the certification process and the scope applied for. Access shall also be provided to the records of the customer complaints, along with corrective action and the method of verifying the effectiveness of the corrective actions.

If the Team Leader finds that audit cannot be completed in the given time, he may extend the time to complete the audit to cover all relevant functions & processes.

The audit team analyzes all information and collected objective evidence through auditor notes during the audit to review the audit findings and agree on the audit conclusions.

The outcome of a certification audit or renewal audit is decided based on the audit findings including nature of non-conformities noted during the audit.

There are four possible outcomes from the Certification/Renewal audits:

Recommendation for certification

a. Recommendation for certification subject to closure of the non-conformities.

b. Limited re-audit or follow-up visit at a later date based on the findings.

c. No recommendation for certification, which usually means that a complete re-audit is necessary.

For (b) and (c) above, additional fee and expenses will be charged.

Note: The certificate cannot be recommended in case of any unresolved non-conformities identified during the audit.

Note: In situations where Management System does not reflect the scope intended by the auditee to be covered in the certificate of registration, the Team Leader is required to resolve it by discussing with the auditee and the H.O. as necessary. The Team Leader shall carefully discuss the exact scope of the certification with the auditee before commencing the audit. This scope will be further scrutinized at the H.O. H.O. may amend the same in consultation with the auditee and the Team Leader. The auditee is advised about this procedure at the closing meeting.

In case the Management System is found not complying with the relevant standard at the end of the audit then the Team Leader shall recommend a follow-up visit (partial assessment) or full re-audit depending upon the degree of noncompliance (Major).

If major NCs are identified during the certification/Renewal/Surveillance audit, then a follow up audit or Re-audit shall be recommended.

Timelines for NC Submission and closure		
	Major NC	**Minor NC**
Submission of Corrective Action plan	30 days	60 days
Acceptance of CAP by QRC	15 days	15 days
Closure Verification	Based on the Onsite Visit within 60 days from the date of NC	Based on the Documented evidences
		Based on the Onsite Visit – Decided based on the Nature and number of NC's
Effectiveness of the Corrective Actions	Subsequent visit	Subsequent visit
NC during Recertification	Before Certificate expiry date	
Extension of NC period	30 Days with special approval	

Non-conformities shall be categorized by the auditors into **Major and Minor**.

Non-conformity is considered to be Major:

When an applicable requirement of the relevant standard criterion is violated or deficient to such an extent that it can be reasonably concluded as absence of, or failure to implement and maintain the requirement concerned.

Non-conformity will be categorized as Minor:

Based on the objective evidence if it is found that there is only a lapse identified in a stray case and has not actually lead to a system breakdown. However, the situation does require identification and implementation of an appropriate action by the organization, to ensure that there is no continued or further non-conformance in respect of the requirement concerned.

A significant number of minor non-conformities in any one area of the requirements would normally constitute a major non-conformity.

A closing meeting shall be held on completion of audit and Audit conclusions communicated to the auditee along with the NC's reported, if any. Team Leader takes the approval on the NC reports at the time of closing the audit. Team Leader will prepare formal audit Report and submitted to client for their acceptance within 5 working days.

7.4.3 Certification Decision

Team Leader submits audit report along with the supporting auditor notes, necessary documents to HO for Technical Review. Decision makers will make the certification decision on the basis of an evaluation of the audit findings and conclusions and any other relevant information specified in the audit report and other submitted information. The decision makers are in its capacity shall have the right to ask for any further clarifications on the report and information submitted on the applicant's process and the applicant shall not refuse to present such information.

7.4.4 Certificate of Compliance

The Decision makers shall decide to grant certificate of compliance to the applicant organization, only after the applicant organization has met all the conditions specified by the QRC. Two copies of the Certificate of Compliance originals issued to the applicant organization along with covering letter specifies the time schedule for surveillance audit and artwork of the logo's.

The certificate shall include the QRC logo, Accreditation body logo (if Applicable) the name of the certified organization, address of the premises of the organization, certificate number, the scope of certification , Approval date of the certification, issue date of the certificate and the date of expiry of the certificate.

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

7.4.5 Surveillance Activity

QRC ensures that the surveillance activities include regular monitoring of the certified client's management system to ensure compliance with the applicable ISO/IEC standards.

QRC implements a range of activities, beyond just the routine surveillance audits, to meet the requirements of Clause 9.6.2.1.2 of ISO/IEC 17021-1:2015. These activities are taken up to be adapted to reflect the specific risks and impacts related to the client's operations. In addition to on-site audits, other surveillance activities includes any of the following:

- Enquiries to the certified client regarding aspects of certification.
- Reviewing certified client communications, such as promotional materials, websites, and other statements about their operations.
- Requests for documented information from the client (either paper or electronic).
- Monitoring performance through other means as necessary.
- Any other method to review the client's management system performance during the surveillance year.

7.5 Surveillance Assessment

QRC mandates that all certified companies undergo at least two surveillance audits during the certification's period of validity, with the first surveillance audit conducted no later than 12 months from the date of the certification decision. Subsequent surveillance audits are planned annually based on the planning-relevant date and must be conducted at least once per calendar year. However, the certification renewal due date for the Surveillance 1 audit & Surveillance 2 audit will be calculated on the basis certification decision made date.

The 1st surveillance audit will be carried out within 12 months from the last date of the Certification Decision date. The purpose is to verify that the approved management system continues to be implemented to consider the implication of changes in the Organization's operation and to reconfirm continued compliance to the applicable standard and other normative documents.

Surveillance audits are conducted at client premises only, but are not necessarily full system audits, so that QRC can maintain confidence that the certified management system continues to fulfill requirements between recertification audits. The surveillance audit programme will include, at least -

a) internal audits and management review,
b) a review of actions taken on non consuspesion formities identified during the previous audit,
c) treatment of complaints,
d) effectiveness of the management system with regard to achieving the certified client's objectives,
e) progress of planned activities aimed at continual improvement,
f) continuing operational control,

g) review of any changes related to System, Process, Documentation
h) use of marks and/or any other reference to certification.
i) Statutory and regulatory compliance
j) Customer satisfaction

However, the audit findings may lead to requirement of additional verification of certain functions/activities other than those included in the original audit plan. Nature and extent of non-conformities found may result in identifying the necessity of

A complete or limited re-assessment,
A follow-up by a re-visit to verify the effectiveness of agreed actions, or
A follow-up by verification of documentary evidence to be submitted to QRC. In this case, a follow-up visit may not be necessary.

In some cases, QRC may require verification of effectiveness at the next regular audit.

7.6 Follow-up Audit

During the certification audit or surveillance audit if the Team Leader considers that the management system is not complying with the relevant standard then he may recommend a follow-up audit at an agreed time with the auditee to verify the resolving of NCs and other recommendations if any.

During the follow-up audit, the auditor shall audit the relevant part of Management System as recommended in the original audit report of certification or surveillance. Upon satisfactory compliance with the recommendations he may recommend granting of the certificate of registration or continuation of certificate of registration as the case may be.

7.7 Reassessment / Renewal audit

Within three months prior to completion of the certification validity term, the certified organizations shall be informed about the reassessment process and the relevant application format shall be forwarded to them.

The purpose of reassessment is to verify overall continuing effectiveness of the Organization's management system in entirety. Reassessment is carried out once in three years. The methodology is same as that of initial audit stage 2. Only in situations where the Management System has not been maintained or repeated breakdown in the system are reported or there are a number of changes in processes or product categories, the Renewal audit shall be carried out in 2 stages (like Initial Audit).

Confirmation is sought from the client regarding any change in the organization structure, nature of activities/product/processes and scope during recertification stage. Also, the previous Surveillance Audit reports are referred before scheduling the renewal audit.

Reassessment provides for a review of past performance of the system over the period of certification. Reassessment consists of a review of system documentation and a site audit to ensure:

a) the effectiveness of the management system in its entirety in the light of internal and external changes and its continued relevance and applicability to the scope of certification;

b) demonstrated commitment to maintain the effectiveness and improvement of the management system in order to enhance overall performance;

c) whether the operation of the certified management system contributes to the achievement of the organization's policy and objectives

d) any other specific needs

Recertification audit activities may need to have a stage 1 audit in situations where there have been significant changes to the management system, the client, or the context in which the management system is operating (e.g. changes to legislation). Contract review personal will decide the need of Stage 1.

In the case of multiple sites or certification to multiple management system standards being provided by the QRC, the planning for the audit will ensure adequate on-site audit coverage to provide confidence in the certification.

Adequate man-days will be utilized for every management system as per Application review document in the case of Integrated audits.

In case early renewal audits are carried out for realignment of different management systems to a single date or to upgrade the system in case of version change, the validity of all the affected management system certificates shall remain for 3 years from the date of approval of the certificate, which is closest to expiration.

The decision on renewing certification shall be based on the results of the recertification audit as well as the results of the review of the system over the earlier period of certification. The complaints received from the users of the certification are also taken into consideration.

The entire process of reassessment including; Application, Application review, proposal submission and certification agreement acceptance, audit plan, selection of team, scheduling of the audit, conduct of audit, report scrutiny and approval by decision makers at QRC shall be completed before the expiry of the original certificate.

If the decision by the decision makers at HO is to continue the certification, a fresh set of Certification documents shall be issued to the organization. Decision making shall be completed prior to the expiry of certificate.

7.8 Special Audits:

Special audits shall be carried out under following circumstances:

1. Modifications to the existing scope of Management System:

a) Modification of scope shall include addition or deletion of activities and are applicable to the following changes in the organization.
b) If there is a merger or an acquisition by the client organization
c) Addition or deletion of activities
d) If there is a request by the client organization

In all of the above cases the QRC review the application for the change and determine the need for carrying out an on-site audit. There is a possibility that the client provides adequate information about the requested change through documentary evidence, which after thorough verification can be considered appropriate for granting the modified scope. In this case the verification of the same shall be done in conjunction with a surveillance audit.

7.9 Short-notice audits

QRC reserves the right to conduct short notice audits under the following situations:

a) Complaints from the customers of the client organization or interested parties
b) Adverse media reports
c) Company has filed for bankruptcy or has been delisted.
d) Change in the Management
e) Change in the location of activities
f) Scope of operations under the certified management system
g) Major changes to the management system and processes
h) Follow up on suspended clients

QRC informs the client in advance about its decision to perform short notice audits based on the any of the above reasons. QRC shall ensure that the team is competent and acceptable to the client since the client may not be in a position to object due to time constraint.

QRC shall ensure that the client is compliant with the requirements of the relevant Management System before recommending continuation of certification.

As a part of agreement, certified organization undertakes to inform QRC within 15 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) Premises

d) Personnel, equipment, facilities, working environment or other resources, where significant.

g) Addition of any new branches / sub-contractors, foreign locations where clients are located / operations related to scope given.

7.10 Transfer audits

QRC also considers the request from the organizations seeking transfer of accredited management system certification issued by another certification body to QRC during the period of the certificate validity.

Whenever QRC receives such requests, business development person will obtain following information from the client:

a) Obtain complete Client Information
b) Obtain existing valid certificate
c) Obtain reason for seeking transfer (telephone conversation, a letter, fax, email – documented)
d) Obtain previous CB audit report and closed non-conformities
e) Obtain quality manual and procedures

The above information forwarded to application reviewer for their approval along with the necessary documents.

The following aspects are verified during the application review and findings are recorded in the Transfer of Certificate review form:

a. Verification whether the other CB is covered by an EA , PAC , IAAC or IAF MLA signatory only otherwise limitations are applied depending on the affiliation. Organizations that are holding certifications that are not covered by such accreditations; these are considered as new clients.

a.1 Scope requested by the Organization fall within the scope of QRC

a.2 reasons for seeking the transfer

a.3 validity of certificate in terms of authenticity, scope of activities of management system in respect of site(s) seeking transfer. If practicable QRC shall verify the status of certification and any outstanding non conformities with the loosing CB

a.4 a consideration of last assessment / reassessment reports, surveillance reports, outstanding NCs if any and any related documentation / records as desired by the auditor carrying out verification

a.5 reviews of complaints and actions taken

a.6 stage in current certification cycle

a.7 legal compliance

a.8 Confirming that there are no negative trends

b. The objective is to ensure maintenance of integrity of relevant management systems, if it is transferred to QRC. QRC may decide on any additional requirements if required and ensures that the Organization is unduly constrained.

c. A pretransfer review by an appointed competent person from QRC will comprise of documentation review and a visit to the Organization, if possible. In such cases he won't limit his coverage to documentation. Audit shall be done in all transfer cases for at least 1 man-day to cover mandatory areas like Internal Audits, Management Review, Correction, Corrective and Preventive actions, Customer complaints, Legal compliance etc.

d. Transfer should normally be only of a current valid certificate but in case the certificate is already expired, surveillance is overdue, or the CB ceased operation / accreditation is suspended or withdrawn then the client shall be treated as a new client wherein the certification shall be granted only upon successful decision making after completion of audit.

QRC ensures that-

- Certificates which are known to have been suspended or to be under threat of suspension are not accepted;

- Any outstanding NCs are acted upon and closed by the loosing CB if practicable. CEO may decide and authorize verification and closure of the outstanding NCs for any specific reason

- No further outstanding or potential problems are there as reported by the verifying auditor; CEO will follow the established procedure for granting the certificate with transfer date being the date on which review is complete.

- When in doubt, CEO may decide of process of undertaking certification, which may include assessment as new client or reassessment fully or partially. The Organization is communicated accordingly of the decisions taken & the actions being taken to process certification.

8.0 Conditions for Certification

8.1 Granting of Certification

8.1.1 The certification is granted to an applicant on completion of assessment as per the provision of Clause 7 of this procedure and after the following conditions has been met by the applicant organization

8.1.2 The applicant meets the criteria of certification and all non-conformities found against the criteria of certification during assessment have been closed to the satisfaction of the QRC in accordance with the guidelines on the subject

8.1.3 There are no adverse reports / information / complaints with the QRC about the applicant regarding the quality and effectiveness of implementation of certification system as per the criteria of the QRC.

8.1.4 The customers of the applicant organization are satisfied by the product or services offered by the organization and its certification system. QRC may request feedback from selected customers of the certified organization and seek feedback from stakeholders.

8.1.5 The applicant organization has paid all the outstanding dues.

8.1.6 The Initial certification shall be for a period of 3 years. Subsequent renewals are for a period of 3 years subject to satisfactory operation and maintenance of Management systems.

8.1.7 In the event of any adverse issue arising from the reasons specified at points 8.1.3) and 8.1.4), the applicant organization will be given an opportunity to explain its position in writing to the QRC. The final decision shall be taken in respect of granting of certification / permission to continue the certification on the basis of facts and the results of such presentation by CEO.

8.2 Maintaining certification

8.2.1 The certified organization shall comply with the following, individually or severally. Under these conditions the certification given to the organization shall be maintained for three years.

8.2.1.1 The certified organization continues to meet the criteria of certification and all nonconformities found against the criteria of certification during surveillance assessment have been closed to the satisfaction of the QRC as per laid down criteria.

8.2.1.2 There are no adverse reports / information / complaint with the QRC about the organization regarding the implementation of system as per the criteria laid down by the QRC.

8.2.1.3 The customers of the organization are satisfied by the product or services of the certified organization.

8.2.1.4 The organization has paid all the outstanding dues.

8.2.2 In the event of any adverse issue arising from the reasons specified at points 8.2.1.2) and 8.2.1.3) of 8.2.1, the certified organization shall be given an opportunity to explain its position in writing to the QRC. The final decision shall be taken in respect of maintenance of the certification of approval on the basis facts and the results of such presentation by CEO.

8.3 Conditions for Suspension of Certification:

8.3.1 The Certificate of Registration is suspended for a specified period based on the following conditions:

8.3.1.1 Organization does not allow surveillance or recertification audits within the specified time frame;

8.3.1.2 Organization did not complete, correction/corrective actions within agreed time scale;

8.3.1.3 Organization requests for suspension

8.3.1.4 The certificate or logo of QRC is intentionally misused in any way. (the logo of QRC and the accreditation body cannot be used on test reports / certificates);

8.3.1.5 Organization makes incorrect references to the certification status;

8.3.1.6 Organization fails to conform with the agreed standard consistently;

8.3.1.7 Organization fails to comply with the financial requirements of the agreement of certification;

8.3.1.8 Organization undertakes actions which bring QRC into disrepute.

8.3.1.9 Any willful mis-declaration in the application form

8.3.1.10 Willful non-compliance to the terms and conditions specified in agreement.

8.3.1.11 Excessive and or serious complaints against organization from interested parties.

8.3.1.12 Any other condition deemed appropriate by the QRC.

8.3.2 In such cases, a formal communication will be made to the Organization in which QRC specify the citing intention to suspend the certificate and ask for remedial measures within a period of 15 days.

8.3.3 The certified organization shall be given an opportunity to explain its position in writing to the QRC. The final decision shall be taken in respect of suspension of the certificate of registration on the basis facts and the results of such presentation by CEO.

8.3.4 If the above action does not result in any improvement, a registered (or equivalent) letter will be issued to the Organization indicating the conditions under which suspension has been effected and also informs about the consequences of the

suspension like incase of suspension period client refrains from future promotion of the certification. The information on the certified status of the client will be made publicly accessible through QRC website. If required, any other mode of publication may also be considered.

8.3.5 The Organization shall be responsible for taking prompt corrective action and inform QRC accordingly within the stipulated time, subsequent to which an audit or a visit may be planned to verify the requirements.

8.3.6 If delay is persisting, in taking corrective actions even after persuasion, Head – ISO Group makes a decision for recall of certificates and logo as applicable in the case of withdrawal.

8.3.7 On fulfillment of indicated conditions within the stipulated time, QRC may remove the suspension and notify the Organization accordingly. Otherwise, the certification will be liable for withdrawal or cancellation.

8.3.8 The maximum period of suspension is six months unless for any specific reason extended by Head – ISO Group, after which conditions for withdrawal apply.

8.3.9 Extension of suspension period may be granted under situations wherein the client or QRC has sufficient reasons to justify the suspension period. Under no situations will the extension of suspension period exceed by 3 months.

8.4 Conditions for Withdrawal of Certification:

8.4.1 The Organization's certification will be withdrawn, and agreements cancelled in the following cases:

8.4.2 When the conditions referred to in **"Condition for Suspension of Certification"** para above exist and the Organization fails to take corrective actions under intimation to QRC.

8.4.4 If the certification criteria is changed and the Organization either will not or cannot ensure conformance to the new requirements within the stipulated time.

8.4.5 In such cases, a formal communication will be made to the Organization in which QRC specify the citing intention to withdraw the certification and ask for respond within a period of 15 days.

8.4.6 The certified organization shall be given an opportunity to explain its position in writing to the QRC. The final decision shall be taken in respect of withdrawn of the certificate of registration on the basis facts and the results of such presentation by CEO.

8.4.7 This will be exercised by informing the Organization by a registered (or equivalent) letter followed by any other publication notifying the cancellation if required. This information will be made publicly accessible through QRC website.

8.4.8 An Organization may dispute or appeal or complain against the decision of QRC which will be dealt with as specified in procedure.

8.4.9 Once the Certificate of registration is withdrawn and if the Organization wishes to get the certification redone, QRC would carry out a complete re-audit.

8.4.10 When withdrawal is finalized the following actions are taken.

8.4.11 The Organization will be advised by communication in writing (Letter, e-mail fax etc.) to return the Certificates along with logo issued to them or give a confirmation that the certificates or logo issued are either made obsolete / withdrawn or prevented from any misuse.

8.4.12 It will be suitably denoted or amendment made in the "List Of withdrawn Companies " published by QRC on website as decided by Scheme Manager.

If an Organization makes a false claim as to certification by QRC, appropriate action is taken against such Organization which may include corrective action, publication of transgression and if necessary, other legal action.

Head- ISO Group shall take all the decisions on Suspension, Extension of Suspensions and Withdrawals

Upon request by any party, QRC will correctly state the status of certification of a client's management system as being suspended, withdrawn, or reduced.

8.5 Conditions for Extending and reducing the scope of Certification:

The scope of certification can be extended or reduced on receipt of written request from the client under any or more of the following:

8.5.1 When products/services are added or deleted from the existing scope.

8.5.2 When the client increases or decreases the production capacity or range covered in the scope, with additional or less manpower or resources within the existing management system certified.

8.5.3 Change in number of sites. (Addition / Deletion etc.,)

8.5.4 QRC can reduce the scope if during an audit, the client organization is not able to demonstrate its capability to render the scope of activities as specified in the Certificate of Registration.

8.5.5 QRC has the option to verify during surveillance audits or for conducting a special audit on receipt of any information from the client. However, this situation will be informed to concerned persons who will resolve with the client and changes are made as per the above procedure.

8.6 Conditions for Cancellation of Certification:

8.6.1 The Organization's certification will be cancelled, and agreements cancelled in the following cases:

8.6.1.1 At the request of the Certified Organization.

8.6.2 This will be exercised by informing the Organization by a registered (or equivalent) letter followed by any other publication notifying the withdrawal if required. This information will be made publicly accessible through QRC website.

8.6.3 Once the Certificate of Registration is cancelled and if the Organization wishes to get the certification redone, QRC would carry out a complete re-audit.

8.6.4 When cancellation is finalized the following actions are taken.

8.6.4.1 The Organization will be advised by communication in writing (Letter, e-mail fax etc.) to return the Certificates along with logo issued to them or give a confirmation that the certificates or logo issued are either made obsolete / withdrawn or prevented from any misuse.

8.6.5 It will be suitably denoted, or amendment made in the “List Of certified Companies “published by QRC on website as decided by Scheme Manager

9.0 Appeals, Complaints & Disputes

It would be the endeavor of QRC to provide efficient and satisfactory services as detailed in the Request Form. However, in case it is felt that any decision or the conduct of QRC is unjust and prejudicial to any party that party can appeal to QRC and seek redressal. These appeals are to be sent to QRC in writing.

Appeals, complaints and disputes brought to the notice of QRC are promptly dealt with and remain confidential. Information about the client from sources other than the client is kept confidential. This procedure is applicable to decisions pertaining to certification including maintenance.

It is ensured that personnel are not employed to investigate any appeal, complaint or dispute if they have been directly involved in the activities towards the Organization or any other party involved in the appeal, complaint or dispute in question within the certification cycle.

It is ensured that submission, investigation and decision on appeals and complaints shall not result in any discriminatory actions against the appellant / complainant.

In situations where appeals or complaints cannot be resolved by Management Representative or the Scheme Manager, the same shall be referred to CEO further it shall be referred to Committee for Safeguarding Impartiality.

A summary of appeals / complaints received; actions taken/completed is forwarded to the Management Representative for presentation in the Management Review meeting. Actions as decided in the Management Review meeting are implemented for further effectiveness.

9.1 Appeals:

9.1.1 "Appeal" means "any request for review that is conveyed in writing, against a decision made by QRC taking into consideration the explanation provided by the client". This may be either during the course of audit at the client's premises or any work pertaining to QRC.

9.1.2 Appeals can be due to:

a) Refusal of an audit by QRC;
b) Non acceptance of scope of certification;
c) Decisions made on misuse, suspension, withdrawal, cancellation, extending and reducing the certification;
d) Failure to recommend certification by QRC;
e) Notification by any third party/interested party against the grant of certification by QRC.

9.1.3 Any appeal from client or interested parties seeking redressal when received is recorded and acknowledged by Scheme Manager. The appeal should contain all available documentary evidence. Scheme Manager will responsible for gathering and verifying all necessary information related to the complaints. Any such appeals referred to management are examined in fairness and reviewed by Scheme Manager and any other personnel as required either separately or jointly. The appellant may be asked to withdraw the appeal if found not relevant. Actions shall be initiated by Scheme Manager for resolving the appeals within a stipulated period of 3 months.

9.1.4 Resolution of Appeal shall be handled in the following manner:

An attempt is made by the team leader to resolve the issue at the audit site. If the appeal is not resolved, the matter is taken up to Scheme Manager. In case the Scheme Manager is unable to resolve the appeal, the same shall be referred, with all information (including documentary evidence) to the CEO. If appeal is not resolved, then the matter is taken up to Committee for Safeguarding Impartiality.

9.1.5 Scheme Manager tracks and maintains a record of all appeals along with remedial actions pertaining to the certification system and keeps the appellant updated about the progress and outcome.

9.1.6 Scheme Manager identifies problems requiring any actions to prevent recurrence of the above for corrective action (and preventive action if required) commensurate with the nature and risk involved. These include measures such as:

- Restoring conformity to the certification system process
- Assessing the effectiveness of remedial/corrective actions taken.

9.1.7 A formal notice of conclusion of the appeal handling process shall be provided to the appellant.

9.2 Complaints:

9.2.1 Normally complaints (dissatisfaction expressed by a person or by the Organization) are made to QRC. Any complaint received by QRC, whether it pertains to QRC functions or the certified Organization, would be treated in all seriousness and investigated. These complaints are recorded by Scheme Manager and the complainant would be informed of the receipt of complaint and advised on the investigation required within a reasonable time of 1 month. Actions are initiated by Scheme Manager for resolving & restoring conformity to Management System and for closing the complaint within three months from the date of receipt of complaint unless delayed for a specific reason. The results and actions taken/completed are informed accordingly to the concerned parties. Scheme Manager will responsible for gathering and verifying all necessary information related to the complaints.

9.2.2 For complaints received against certified Organizations, Scheme Manager may decide to:

a. Advise to visit / audit may be planned for ascertaining the actions taken and ensuring effectiveness of the certified management system.
b. Advise verification of actions taken during forth-coming surveillance audit.

9.2.3 Any such complaints referred to management are examined in fairness and reviewed by Scheme Manager and any other personnel as required either separately or jointly. The complainant may be asked to withdraw the complaint if found not relevant. A complaint after the date on which it has been received, is to be dealt with, within three months.

9.2.4 Resolution of Complaint shall be handled in the following manner:

a) An attempt is made by the team leader to resolve the issue at the audit site. If the appeal is not resolved, the matter is taken up to Scheme Manager, who analyses and initiates correction, corrective action / preventive action. In case the Scheme Manager is unable to resolve the Complaint, the same shall be referred, with all information (including documentary evidence) to the CEO. If appeal is not resolved, then the matter is taken up to Committee for Safeguarding Impartiality

9.2.5 Scheme Manager tracks and maintains a record of all complaints along with remedial actions pertaining to the certification system and keeps the complainant updated about the progress and outcome.

9.2.6 Scheme Manager identifies problems requiring any actions to prevent recurrence of the above for corrective action (and preventive action if required) commensurate with the nature and risk involved. These include measures such as:

a) notification to appropriate authorities as required by regulation
b) restoring conformity to certification system process
c) preventing recurrence;
d) evaluating and mitigating any adverse incidents (including hazards, safety & security) and their associated risks and impacts
e) ensuring satisfactory interaction with other components of the Management System
f) Assessing the effectiveness of remedial/corrective actions taken.

9.2.7 In case of complaints relevant to public interest, the certified organization and the complainant shall be consulted and if felt necessary information about the complaint and its resolution will be made available for public viewing.

9.2.8 A formal notice of conclusion of the complaints handling process shall be provided to the complainant.

9.3 Disputes:

9.3.1 Disputes here convey disagreement and are applicable to certification process decisions made during the course of audit including document adequacy.

9.3.2 The team leader is authorized to resolve the dispute and conclude the audit effectively.

9.3.3 The dispute if not resolved adequately by the team leader can be brought to the notice of Scheme Manager as an appeal. The Scheme Manager shall resolve the matter through the appeal handling process (as described in earlier sections)

9.3.4 Resolution of Complaint shall be handled in the following manner:

a) An attempt is made by the team leader to resolve the issue at the audit site. If the dispute is not resolved, the matter is taken up to Scheme Manager, who analyses and initiates correction, corrective action / preventive action. In case the Scheme Manager is unable to resolve the dispute, the same shall be referred, with all information (including documentary evidence) to the CEO. If dispute is not resolved, then the matter is taken up to Committee for Safeguarding Impartiality

9.4 Addressing All Appeals, Complaints and Dispute at CSI Level:

9.4.1 The Committee for Safeguarding Impartiality meetings are convened.

9.4.2 If any, a summary of appeals, complaints and disputes is reviewed, as part of routine agenda, in all CSI meetings for adequacy of actions taken and for any suggested improvements

9.4.3 During the course of resolution of any appeals, complaints and disputes if a decision is made to refer specially to CSI, this aspect will be specifically reviewed. If required a special session is convened.

9.4.4 At least two members of the CSI (Appeals committee), two members from QRC and client representative if any, will have to be present when the appeal, complaint or dispute is taken up and none of them would have any interest in the party making the appeal, complaint or dispute. In case an appellant submits to QRC motivated objections in writing against a certain member, this member during the duration of appeal, shall withdraw in favor of a substitute, if the objections are judged to be well founded.

9.4.5 The decision of the Impartiality committee shall be final and binding on both parties. The same shall be communicated to the concerned parties and decision implemented.

10.0 Rules Governing use of Certificate and Accreditation Logo:

10.1 QRC Mark of Accredited Registration

10.1.1 Where audited activities are within QRC scope of accredited operations, certified companies may use the QRC Mark of Accredited Registration on stationery and literature. The control, use, withdrawal and cancellation of this registration mark are governed by the regulations published by the Accreditation Body governing the use of the accreditation mark given in Appendix 1.

10.1.2 Where certified company uses the QRC Mark of Accredited Registration, the QRC Mark of Accredited Registration shall be on the same sheet of paper as the company's own name or logo. The QRC Mark of Accredited Registration shall not take prominence over the company's own name or logo, and may not be less than 20 mm, unless specifically agreed in writing.

10.1.3 The QRC Mark of Accredited Registration shall not be used on any document unless the document relates in whole or in part to activities within the scope of registration. This shall not prevent inclusion of the logo on stationery or marketing literature.

10.2 Regulations

10.2.1 Where certification is issued within the scope of QRC accreditation, certified companies are sent Regulations Governing Use of the Certificate, QRC Mark of Accredited Registration and Logo

10.2.2 Where certification is outside the scope of QRC accreditation; QRC will not issue the accredited certificate. QRC certificate will not contain accredited registration mark.

10.3 Suspension or Withdrawal of Certification

10.3.1 QRC reserves the right to suspend or withdraw certificate upon evidence of a breach of the Certification Rules or misuse of the QRC Mark of Accredited Registration or Advertising Logo.

10.3.2 QRC may prescribe corrective actions to remedy the breach within a realistic time limit for implementation in accordance with QRC Rules of Certification.

10.3.3 Certificated companies have the right of appeal as indicated in the Certification services.

10.4 Termination of Certification

10.4.1 Both QRC and certified companies have an individual right to terminate the contract for registration as per any specific contract terms, the Certification Rules - and any other agreement pertaining to each client.

10.4.2 Upon termination of certification howsoever determined, the company shall forthwith:

10.4.2.1 Cease use and distribution of any stationery or literature bearing the QRC Mark of Accredited Registration.

10.4.2.2 Cease use or application of the QRC Mark of Accredited Registration and Advertising Logo.

10.4.2.3 Return to QRC appropriate Certificate(s) of Compliance or confirm in writing the withdrawal and subsequent destruction of the documents.

10.5 Regulations Governing Use of the Certificate, Mark of IAS Accredited Registration and Logo

10.5.1 General Conditions

a. Certification is subject to the Certification Rules and Scheme Addendum where applicable.
b. QRC reserve the right to carry out such verification as deemed necessary to confirm continuing satisfactory performance.

c. Certification does not discharge or lessen companies' responsibilities, statutory or otherwise.

d. Certified Companies may only use applicable certification granted to them, i.e. ISO 27001:2013.

e. Each Certified Organization accepts and assumes sole responsibility for understanding and satisfying all applicable organizational and legal requirements related to the use and/or display of the Certification Mark. Among other requirements, each Certified Organization is responsible for ensuring that the use of any Certification Mark in professional and business-related materials (e.g., stationery, signs, business cards, advertisements) is consistent with this Policy, and is not in conflict with applicable laws.

f. The Mark must not be used by the Certified Organization on a product or product packaging seen by the consumer or in any other way that may be interpreted as denoting product conformity.

g. The Mark must not be applied to laboratory test, calibration or inspection reports.

h. The Certified Organization is committed to immediately discontinue its certified status and use of Certification Mark and all advertising matters that contain reference to the same upon notice of withdrawal of certification from QRC on following grounds

    a) Expiration of certification

    b) Revocation of certification on violation of written guidelines

10.5.2 Certificate of Compliance

a. Upon successful completion of the decision making a Certificate is issued detailing the standard or other normative documents against which the certification is granted, company's scope of certification, accreditation body and accreditation number, the company name and the registration address, period of validation and registration number.

b. Any subsidiary companies, site addresses or product/ activities not included in the Certificate of Registration or appendix are not incorporated and must be treated as such.

c. The Certificate remains at all times the property of QRC its display or use being subject to continued and effective registration.

d. The Mark is personal to the Certified Organization and may not be transferred or assigned to any other individual, organization, business, or entity.

10.5.3 Publicity

a. The QRC Mark of Accredited Registration is restricted to stationery and publicity material, which relates to the Company's scope of registration. This can include brochures, product cards. Accredited Mark cannot be used on the name card of registered company.

b. The use of the QRC advertising logo is restricted to company stationery, literature and advertisements. QRC logo cannot be used on the name card of registered company.

c. The registered Company may use the certificate number (Ex: QRC2001001) in association with the appropriate QRC Mark of Accredited Registration or Advertising Logo.

d. In some situations, clients may not wish their certificate to display the accredited registration mark. In this case the certificate should then contain the following information: “This certificate is an accredited certificate, issued under the accredited scope, granted to QRC by IAS”.

10.5.4 Rules For the use of The Mark of Accredited Registration

a. The appropriate QRC Mark of Accredited Registration shall not be used on products, packaging, documentation or certificates, which could imply product conformance. The accreditation mark may not be used on vehicles or flown from flags.

b. The QRC Mark of Accredited Registration may be uniformly enlarged or reduced, but shall not be greater than the height of the members own letterhead or logo, and not less than 20 mm.

c. The QRC Mark of Accredited Registration when used will be displayed on the same sheet of paper as the company's own name or logo. The appropriate QRC Mark of Accredited Registration shall not take prominence over the Company's own name or logo.

d. The mark of accreditation must not be applied to laboratory test reports, certificates of conformance, or calibration reports as reports maybe deemed to be products in this context.

e. The appropriate QRC Mark of Accredited Registration shall be reproduced in a single color which may be orange, black, dark blue or gold, or in the case of pre-printed letterhead paper the predominant color of the letterhead.

f. The appropriate QRC Mark of Accredited Registration shall not be used on any document unless the document relates in whole or in part to activities within the scope of registration.

g. The registered company shall identify the scope of registration to which the Certificate applies when using the QRC Mark of Accredited Registration or Advertising Logo in any context where the scope of registration is open to doubt.

h. If different system applies for different accreditation body's QRC certification, related accredited QRC should be clearly referred.

10.5.5 Use of Accreditation Body Logos

10.5.5.1 Use of IAS accreditation mark

Use of the Accreditation Body Logos is permitted in accordance with the rules specified above and the extra requirements identified in the following sections:

10.5.5.2 In no case will the IAS logo be used on a stand-alone basis. A client certified by QRC may use the IAS accreditation logo only in combination with the QRC Logo on the supplier's stationery and literature, subject to the conditions below and as specified earlier in this document. The IAS logo shall be printed directly beside the QRC Logo, and shall not appear more conspicuous than the QRC Logo. It should not create the impression that QRC's client is accredited by the IAS.

10.5.5.3 Use of logos, logos or names of other organizations on the same document that the IAS/QRC logos are used, shall in no way give the impression that these organizations have been either accredited by the IAS or have been certified by QRC.

10.5.5.4 For each management system certified by QRC, the client will be issued with a registration logo which is distinctly different from any other logo, including other logos used by QRC itself.

10.6 Suspension of Registration

a) In case a registered company is suspended for all or part of the certified activities, the company shall not publish results under certification concerning the suspended activities. The use of the QRC mark of accredited registration on letters, other than quotations, proposals, p.o., brochures or web site, is permitted during the time of suspension, for no longer than 6 months from the day of suspension.

b) QRC reserves the right to suspend or withdraw registration upon evidence of a breach of the Certification Rules or misuse of the appropriate QRC Mark of Accredited Registration or Logo.

c) QRC may prescribe corrective actions to remedy the breach within a realistic time limit for implementation, normally one month.

10.7 Policy Violation and Related Actions

Following receipt of information that an inappropriate or unauthorized use of the Mark may have occurred, QRC Assurance and Solutions ., in consultation with legal counsel, will determine if appropriate response actions will be taken QRC Assurance and Solutions . may take any of the following actions, or other appropriate measures. A Certified Organization is required to cooperate fully in the review and resolution of such matters.

a. A copy of the alleged inappropriate or unauthorized Mark or designation use will be obtained and reviewed to determine whether a violation of the policy has occurred;

b. Upon determination of a policy violation, written correspondence will be issued by an authorized QRC Assurance and Solution . representative to the Certified Organization(s) involved, explaining, among other items: the nature of the objectionable or unauthorized use; the relevant QRC Assurance and Solutions . policy and law; and, the requirement that the Certified Organization cease and desist from the objectionable or unauthorized use immediately and in the future;

c. Upon determination of a policy violation, written correspondence will be sent by an authorized QRC Assurance and Solutions . representative to the Certified Organization(s) involved, requesting that the Certified Organization accept and sign an agreement to, among other items: cease the existing objectionable or unauthorized use; abide by all terms of the QRC policy in the future; and, provide corrected copies of all offending materials; and,

d. Where a Certified Organization using the Mark in an objectionable or unauthorized manner fails to respond to, or refuses to comply with, QRC (I) requirements to cease and desist from such use, the Board may initiate appropriate legal actions and/or disciplinary proceedings, as set forth in the policy.

11. Disclaimer

While this document is intended to provide guidance to prospective / existing clients of QRC and every effort is made to keep its content accurate and up to date, it should not be construed to be comprehensive or conclusive in its contents and applicability. Assessment audit / Certification / Surveillance being activities that always call for auditor's judgment based upon the facts and circumstances of each case / situations, this document cannot be construed to be binding QRC in the scope, interpretation and applicability of its certification activities.

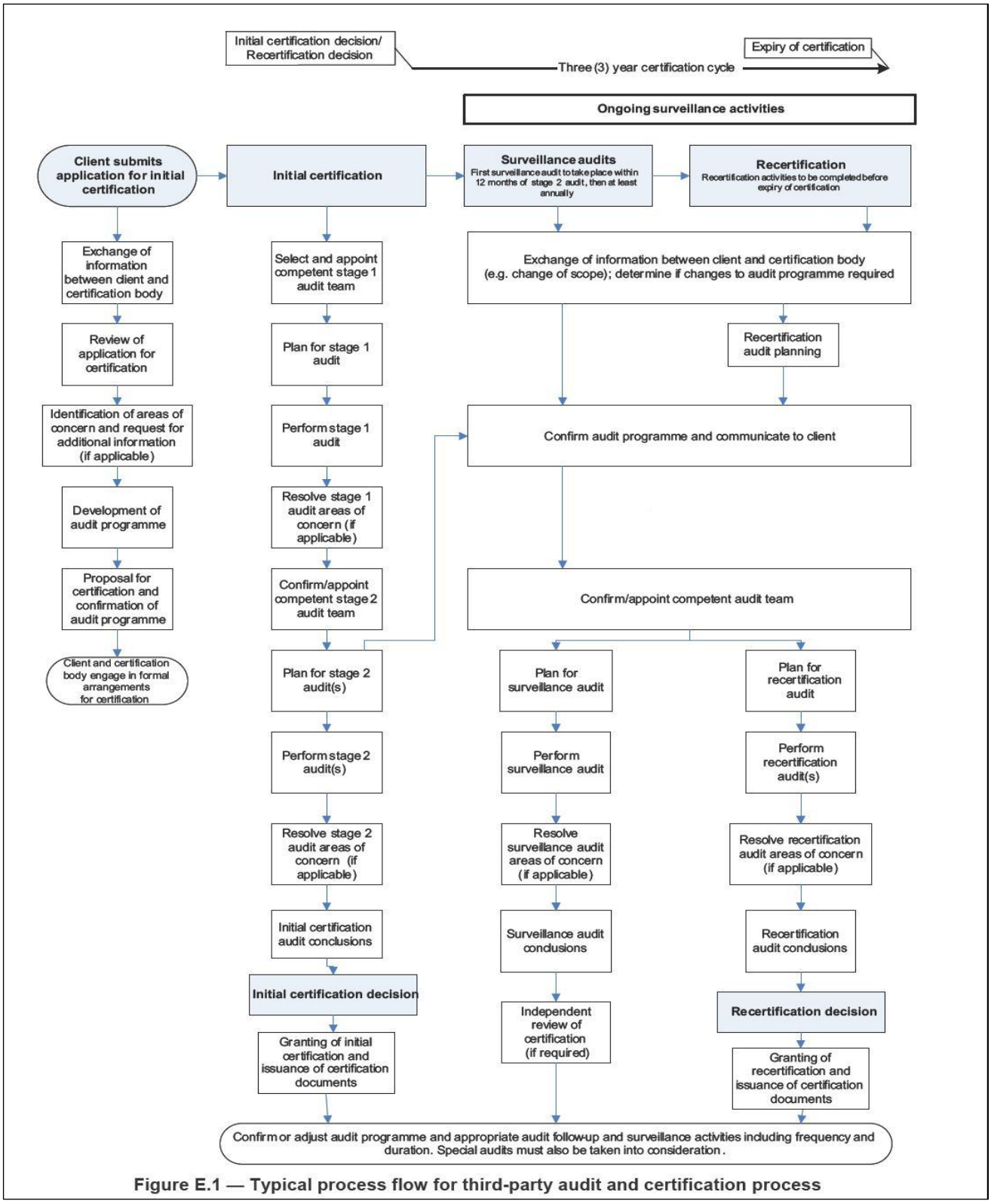


Figure E.1 — Typical process flow for third-party audit and certification process

Note: In an event of change of the ISO standards version the related documents will be reset as issue 01, revision 00.