ISO/IEC 17025/ISO 17029 CHECKLIST FOR VERIFICATION LABORATORIES	F07/06B

For office use: EAS Acc. No						
Laboratory: Field of operation:						
Assessor/s & Observers:						
Laboratory Representative:						
Date of Evaluation:						
This report covers the following:						
Type of Assessment (Tick box):	**Initial:**		**Follow Up**		**Re-assessment:**	
Document Review only:	**Site Visit only:**		**Document Review and Site visit:**		**Other:**	

Laboratories wishing to apply for accreditation shall indicate how requirements have been addressed, documented and implemented on the comment side of each requirement. Assessors can use the space provide to write evidence for the assessment findings on the comment side of each requirement. (Key: C = Comply, NC = not comply, NA = not applicable)

Clause	**Requirement**	Filled by CAB indicating in which document & clause No. the requirements are addressed	Document review by team leader (Reference Documents)	C/ NC /NA	**On site assessment Objective Evidence** *(Provide supporting information to prove implementation; describe the observations; note which records were reviewed.)*	C/NC/ NA
CLAUSE	**REQUIREMENTS**					
4.1	Origination and Management: **Indicate how the following requirements are addressed/ implemented.**					
4.1.1	**a) Is the laboratory an entity that can be held legally responsible (this includes all mobile facility, satellites and temporary faculties)?**					
	b) Are all person legally responsible fro the laboratory identified?					
4.1.2	**Does the laboratory carry out its verification activities in such a way as to meet the requirements of this standard, the regulatory requirements and the requirements of the accreditation body?**					
4.1.3	**Does the laboratory's management system cover work carried out in the laboratory's permanent facility as well as sites away from the permanent facility?**					
4.1.4	**a) Is the laboratory part of a larger organization that performs activates other than verification?**					
	b) Are responsibilities of key personnel that have an involvement or influence on the verification					

	activates clearly defined in order to identify any potential conflict of interest?					
4.1.5	**a) Does the laboratory have managerial and technical personnel with the authority and resources needed to carry out their duties and to identify the occurrence of departures from the quality system or procedures for performing verification and to initiate actions to prevent or minimize such departures?**					
	b) Have arrangements been made to ensure that management and personnel are free from any undue internal and external commercial, financial and other pressures and influences that may adversely affect the quality of their work?					
	c) Are there policies and procedures to ensure the protection of confidential information and proprietary rights, including procedures for protecting the electronic storage and transmission of results?					
	d) Does the laboratory have policies and procedures to avoid involvement in any activities that would diminish confidence in its competence, impartiality, judgment or operational integrity?					
	e) Is the organization and management structure of the laboratory adequately defined?					
	f) Is the responsibility, authority and interrelationships of all personnel who manage, perform or verify work affecting the quality of verification specified?					
	g) Does the laboratory provide adequate supervision of verification officers, including trainees, preferably by persons who are themselves verification officers?					
	h) Does the laboratory have technical management which has overall responsibility for the technical operations and the provision of the resources needed to ensure the required quality of laboratory operations?					
	i) Has a member of staff been appointed as a quality manager?					
	j) Does the laboratory appoint deputies for key managerial personnel?					

4.2	Quality system: **Indicate how the following requirements are addressed/ implemented.**					
4.2.1	**a) Does the laboratory have a quality system which is appropriate to the scope of its activity?**					
	b) Does the quality manual define the laboratory's polices, systems programmers and procedures?					
	c) Is the quality system implemented, communicated to and understood by appropriate personnel?					
4.2.2	**Are the laboratory's quality systems polices and objectives defined in the quality manual?**					
	Is the quality statement policy issued under the authority of the chief executive (however named)?					
	a) Is the laboratory's management committed to good professional practice and quality of its verification activities in servicing its customers?					
	b) Does the policy state the laboratory's standard of services?					
	c) Are the objectives of the quality system defined?					
	d) Is it stated that all verification officers are required to familiarize themselves with quality documentation and implementation of polices and procedures in their work?					
	e) Does the quality policy statement commit management to comply with this standard and the most recent trade metrology regulation?					
4.2.3	**Does the quality manual include or make reference to supporting procedures including technical procedures?**					
	Is the structure of the documentation used in the quality system clearly outlined?					
4.2.4	**Are the roles and responsibilities of the technical manager and the quality manager defied?**					
	Do their responsibilities include ensuring compliance to ISO/IEC 17025?					
4.3	Document control: **Indicate how the following requirements are addressed/ implemented**					
4.3.2.1	**Are all quality system and related documents approved for use by authorized personnel prior to issue?**					

	Is there a master list or equivalent document control procedure identifying the current revision status and distribution of documents in the quality system?					
4.3.2.2	**a) Are authorized editions of appropriate documents avoidable at all locations where the operations essential to the effective functioning of the laboratory are performed?**					
	b) Is there a procedure to ensure that documents are periodically reviewed and, where necessary, revised to ensure continued suitability and compliance with applicable requirement?					
	c) Is provision made to ensure that invalid or obsolete documents are promptly removed from all points of use?					
	d) Are documents retained for either legal or knowledge preservation purposes suitably marked?					
4.3.2.3	**Has a document numbering system been established?**					
	Does the numbering system make provision for the following: • **Date of issue and/or revision identification?** • **Page numbering** • **Total number of pages and** • **The issuing authority?**					
4.3.3 **4.3.3.1**	**Document changes** **Are changes to documents approved by the same function that performed the original review?**					
	If designated otherwise, do the designated personal have pertinent background information?					
4.3.3.2	**Is provision made to identify the new or altered text in the document or the appropriate attachments?**					
4.3.3.3	**If amendments by hand are allowed are they clearly marked, initialed and dated?**					
	Are procedures and authorities for such amendments defined?					
4.3.3.4	**If the laboratory uses computerized system for documents, are there procedures to describe how changes are made and controlled?**					
4.4	Review of requests, tenders and contracts for verification: **Indicate how the following requirements are addressed/ implemented.**					
4.4.1	**Has the laboratory established and does it maintain procedures for the review of requests, tenders and**					

	contracts? **Do the polices and procedures for these reviews leading to a contract for verification ensure that:** **a) The requirements for verification include the relevant verification procedure to be used are adequately defined documented and understood?**					
	b) The laboratory has the capability and resources to meet the requirements?					
	c) The measuring instruments, submitted by the customer for verification is within the laboratory's scope of accreditation and is of a type approved in terms of the Act, if applicable?					
	Are any difference between the request or tender and the contract resolved before any work commences?					
	Is each contract made acceptable to both the laboratory and the customer? **Note 1: The request tender and contract review should be conducted in practical and efficient manner, and the effect of financial, legal and time schedule aspects should be taken into account. For internal customers reviews of requests and contracts can be performed in simplified manner.** **Note 2: The review of capability should establish that the laboratory possesses the necessary verification standards, and that the laboratory's personnel have the skills and expertise necessary for the performance of the verification in question.** **Note 3: A contract may be a written or oral agreement to provide a customer with verification services.**					
4.4.2	**Are records of reviews, including any significant changes maintained?** **Note: For review of routine and other simple task, the date and identification, (e.g. the initials) of the person in the laboratory responsible for carrying out the contracted work are considered adequate, For the repetitive routine tasks, the review need only be made at the initial enquiry stage or on granting of the contract for on-going routine work performed under a general agreement with the customer, provided that the customer's requirements remain unchanged. For new, complex or advanced testing and/or verification tasks a more comprehensive record should be maintained.**					
4.4.3	**Does the review also cover work that is sub-contracted by the laboratory?**					
4.4.4	**Is the customer informed of any deviation from the contract?**					

4.4.5	**If a contract needs to be amended after work has commenced is the same contract review process repeated?** **Are any amendments made communicated to all affected personal?**					
4.5	Sub-contracting of Verifications: **Indicate how the following requirements are addressed/ implemented.**					
4.5.1	**When the laboratory subcontracts work, is the laboratory to which the work is subcontracted accredited for verifying the instruments concerned and does it issue a verification certificate?**					
4.5.2	**Does the laboratory advise the customer of the arrangement in writing, and when appropriate gain the approval of the customer in writing?**					
4.5.3	**Is the laboratory responsible to the customer for the subcontracted work?** **(Except when it is the customer or regulatory authority that specified which subcontractor is to be used)**					
4.5.4	**Does the laboratory maintain a register of all sub-contractors that it uses for verification?**					
4.6	Purchasing, Services and Supplies: **Indicate how the following requirements are addressed.**					
4.6.1	**Does the laboratory have a policy and procedures(s) for the selection and purchasing of services and supplies of calibrated verification?**					
	If equipment that is not covered by a valid calibration certificate is purchased, does the laboratory ensure that the equipment is calibrated in accordance with statutory requirements before it is used?					
4.6.2	**Does the laboratory ensure that the purchased supplies and verification standards that affect the quality of verification are not used until they have been inspected or otherwise verified as complying with standard specifications or requirements?**					
	Are records of actions taken to check compliance maintained?					

4.7	Service of the Customer: **Indicate how the following requirements are addressed/ implemented.**					
4.7.1	**Does the laboratory afford customers or their representatives co-operation to clarify the customer's request and to monitor the laboratory's performance in relation to the work performed to the extent in which the laboratory can ensure confidentially to the customers?**					
	Note 1: Such cooperation may include **a) providing the customer, or the customer's representative, reasonable access to relevant areas of the laboratory or the witnessing of verification carried out for the customer, and** **b) preparation, packaging and dispatch of verification items needed by the customer for verification purposes.** **Note 2: Customer value the maintenance of good communication, advice and guidance in technical matters, and opinions and interpretations based on results. Communication with the customer, especially in large assignments, should be maintained throughout the work. The laboratory should inform the customer of any delays or major deviations in the performance of the verification activities.** **Note 3: Laboratories are encouraged to obtain other feedback both, positive and negative, from their customers (e.g. customer surveys). The feedback should be used to improve the quality system, verification activities and customer service.**					
4.8	Complaints: **Indicate how the following requirements are addressed/implemented**					
	Does the laboratory have a policy and procedures for the resolution of complaints received from customers or other parties?					
	Are all complaints received from customers or other parties about the activities for which the organization has been accredited investigated and dealt with in an appropriate manner?					
	Are records of all complaints and of the investigations and corrective actions taken by the laboratory maintained?					
4.9	**Does the laboratory have a policy and procedures that shall be implemented when any aspect of its verification work or the result of its work does not conform to its own procedures or the agreed requirements of the customer?**					
4.9.1	**Does the policy and procedures ensure that** **a) The responsibility and authorities for the**					

	management of nonconforming work are designated and actions (including halting of work and withholding of verification certificates as necessary) are defined and taken when nonconforming work is identified?					
	b) Evaluation of the significance of the nonconforming work is made?					
	c) Corrective actions are taken immediately, together with any decision about the acceptability of the nonconforming work,					
	d) Where necessary is the customer notified and work is recalled?					
	e) The responsibility for authorizing the resumption of work is defined? **Note: Identification of nonconforming work or problems with the quality system or with the verification actives can occur at various places within the quality system and technical operation. Customer complaints, quality control instrument verification, staff observations or supervision, verification certificate checking, management revise and internal and external audits are examples of this.**					
4.10	Corrective Action: **Indicate how the following requirements are addressed/ implemented.**					
4.10.1	**General.** **Has the laboratory established a policy and procedures, and designated appropriate authorities for implementing corrective action when nonconforming work or departures from the polices and procedures in the quality system or technical operations have been identified?** **Note: A problem with the quality system or with the technical operations of the laboratory may be identified through a variety of activities as control of nonconforming work, internal or external audits, management revise, feedback from customers or staff observations.**					
4.10.2	**Cause analysis.** **Does the procedure for corrective action start with an investigation to determine the root cause(s) of the problem?** **Note: Cause analysis is the key and sometimes the most difficult part in the corrective action procedure, often the root cause is not obvious and thus a careful analysis of all potential causes of the problem is required. Potential causes could include customer requirements, verification procedures, staff skills and training or verification standards or its calibration.**					
4.10.3	**Selection and implementation for corrective action.** **Where corrective action is needed does the laboratory**					

	identify potential corrective action?					
	Does the laboratory select and implement the actions(s) most likely to eliminate the problem and to prevent recurrence?					
	Is the corrective action appropriate to the magnitude and the risk of the problem?					
	Does the laboratory document and implement any required changes resulting from the corrective action investigation?					
4.10.4	**Monitoring of corrective actions.** **Does the laboratory monitor the results to ensure that the corrective actions taken have been effective?**					
4.10.5	**Additional audits.** **Where the identification of non-conformances or departures casts doubts on the laboratory's compliance with its own polices and procedures or this standard, does the laboratory ensure that the appropriate areas of activity are audited in accordance with 4.13 as soon as possible?** **Note: Such additional audits often follow the implementation of the corrective actions to confirm their effectiveness. An additional audit should be necessary only when a serious issue or risk to the business is identified.**					
4.11	Preventive Action: **Indicate how the following requirements are addressed/ implemented.**					
4.11.1	**Are opportunities for improvement/potential sources of non-conformances identified?**					
	If preventive action is required are action plans documented, implemented and monitored to reduce the potential of occurrence?					
4.11.2	**Do procedures for preventive action include the initiation of such actions and application of controls to ensure that they are effective?** **Note 1: Preventive action is a pro-active process to identify improvement opportunities, rather than a reaction to the identification of problem's or complaints** **Note 2: Apart from the review of the operational procedures, the preventive action might involve analysis of data, including trend and risk analysis and verification results.**					
4.12	Control of Records: **Indicate how the following requirements are addressed/ implemented.**					
4.12.1 **4.12.1.1**	**<u>General</u>** **Are there procedures in place for identification, collection, indexing access, storage maintenance and**					

	disposal of quality and technical records?					
	Do quality records include reports from internal audits and management review, as well as corrective and preventive action records?					
4.12.1.2	**Are all records legible, reproducible, dated and readily identifiable?**					
	Are records maintained in an orderly manner? **Are records stored and retained in such a way that they are readily retrievable?**					
	Does the facility used for record storage provide suitable environment to prevent damage, deterioration and loss?					
	Are retention times of records stated? **(Retention shall be at least the period of validity plus one year)**					
4.12.1.3	**Are all records held secure and in confidence?**					
4.12.1.4	**If the laboratory maintains electronic records, are there procedures to protect and back-up records stored electronically?**					
	Are there procedures to prevent unauthorized access to or amendments of these records?					
4.12.2 **4.12.2.1**	**<u>Technical records</u>** **Are records retained of original observations, derived data and sufficient information to establish an audit trail, verification and calibration records, staff records and copy of each verification certificate issued?**					
	Are these retained for a defined period? **Note 1: Records of observation may be in the form of a metrologist's notebook which shall contain sufficient information to establish an audit trail.** **Note 2: Technical records are accumulations of data and information which result from carrying out verification and which indicates whether specified quality or process parameters are achieved. They may include forms, contracts, test sheets, workbooks, and verification certificates and customers feedback.**					
4.12.2.2	**Are observations data and calculations recorded at the time that they are made?**					
	Are they identifiable to the specific task?					
4.12.2.3	**When mistakes occur in records, are they crossed out and not erased, made illegible or deleted?**					
	Is a correct value entered alongside?					

	Are all such alterations to records signed or initialled and dated by the person making the correction?					
	In the case of electronic records, are equivalent measures taken to avoid loss or change of original data?					
4.13	Internal Audits: **Indicate how the following requirements are addressed/ implemented.**					
4.13.1	**Does the laboratory periodically conduct internal audits in accordance with a predetermined schedule?**					
	Do the audits verify that the laboratory's operations continue to comply with the requirements of the quality system and this standard? **Does the internal audit program address all elements of the quality system, including verification activities?** **Does the quality manager plan and organize audits as required by the schedule and requested by management?**					
	Are audits carried out by trained and qualified personnel who are, wherever resources permit, independent of the activity to be audited?					
	Do audits include the following: **a) Complaints received?** **b) Accuracy of verifications conducted?** **c) Adherence to set procedures?** **d) Condition of verification standards and its continued traceability to national standards?** **e) Correct completion of verification certificates?**					
	Do persons conducting technical audits have a thorough knowledge both of the requirements for the measuring instruments concerned and of the relevant trade metrology regulation? **Note: The cycle for internal auditing should normally be completed in one year.**					
4.13.2	**When audit finding cast doubt on the effectiveness of the operations or on the correctness or validity of the laboratory's verification results, does the laboratory take timely corrective actions?**					
	Does the laboratory notify customers in writing if investigations show that the laboratory's results may have been affected?					
4.13.3	**Are audit findings and corrective actions arising from the area of activity recorded?**					
	Are these corrective actions discharged within an appropriate and agreed timescale?					
4.13.4	**Do follow-up activities verify and record the implementation and effectiveness of the corrective action taken?**					
	Does the laboratory conduct ad-hoc checks to ensure					

	continued high quality?					
	Are results of these documented and reviewed together with formal audit findings?					
4.14	Management Reviews: **Indicate how the following requirements are addressed/ implemented.**					
4.14.1	**Does the laboratory's executive management periodically conduct a review of the laboratory's quality system and verification activities to ensure their continuing suitability and effectiveness?**					
	Where necessary does the executive management introduce changes or improvements? **Is there a predetermined schedule and procedure for this activity?** **Does the review take account of the following:** • **Suitability of policies and procedures?** • **Reports from managerial and supervisory personnel?** • **The outcome of recent internal audits?** • **Corrective and preventive action?** • **Assessment by external bodies?** • **Customer feedback?** • **Complaints, and** • **Other relevant factors, such as quality control activities, resources and staff training?** **Note 1: A typical frequency for conducting management review is once every 12 months.** **Note 2: Results should feed into the laboratory planning system and should include goals, objectives and action plans for the coming year.** **Note 3: A management review includes consideration of related subjects at regular management meetings.**					
4.14.2	**Are findings from management reviews and actions that arise from them recorded?** **Does management ensure that those actions are carried out within an appropriate and agreed timescale?**					
5	TECHNICAL REQUIREMENTS					
5.2	Personnel: **Indicate how the following requirements are addressed.**					
5.2.1 **5.2.1.1**	**Management Responsibility** **Does the laboratory's management ensure that all personnel who operate specific equipment perform tests and/or verifications, evaluate results and sign test reports and verification certificates are competent?**					
	Is appropriate supervision given to staff undergoing					

	training?					
	Are personnel performing specific tasks qualified either on the basis of appropriate education, training, experience and demonstrate skills as laid down in the relevant trade metrology regulation?					
	Does their knowledge include: • **Training in respect of technological development relevant to tests/ verifications being performed?** • **Amendments to statutory requirements and knowledge of general requirements expressed in the relevant legislation and standards?**					
5.2.1.2	**Has the management of the laboratory formulated goals with respect to education, training and skills of the laboratory personnel?**					
	Does the laboratory have a policy and procedures for the identification of training needs and provision of training to personnel?					
	Is the training program relevant to present and anticipated tasks of the laboratory?					
5.2.1.3	**Does the laboratory use personnel who are employed by the laboratory?**					
	If contracted and additional key support personnel are used, does the laboratory ensure that such personnel are supervised and competent? **Does the laboratory ensure that contracted personnel work in accordance with the laboratory's quality system?** **Do the name(s) of contracted verification officer(s) appear on the list (Scope of Accreditation) of approved signatories of the accredited laboratory?** **Note: the name of a verification officer may not appear on more than one list at any given time.**					
5.2.1.4	**Does the laboratory maintain current job descriptions for managerial, technical and key support personnel involved in tests and verifications?** **Note: Job description can be defined in many ways.**					
5.2.1.5	**Does the laboratory's management authorize specific personnel to perform particular types of verification, to prepare verification reports and verification certificates and to operate particular types of equipment?**					
	Does the laboratory keep record of the relevant authorization(s), competence, educational and professional qualification, training skills and experience of all technical personnel and contracted personnel?					
	Is this information readily available and does it include the date on which authorization and/or competence was confirmed?					

5.2.2 **5.2.2.1**	**<u>Personnel Requirement</u>** **Compulsory requirements** **Is the verification office appointed in accordance with the relevant trade metrology regulation?**					
5.3	Accommodation and Environment**: Indicate how the following requirements are addressed/ implemented.**					
5.3.1	**Does the laboratory's facilities for testing and verification provide for correct performance of tests and/or verification?**					
	Does the laboratory ensure that environmental conditions do not adversely affect the quality of measurement?					
	Are technical requirements that can affect the result of tests and verifications documented?					
5.3.2	**Does the laboratory monitor, control and record environmental conditions?**					
	Does the laboratory stop verifications when environmental conditions jeopardize the results of the tests and verifications or both?					
5.3.3	**Is there effective separation between neighbouring areas in which there are incompatible activities?**					
	Are measures taken to prevent cross contamination?					
5.3.4	**Is access to and use of areas affecting the quality of the tests/verifications controlled?**					
5.3.5	**Has the laboratory taken measures to ensure good house keeping?**					
	Is there procedure for this?					
5.3.6	**Has the laboratory taken account of the following influences both under laboratory conditions and when the instruments are being tested in situ?** • **Fluctuation in supply voltage and frequency;** • **Radio frequency interference** • **Air turbulence; and** • **Liquid flow turbulence**					
5.4	Verification Methods: **Indicate how the following requirements are addressed/ implemented.**					
5.4.1	**<u>General</u>** **Are the methods and procedures used by the laboratory prescribed in terms of the relevant trade metrology regulation and its associated subsidiary legislation for all verifications within its scope?**					
5.4.2	**Selection Methods** **Does the above also apply for sample handling,**					

	transport storage and preparation of items to be verified?					
	Is the specified maximum permissible error as well as statistical techniques for analysis of verification data in accordance with the relevant regulation and appropriate legislation?					
	Does the laboratory have instruction on the use and operation of all relevant equipment and on the handling and preparation of items for verification?					
	Are all instructions, standards manuals and reference data maintained current and readily available?					
	Are deviations from verification methods documented, technically justified and authorized by the national responsible body?					
	Are the methods used by the laboratory the latest edition of a standard?					
	When methods are not specified by the governing technical regulations, does the laboratory select methods that have been published in international, national or regional standards? Or by reputable technical organizations/ relevant scientific texts or journals?					
	Does the laboratory confirm its competence to operate standard methods before performing verifications?					
5.4.3 **5.4.3.1**	**<u>Control of data</u>** **Are calculations and data transfers subjected to appropriate checks in a systematic manner?**					
5.4.3.2	**If computer or automated equipment are used by the laboratory for the acquiring, processing recording, reporting or retrieval of verification data, does the laboratory ensure that,** **a) Software developed by the user is documented in sufficient detail and validated as being adequate for use?**					
	b) Procedures are established and implemented for protecting data?					
	c) Computer and automated equipment are maintained to ensure proper functioning and are provided with the environmental and operating conditions necessary to maintain integrity of verification data? **Note 1: Procedure shall include, but not limited to integrity and confidentiality of data entry or collection, data storage and data transmission and processing.** **Note 2: Commercial off-the-shelf software, e.g. word**					

	processing, database and statistical programmes in general use within its designed application range may be considered sufficiently validated. However, laboratory software configuration/modifications should be validated.					
5.5	Verification Equipment: **Indicate how the following requirements are addressed/ implemented**					
5.5.1	**Does the laboratory possess measurement and test equipment required for the correct performance of the verification? (including sampling, preparation of verification items, processing and analysis of verification data)**					
	Should the laboratory need to use equipment outside of its permanent control does it ensure that applicable requirements of this standard are met?					
5.5.1.1	**Is the laboratory in possession of the following minimum verification standard mass places for the verification of weighing instruments for which it is accredited;** **a) Accreditation for instruments of capacity exceeding 1 t: standard mass pieces of capacity equal to that for which accreditation is sought;** **b) Accreditation for instruments of capacity exceeding 1 t but not exceeding 10t: standard mass pieces of capacity equal to the greatest of 50% of that for which accreditation is sought, and 1 t.** **c) Accreditation for instruments of capacity exceeding 10 t: standard mass pieces of capacity equal to the greater of 20% of that for which accreditation is sought and 5 t.**					
5.5.2	**Has a calibration program been established for key measuring quantities or values of the instruments where these properties have a significant effect on the results?**					
5.5.3	**Are equipment operated by authorized personnel?**					
	Are there up-to-date instructions on the use and maintenance of equipment and are these readily available to for use by appropriate personnel?					
5.5.4	**Is each item of equipment and its software used for verification uniquely identified?**					
5.5.5	**Are records maintained of each item of equipment and its software significant to the verification performed. Do the records include at least:** **a) Identity of the item of equipment and its software?** **b) Manufactures' name, type identification and serial number or other unique identification?** **c) Checks that equipment complies with the relevant specification?** **d) Current location, where appropriate;** **e) The manufacture's instruction if available or**					

	reference to their location? **f) Dates, results and copies of reports and certificates of all calibrations, adjustments acceptance criteria and due date of next calibration?** **g) Maintenance plan and maintenance carried out to date?** **h) Damage, malfunction, modification or repair to the equipment?**					
5.5.6	**Does the laboratory have procedures for safe handling transport, storage, use and planned maintenance of measuring equipment?**					
5.5.7	**Is there a procedure for handling defective or malfunctioning equipment and does the procedure cover the requirements of this standard?**					
5.5.8	**Whenever practicable, is all equipment under the control of the laboratory identified to indicate status of calibration?**					
5.5.9	**Does the laboratory ensure that when equipment goes outside of the control of the laboratory, it is checked before it is returned to service?**					
5.5.10	**Does the laboratory have a defined procedure for intermediate checks when necessary?**					
5.5.11	**Does the laboratory have a defined procedure for the use of correction factors where verification standards or auxiliary standards require the use of correction factors?**					
5.5.12		**Are verification equipment, including both hard and software safeguarded from adjustments which would otherwise invalidate the verification standards?**				
5.6	Measurement Traceability: **Indicate how the following requirements are addressed/ implemented.**					
5.6.1	**<u>General</u>** **Are all standards and equipment used for verifications calibrated before being put into service?**					
	Is equipment for auxiliary measurement having a significant effect on accuracy or validity of the results of the verification calibrated before being put into service?					
	Are the calibration intervals acceptable to the national responsible body?					
5.6.2	**Specific requirements**					

	Is the program for calibration of verification of standards and equipment operated in such a way that the accuracy of measurements made by the laboratory is traceable to the SI units of measurement?					
	Does the laboratory establish traceability of its own standards and measuring instruments to the SI units by means of an unbroken chain of calibrations linking them to the relevant primary laboratory?					
	Does the certificate issued by the calibration laboratory contain the measurement uncertainty, and a statement of compliance or both, with an identified metrological specification?					
5.6.3 **5.6.3.1**	**<u>Verification standards and reference materials</u>** **Reference materials** **Are reference materials traceable to the SI units of measurements?**					
5.6.3.2	**Transport and storage** **Does the laboratory have procedures for safe handling, transport, storage and use of verification standards and reference materials in order to prevent deterioration and to protect their integrity?** **Note: Additional procedures may be necessary when verification standards and reference materials are used outside the permanent laboratory for tests, verification of sampling.**					
5.6.3.3	**Make up material** **Is use of make up material in compliance with statutory requirements?**					
5.7	Sampling: **Indicate how the following requirements are addressed/ implemented.**					
	When carrying out sampling for verification, does the laboratory have a sampling plan and procedure?					
	Is the sampling plan and procedure available where sampling is taking place? **Is the sampling plan based on appropriate statistical methods?**					
	Does the sampling process address factors to be controlled to ensure validity of verification results? **Note: Sampling is a defined procedure whereby an instrument is taken to provide for verification of a representative sample of whole. Sampling can also be required by the appropriate specification for which the instrument is to be verified.**					
5.8	Handling of Verification Items: **Indicate how the following requirements are addressed/ implemented.**					
5.8.1	**Does the laboratory have procedures for the transportation, receipt, handling, protection, storage, retention and disposal or both, of verification items?**					
	Do the procedures include all necessary provisions to protect the integrity of the verification item, and the					

	interest of the laboratory and the customer?					
5.8.2	**Are instruments that are not intended for verification and fall outside the scope of this standard segregated?**					
	And are they marked in such a way to leave no doubt that they are not for verification?					
5.8.3	**Does the laboratory have a system for identifying verification items?**					
	Is the identification retained throughout the life of the item in the laboratory?	Team Leader				
	Is the system designed and operated so as to ensure that items cannot be confused physically, or when referred to in records or other documents?	signature:				
	If appropriate, does the system accommodate subdivisions of groups of items and the transfer of items to and from the laboratory?	Date:				
5.8.4	**Are abnormalities or departures from normal or specified conditions**					

	recorded upon receipt of verification items? **Does the laboratory consult the customer for further instructions before proceeding where:** **a) There is doubt concerning suitability of an item for verification?** **b) An item does not conform to the description provided?** **c) Verification required is not specified in detail?** **Does the laboratory record the discussion concerning any of the above?**
5.8.5	**Does the laboratory have arrangements for storage and security where a verification item or portion of and item is to be held secure?**
5.8.6	**Does the laboratory take special care to ensure that verification items**

	are not damaged during storage?
5.9	Assuring the Quality of Verification Results: **Indicate how the following requirements are addressed/ implemented. Does the laboratory have quality control procedures for monitoring the validity of verifications undertaken?**
	Are the selected methods appropriate for the type and volume of the work undertaken?
5.10	Reporting the Results: **Indicate how the following requirements are addressed/ implemented.**
5.10.1	**General Is the result of each verification procedure carried out by the laboratory reported accurately, clearly, unambiguously**

		and objectively and in accordance with any specific instructions in the verification methods? **Is the result reported and does it include all the information that is requested by the customer?**
5.10.2	**Verification Certificates**	**Does the report include information necessary for the interpretation of the test or verification result, and that which is required by the test method used?** **Does the verification certificate include at least the following:** **a) The title "Verification Certificate"?** **b) Name and address of the verification laboratory?** **c) Unique identification of the verification certificate (such as a**

serial number) and on each page, and identify that will ensure that the page is recognized as part of the verification certificate, and a clear identifier of the end of the verification certificate?

d) Name and address of the customer?

e) Identification of the verification method used?

f) Description and unambiguous identification of the items verified?

g) Statement which will serve as proof that the equipment used is traceable to the national standard. The following data shall be included as

a minimum:

- **calibration certificate number**
- **date of calibration of equipment**
- **identification of equipment e.g. serial number, set number etc; and**
- **own or loan equipment**

h) Expiry date of the verification certificate, if appropriate

i) Name and signature of the verification officer responsible for the verification, date of verification and seal number used for the identification of the responsible verification officer.

5.10.3 Reporting of results

Is the following documented as a minimum for every verification?:

a) Reference to the applicable verification or rejection certificate;

b) Verification status (new, repaired or in use) of the instrument immediately prior to verification;

c) Observations made during the preliminary examination (these may be combined in a single statement however any non complying aspect need to be separately indicated);

d) All results of test where an error limit is prescribed including the true value at which the specific test were done, that are to be within the prescribed

limits of error shall be recorder. This includes the permissible or applicable errors;

e) Deviations, additions to, or exclusions from the test method, and specific test conditions, such as environmental conditions;

f) When the instrument being verified has been adjusted or repaired, the results before and after adjustment or repair if requested by the customer, may be reported in the form of an additional test report;

g) Name and seal identification of the responsible verification officer, and

h) Date of

testing.

NOTE An instrument which is in actual use but which required repair before verification is regarded as repaired.

5.10.4

Rejection certificates

Is a rejection certificates issued for instruments which is false, inaccurate or defective and which is not immediately repaired and verified?

Does the rejection certification contain at least the following:

a) The title "Rejection Certificate" and serial numbered

b) Name and address of the verification laboratory.

c) Name and address of the customer

d) Description and unambiguous identification of the item(a)

rejected

e) Date of rejection

f) Reasons for rejection of the instrument

g) Name and signature of the verification officer responsible for the rejection and seal number used for identification of the responsible verification, officer and

h) The following statement "the above instruments(s) has/have been rejected and may not be used for a prescribed purpose in terms of the *trade metrology regulation XX* until they have been verified as complying to all requirements of the *regulation*."

5.10.5 Electronic Transmission of

		Results
		Are the requirements of this standard met in case of transmission of verification results by facsimile or other electronic or electromagnetic means?
5.10.6	**Formats of reports and certificates**	**Is the format designed to accommodate each type of verification carried out, and to minimize the possibility of misunderstanding or misuse?** **Note 1: Attention should be given to the lay-out of the verification certificate, especially with regard to the presentation of the verification data and ease of assimilation by the reader.** **Note 2: The headings should be standard as far as possible.**
5.10.7	**Amendments to test reports and verification certificate.**	**Are material amendments to a verification certificate or test**

report or rejection certificate after issue only made in the form of a further document or data transfer?
Does it include the statement "Supplement to verification certificate number, test report number or rejection certificate number" or equivalent form of wording?
Do these amendments meet the requirements of this standard?
When it is necessary to issue a completely new verification certificate or test report is it uniquely identify and does it contain a reference to the original that it replaces?
Are material amendments to verification certificate, test reports or rejection certificates before issue, made on all copies or initialled by the responsible

	verification officer?
5.10.8	**Supplementary**
5.10.8.1	**reports and certificates. When an instrument is repaired as contemplated in, the relevant regulation, is it thereafter verified and a verification certificate issued?**
5.10.8.2	**Does the certificate issued in terms of 5.10.9.1 contain the following (in addition to information required in 5.10.2)** **a) a declaration that the repair in no way compromised the metrological integrity of the instruments or the validity of the current verification certificate?** **b) The serial number and date of expiry of the current verification certificate?** **c) a brief**

	description of the repair carried out?	
	d) a statement permitting the use of the instrument in terms of the *relevant regulation* until the expiry of the current verification certificate.	
Additional Requirements (Required for Follow up and reaccreditations assessments)	**a)**	
	Use of the Symbol	
	Is the accredited verification laboratory utilizing the correct symbol?	
	Is the symbol reproduced in a size that is clearly distinguishable?	
	Is the symbol reproduced in accordance with the EAS "Conditions for use of accreditation symbols or reference to accreditation by EAS accredited facilities".	
	Is the symbol identifiable?	

Is the accredited laboratory properly using the symbol on:

a) Promotional material and business stationary?

b) Test or verification certificates or labels? (See note)

c) Website?

d) Technical literature?

e) Business reports

f) Quotations or proposals for work? (symbols may only be listed for accredited laboratories)

Note: Where statements of opinion and interpretation are outside the scope of the accreditation, the laboratory shall include a statement such as "the opinions/ interpretations expressed on this report are outside the scope of this laboratory's accreditation." in the report or certificate

Is the accredited laboratory

appropriately using the symbol by not placing the symbol on:

a) Legal documents (i.e. contracts or checks)?

b) On test/verification certificates or any other material referencing work or items not covered by scope of accreditation?

c) Any documentation of sites that are not accredited by EAS?

d) On subcontractor's certificates or documentation

e) On products or items which the laboratory has tested

	or verified (except verification labels)?
Where tests or verifications outside the scope of the accreditation are included on reports, certificates or enclosed letters with results, has the laboratory clearly defined "This laboratory is not accredited for the tests or verifications marked"?	