



SADCAS Ref. No:	
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**APPLICATION FOR ACCREDITATION OF CERTIFICATION BODIES FOR  
MANAGEMENT SYSTEMS**

**PART 1: GENERAL INFORMATION**

*This form should be completed in full and returned to:*

**Southern African Development Community Accreditation Service (SADCAS)  
Attention: Technical Manager**

**Postal Address:**

Private Bag 00320  
Gaborone  
Botswana  
Tel: +267 3132909/ 31329/10  
Fax: +263 3132922  
Email: [info@sadcas.org](mailto:info@sadcas.org)

**Physical Address:**

Plot 50369 Unit 3A, Second Floor  
Tholo Office Park, Fairgrounds  
Gaborone  
Botswana

**Please complete ALL applicable sections of the form in CLEAR PRINT or in type.**

This form is available in electronic form. Please do not modify the form other than filling in the sections provided for this purpose. Any form that is modified will not be recognized as a valid application. Should you have difficulties in completing the form, please contact SADCAS or the National Accreditation Focal Point office in your country.

If you wish to complete and forward the form by email, please note that SADCAS does not accept responsibility for breach of confidentiality of information or for the receipt of applications. **All applications submitted by email must be forwarded, duly signed, by surface/special courier mail.**

Receipt of payment of the application fee shall be required prior to processing the application.

**Note:** If you do not receive acknowledgement of receipt of your application from SADCAS or fax within four (4) weeks of dispatch you should contact the SADCAS Office. This application remains valid for one year from the date of application.

<b>Date of Application</b>			
<b>Organization</b>			
<b>VAT Registration No. (where applicable)</b>			
<b>Contact Person</b>		<b>Title</b>	
<b>Position</b>			
<b>Postal Address</b>			
<b>Physical Address</b>			
<b>Tel No:</b>		<b>Direct Tel No:</b>	<b>Fax No:</b>

<b>Mobile No:</b>		<b>Email address:</b>	
<b>Field of Operation</b>			

<b>Application for:</b> <i>(Tick as appropriate)</i>			
Initial Accreditation <i>Proceed to complete Parts 2 – 5</i>	<input type="checkbox"/>	Extension of Accreditation <i>Proceed to complete</i>	<input type="checkbox"/>
		<ul style="list-style-type: none"> <li>▪ Part 3 for new staff</li> <li>▪ Part 4 for new sub-scope</li> <li>▪ Part 5</li> </ul>	
Other <input type="checkbox"/>	<i>(Please specify)</i>		
Type of Accreditation sought <i>(Tick as appropriate)</i>			
Quality Management Systems (QMS) – ISO/IEC 17021-1 and ISO/IEC TS 17021-3		Food Safety Management Systems (FSMS) - ISO/IEC 17021-1 and ISO/TS 22003	
Environmental Management Systems (EMS) – ISO/IEC 17021-1 and ISO/IEC TS 17021-2		Hazard Analysis and Critical Control Points (HACCP) – ISO/IEC 17021-1	
Occupational Health & Safety Management Systems (OHSMS) – ISO/IEC 17021-1		Information Management Systems (IFMS) – ISO/IEC 17021-1	
Other <i>(Please specify)</i>			

**PART 2: INFORMATION REGARDING YOUR ORGANIZATION**

Description of the main activities of the applicant organization *(Please underline those activities for which accreditation is sought):*

*If the organization seeking accreditation is owned by another organization or is part of a larger organization or has branches/divisions at other locations, please give the following details:*

Name, address and contact information (Tel, Fax, Email) of:

<b>Parent Organization</b>	
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<b>Other organizations in group/ division</b>	
Locations/sites/virtual sites where key activities are conducted	

Relationship and links between the above-mentioned organizations and the organization seeking accreditation <i>(Please describe)</i>			
What is the legal status of your organization? e.g. Pvt (Pty)/Ltd privately owned or other  (List and attach the legal instrument and other regulatory requirements applicable to your organization)			
Registration Number of Company/ Identify Number(s) of sole owner or partners			
Total number of employees in the whole organization or group of organizations		Number of employees involved in area(s) seeking accreditation	
<b><i>Please attach an organogram of your organization indicating the structure of the sections/units/areas to be accredited and their relation to the rest of the organization.</i></b>			
Has the organization ever been accredited before?		<input type="checkbox"/>	<input type="checkbox"/>
		Yes	No
If yes, state name of accreditation body:			
Does the organization have an established formal management system?		<input type="checkbox"/>	<input type="checkbox"/>
		Yes	No
If yes, state standard upon which the system is based:			

How long has this system been in operation?	
What training has been provided for the implementation and maintenance of the system	
To whom has the training been provided for?	

<b>PART 3: INFORMATION ON SENIOR STAFF</b>				
<i>For each staff member having responsibility for service for which accreditation is sought, please give the following details. This includes the Quality Manager and Technical Manager, where applicable.</i>				
<b>Note:</b> This information may be provided in any format used by the Certification Body provided all requirements below are addressed.				
Name		Position		
Area of responsibility			No. of staff supervised in area	
Qualifications, experience, training and competence analysis:				
Name		Position		
Area of responsibility			No. of staff supervised in area	
Qualifications, experience, training and competence analysis:				
Name		Position		
Area of responsibility			No. of staff supervised in area	
Qualifications, experience, training and competence analysis:				
Name		Position		
Area of responsibility			No. of staff supervised in area	
Qualifications, experience, training and competence analysis:				

Name		Position	
Area of responsibility		No. of staff supervised in area	
Qualifications, experience, training and competence analysis:			
Name		Position	
Area of responsibility		No. of staff supervised in area	
Qualifications, experience, training and competence analysis:			

<b>PART 4: SCOPE OF APPLICATION</b>							
4.1 For QMS/EMS/OHSMS Please indicate for which scope sectors accreditation is sought.							
EAC Code	NACE Code	Description	No. of Certifications	No of Auditors	Please tick as appropriate		
					QMS	EMS	OHSMS
1 (part)	A	Agriculture					
1 (part)	B	Fishing					
2	C	Mining and quarrying					
3	DA	Food products, beverages and tobacco					
4	DB O 93,01	Textiles and textile products Washing and (dry-) cleaning					
5	DC G 52.71	Leather and leather products Repair or articles of leather					
6	DD	Wood and wood products					
7 (part)	DE 21.1	Pulp and paper					
7 (part)	DE 21.2	Paper products					
8	DE 22.1, 3	Publishing companies					
9 (part)		Reproduction of recorded media					
9 (part)	DE 22.2, 3	Printing companies					
10	DF 23.1, 2	Manufacturer of coke and refined petroleum products					
11	DF 23.3	Nuclear fuel					
12	DG minus 24.4	Chemicals, chemical products and fibres					
13	DG 24.4	Pharmaceuticals					
14	DH	Rubber and plastic products					
15	DI minus 26.5,6	Non metallic mineral products					
16	Di 26.5,6	Concrete, cement, lime, plaster, etc.					
17 (part)	DJ 27	Basic metals					
17 (part)	DJ 28	Fabricated metal products					
18	DK minus 29.7	Machinery and equipment					
19 (part)	DL 32.1	Electronic valves, tubes and other (micro-) electronic components					
19 (part)	DL minus 32.1; DK 29.7 G 52.72, 73, 74	Electrical and optical equipment Domestic appliances Repair of household goods etc.					
20	DM 35.1	Shipbuilding					
21	DM 35.3	Aerospace					
22	DM 34, 35.2, 4, 5	Other transport equipment					
23	DN 36	Manufacturing not elsewhere classified					
24	DN 37	Recycling					
25	E 40.1	Electricity supply					

26	E 40.2	Gas supply					
27	E 40.3, 41	Water supply					
28	F	Construction					
29 (part)	G 51, 52	Wholesale & retail trade					
31 (part)	I minus 64	Transport & storage					
29 (part)	G 50	Sale, maintenance & repair of motor vehicles, motor cycles					
30	H	Hotels and restaurants					
31 (part)	I 64	Post and telecommunication					
32 (part)	J	Financial mediation					
32 (part)	K 70	Real estate					
32 (part)	K 71	Renting					
33	K 72	Information technology					
34	K 73, 74, 2, 3, 7, 81	Engineering services Research and development					
35	K 74 minus 74, 2, 3, 7, 81	Other professional services					
36	L	Public administration					
37	M	Education					
38	N	Health and social work					
39 (part)	O 90	Sewage & refuse disposal & sanitation					
39 (part)	O 92	Recreational, cultural and sporting activities					
39 (part)	O 91, 93 minus 93.01	Other social services					

4.2 For <b>FSMS &amp; HACCP</b> certification please indicate the scope for which accreditation is sought. <b>Categories based on ISO/TS 22003:2013</b>								
Cluster <sup>a</sup>	Category		Subcategory		Examples of included activities	No of certifications	No of Auditors	Please tick
Farming	A	Farming of Animals	AI	Farming of Animals for Meat/ Milk/ Eggs/ Honey	Raising animals (other than fish and seafood) used for meat production, egg production, milk production or honey production Growing, keeping, trapping and hunting (slaughtering at point of hunting) Associated farm packing <sup>b</sup> and storage			
			AII	Farming of Fish and Seafood	Raising fish and seafood used for meat production Growing, trapping and fishing (slaughtering at point of capture) Associated farm packing <sup>b</sup> and storage			
	B	Farming of Plants	BI	Farming of Plants (other than grains and pulses)	Growing or harvesting of plants (other than grains and pulses): horticultural products (fruits, vegetables, spices, mushrooms, etc.) and hydrophytes for food Associated farm packing <sup>b</sup> and storage			
			BII	Farming of Grains and Pulses	Growing or harvesting of grains and pulses for food Associated farm packing <sup>b</sup> and storage			
Food and feed processing	C	Food Manufacturing	CI	Processing of perishable animal products	Production of animal products including fish and seafood, meat, eggs, dairy and fish products			
			CII	Processing of perishable plant products	Production of plant products including fruits and fresh juices, vegetables, grains, nuts, and pulses			
			CIII	Processing of perishable animal and plant products(mixed products)	Production of mixed animal and plant products including pizza, lasagne, sandwich, dumpling, ready-to-eat meals			
			CIV	Processing of ambient stable products	Production of food products from any source that are stored and sold at ambient temperature, including canned foods, biscuits, snacks, oil, drinking water, beverages, pasta, flour, sugar, food-grade salt			
	D	Animal Feed Production	DI	Production of Feed	Production of feed from a single or mixed food source, intended for food-producing animals			
			DII	Production of Pet Food	Production of feed from a single or mixed food source, intended for non-food producing animals			
Catering	E	Catering			Preparation, storage and, where appropriate, delivery of food for consumption, at the place of preparation or at a satellite unit			
Retail, transport and storage	F	Distribution	FI	Retail / Wholesale	Provision of finished food products to a customer (retail outlets, shops, wholesalers)			

4.2 For **FSMS & HACCP** certification please indicate the scope for which accreditation is sought.  
**Categories based on ISO/TS 22003:2013**

Cluster <sup>a</sup>	Category	Subcategory	Examples of included activities	No of certifications	No of Auditors	Please tick
		<b>FII</b>	Food Broking / Trading	Buying and selling food products on its own account or as an agent for others Associated packaging <sup>c</sup>		
<b>G</b>	Provision of Transport and Storage Services	<b>GI</b>	Provision of Transport and Storage Services for Perishable Food and Feed	Storage facilities and distribution vehicles for the storage and transport of perishable food and feed Associated packaging <sup>c</sup>		
		<b>GII</b>	Provision of Transport and Storage Services for Ambient Stable Food and Feed	Storage facilities and distribution vehicles for the storage and transport of ambient stable food and feed Associated packaging <sup>c</sup>		
		<b>H</b>	Services	Provision of services related to the safe production of food, including water supply, pest control, cleaning services, waste disposal.		
	<b>I</b>	Production of Food Packaging and Packaging Material	Production of food packaging material			
	<b>J</b>	Equipment manufacturing	Production and development of food processing equipment and vending machines			
	<b>K</b>	Production of (Bio) Chemicals	Production of food and feed additives, vitamins, minerals, bio-cultures, flavorings, enzymes and processing aids Pesticides, drugs, fertilizers, cleaning agents			
<sup>a</sup> Clusters are intended to be used for accreditation scope of accredited certification bodies, and for accreditation bodies witnessing certification bodies. <sup>b</sup> "Farm packing" means packaging without product modification and processing. <sup>c</sup> "Associated packaging" means packaging without product modification and processing and without altering the primary packaging.						

4.3 For **OTHER MS** certification please indicate the scope and sub-scope standard for which accreditation is sought:

Category	Description	No of certifications	No of Auditors	Please tick






<b>PART 5: DECLARATION</b>	
<b>Chief Executive Officer (CEO) or authorized official must authorize this form.</b>	
The following is enclosed <i>(please tick as appropriate)</i>	
Copy of the Quality Manual and relevant completed SADCAS checklist [SADCAS F 40 (a)] indicating where in the Quality Manual the requirements have been met	Application Fee: Transfer order placed <i>(please attach banking information on transfer)</i>
Other documentation <i>(Specify any other documents attached to the application form)</i>	
<b>NOTE 1</b>	
Documentation to be submitted prior to document review:	<b>Tick</b>
a) Duly completed Application Form	
b) Quality Management System Manual	
c) Information on	
i) Scope sectors for which accreditation is sought	
ii) Number of certifications per scope	
iii) Number of auditors for each scope	
d) Duly completed SADCAS F 43 (f) - Application for Approval of Personnel	
e) Signed SADCAS Accreditation Agreement (SADCAS F 44)	
f) Proposed assessment dates (for scope extensions only)	
<b>Note:</b> Applications for scope extensions should be made six (6) weeks in advance prior to the scheduled assessment. For scope extensions documents b), c) (i) to (iii), d) and f) apply	



Upon accreditation, my organization agrees to comply with the SADCAS accreditation requirements and procedures.

I enclose a copy of the Quality Management System Manual and duly completed SADCAS F40 (a) indicating where in the quality manual the requirements have been met.

I enclose an **application** fee. I understand that this fee is not refundable.

I understand the manner in which the accreditation system operates and its functions. SADCAS does not accept any responsibility for the actions, or the results of any actions, of an accredited organization. I, the undersigned, agree, as the authorized officer of the applicant independent entity that any liability of SADCAS which may arise due to negligence related to any accreditation is limited to a refund of the annual fee payable by the organization.

I declare that the information given in this **application** is both correct and accurate to the best of my knowledge and belief. I undertake to inform SADCAS timeously of any changes with respect to the application and accept full responsibility for any costs incurred as a result of any changes not reported to SADCAS timeously.

<b>Signed and stamped</b>	
<b>Name</b> ( <i>print</i> )	
<b>Position</b>	
<b>Date</b>	