PRIJAVA za akreditacijo kontrolnega organa

Application for accreditation of inspection body

**Izpolnjeno ter podpisano prijavo natisnite in pošljite v tiskani obliki po navadni pošti in v elektronski obliki (Word formatu) po elektronski pošti (prijavo za pridobitev akreditacije na** [**info@slo-akreditacija.si**](mailto:info@slo-akreditacija.si)**, prijavo za širitev pa vašemu koordinatorju).** **Če prijavljate širitev obsega akreditacije, lahko izpolnite le tiste rubrike, ki so specifične za prijavljeno širitev. */*** *Print the completed and signed application form and send it in paper by ordinary mail and in electronic format (Word document) by E-mail (initial application to info@slo-akreditacija.si; application for extension of scope to your coordinator). If you are applying for an extension of accreditation scope, you can only fill in those sections that are specific to the registered extension.*

**VRSTA PRIJAVE / Type of application**:

pridobitev akreditacije / initial application

širitev obsega akreditacije / extension of accreditation scope:

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| Identifikacijska številka akreditacije / *Accreditation ID no.*: |  |

novi predmeti kontrole z istega strokovnega področja / *new items of inspection from the same technical field*

širitev na drugo strokovno področje / *extension to another technical field*

vključitev drugih organizacijskih enot/oddelkov/lokacij / *inclusion of other organizational units/departments/sites*

# SPLOŠNI PODATKI O PRIJAVITELJU / General data about the applicant

|  |  |
| --- | --- |
| **Naziv organizacije** / *Company* name |  |
| Naslov / Address |  |
| Matična številka / Registration No. |  |
| Davčna številka / VAT No. |  |
| Naslov za pošiljanje računa / Invoicing Address |  |
| Številka TRR / Account No. |  |
| Odprt pri banki / Opened at Bank |  |
| Telefon / Phone |  |
| Ime in priimek pravnega zastopnika / Name and surname of Legal Representative |  |
| Funkcija/položaj pravnega zastopnika / Function/position of Legal Representative |  |

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| --- | --- |
| **Naziv kontrolnega organa /** *Name of Inspection Body* |  |
| Naslov / Address |  |
| Telefon / Phone |  |

|  |  |
| --- | --- |
| **Kontaktna oseba /** *Contact Person*  (Ime in priimek / *Name and Surname*) |  |
| Položaj, funkcija / Position, function |  |
| Naslov / Address |  |
| Telefon / Phone |  |
| Elektronski naslov / E-mail Address |  |

# PRAVNA IDENTITETA, POLOŽAJ, ORGANIZACIJA / Legal identity, position, organisation

## Kontrolni organ je / *The* inspection body is:

samostojna pravna oseba / independent legal entity

sestavni del pravne osebe (npr. sektor, oddelek, enota) / part of a legal entity (e.g. sector, department, unit)

državni organ ali njegov sestavni del / *governmental authority or its part*

samostojni podjetnik / sole trader

drugo (opišite) / other (describe)

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## Opišite razloge za pridobitev akreditacije za prijavljeni obseg oziroma posamezne dele obsega. V primeru, da je akreditacija pogoj za pridobitev pooblastila/imenovanja/statusa priglašenega organa, opredelite, na katere dele prijavljenega obsega se to nanaša. / *Please describe the reasons for obtaining accreditation for the applied scope or individual parts of the scope. If accreditation is a condition for obtaining the authorization/appointment, please specify to which parts of the applied scope this refers.*

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## Opišite organizacijsko strukturo kontrolnega organa in njegov položaj v matični organizaciji, če je kontrolni organ njen sestavni del (priložite organizacijski diagram). / *Please* describe organizational structure of the inspection body and its position in the company if the inspection body is part of it (attach organizational chart).

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## Opišite dejavnosti matične organizacije (priložite izpis dejavnosti iz sodnega registra). / *Please* describe activities of the company (attach extract of activities from judicial record).

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## Kontrolni organ zagotavlja neodvisnost / *The inspection body ensures the following independence type*:

tipa A / *type A*

tipa B / *type B*

tipa C / *type C*

Če zagotavljate več kot en tip neodvisnosti, opredelite, za katere od prijavljenih dejavnosti zagotavljate kateri tip neodvisnosti. / *If you ensure more than one independence type, specify for which of the registered activities you provide which independence type.*

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# SISTEM VODENJA KAKOVOSTI / Quality management system

## Kdaj je bil v kontrolnem organu vpeljan sistem vodenja kakovosti po zahtevah standarda SIST EN ISO/IEC 17020? / When was the quality management system according to standard SIST EN ISO/IEC 17020 implemented in the inspection body?

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## Je sistem vodenja v kontrolnem organu vpeljan skladno s še drugimi standardi? / Is the inspection body's management system implemented according to any other standards?

ne / *no*

da / *yes*

v skladu z zahtevami standarda ISO 9001, za kar ima kontrolni organ pridobljen certifikat akreditiranega certifikacijskega organa / *in accordance with the requirements of the standard ISO 9001, for which the inspection body holds a certificate from an accredited certification body*

v skladu z zahtevami standarda ISO 9001, za kar kontrolni organ nima pridobljenega certifikata akreditiranega certifikacijskega organa / *in accordance with the requirements of the standard ISO 9001, for which the inspection body doesn't hold a certificate from an accredited certification body*

drugo / *other*

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# OSEBJE / Personnel

Navedite imena in položaj osebja s tehnično odgovornostjo za izvajanje kontrole (tehnični vodje, namestniki tehničnega vodja, izvajalci kontrol) ali odgovornostjo za zagotavljanje kakovosti. / *Please state the n*ames and positions of personnel with technical responsibility for inspection (technical director, deputy(s) of technical director, inspectors) or responsibility for quality assurance.

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| Ime in priimek /  Name and Surname | Položaj, funkcija /  Position, function | Področja dela\* /  Work areas\* |
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\* opredelite področje dela glede na obseg za akreditacijo, opredeljen v poglavju 9 / *please state the work area with respect to accreditation scope defined in chapter 9*

# LOKACIJE / Sites

## Lokacije (v Sloveniji in/ali tujini), kjer izvajate aktivnosti kontrole iz prijavljenega obsega akreditacije in/ali podporne dejavnosti/procese (npr. kadri, nabava, sprejem naročil, IT), če so te drugačne od lokacij procesa kontrole (kot jih boste navedli v poglavju 9). Podajte informacije za lokacije ne glede na to, za kakšno pravno obliko gre (npr. pravna oseba, podpogodbeno razmerje z izvajalcem, predstavništvo, zastopnik). / Sites (in Slovenia and/or foreign) where inspection activities are performed for applied accreditation scope and/or supporting activities/processes (e.g. human resources, purchasing, acceptance of orders, IT). Please state the sites regardless of their legal form (e.g. legal entity, sub-contractual relationship, representation, agency).

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| Naziv in naslov lokacije /  Name and address of site | Aktivnosti kontrole in podporne dejavnosti/procesi, ki se jih tam izvaja / Inspection activities and supporting activities/processes carried out there |
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## Ali se za katero od vaših strank/naročnikov izvaja aktivnosti kontrole iz prijavljenega obsega akreditacije v tujini (npr. na lokaciji stranke/naročnika oziroma na terenu)? / *Is inspection activity from the applied accreditation scope carried out for any of your clients abroad (e.g. at the client's location or in the field)?*

ne / *no*

da / *yes*

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| Država, v kateri izvajate aktivnosti kontrole / Country in which you are carrying out inspection activities | Dejavnosti kontrole iz obsega akreditacije (zaporedne številke iz poglavja 9) / *Inspection activities from applied accreditation scope (consecutive numbers from chapter 9)* |
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# OPREMA / Equipment

Kratek opis najpomembnejše opreme, ki se uporablja pri izvajanju kontrole iz prijavljenega obsega akreditacije. / *A brief description of the most important equipment used in inspection activities from the scope applied for accreditation.*

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| Naziv opreme /  Name of equipment | Druge bistvene informacije (namen uporabe, ali gre za opremo, ki ni v lasti kontrolnega organa …) /  Other important data (the purpose of use, equipment not owned by the inspection body …) |
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# MEROSLOVNA SLEDLJIVOST / Traceability of measurement

Na kakšen način zagotavljate meroslovno sledljivost? / *How does the inspection body ensure measurement traceability?*

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Ali zagotavljate meroslovno sledljivost tudi z internimi kalibracijami (npr. meril dolžine, termometrov)? Za katere veličine oziroma vrste opreme? / Do you ensure measurement traceability with internal calibrations (e.g. length gauges, thermometers)? Of which quantities or equipment types?

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# PODPOGODBENIKI / Subcontractors

Ali kontrolni organ oddaja del kontrole (npr. preskušanje) drugemu organu? / *Does the inspection body subcontract (e.g. testing) to another body?*

ne / *no*

da / *yes*

Prosimo, da navedete, katere aktivnosti v postopku kontrole izvaja/jo vaši podpogodbeniki, kateri so vaši podpogodbeniki in kako ugotavljate njihovo usposobljenost. / *Please, list the activities that inspection body subcontract, your subcontractors and describe how does certification body verify subcontractor’s competence.*

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# PRIJAVLJEN OBSEG AKREDITACIJE / Scope applied for accreditation

**Navodila / Instructions**

Pri opredelitvi obsega upoštevajte določila dokumentov S14 – Obseg akreditacije in S14d3 – Obseg akreditacije pri kontroli. / *In specifying the scope, please observe the provisions of the documents S14 – Scope of accreditation and S14d3 – Scope of accreditation in inspection.*

V Tabeli 1 jasno in nedvoumno definirajte obseg želene akreditacije. Zgledujte se po obsegih že akreditiranih kontrolnih organov, dostopnih na / *In Table 1 below, clearly and unambiguously define the scope of the desired accreditation. Check the scopes of already accredited inspection bodies available at*:

[https://www.slo-akreditacija.si/?post\_type=lpacreditation&s=&podrocja[0]=5&order=Akreditacija\_DESC](https://www.slo-akreditacija.si/?post_type=lpacreditation&s=&podrocja%5b0%5d=5&order=Akreditacija_DESC).

Nad tabelo navedite **naziv in naslov organizacijske enote**. V primeru, ko se kontrola izvaja na več lokacijah (v Sloveniji ali v tujini) in/ali sedež organizacijske enote in lokacija izvajanja kontrole nista enaki, vpišite tudi lokacijo izvajanja kontrole. Za vsako organizacijsko enoto in lokacijo znotraj organizacijske enote uporabite ločeno tabelo. Tabelo kopirajte tolikokrat, kot je potrebno. / *Above the table, state the name and address of the organizational unit. If the inspection activity is performed at several locations (in Slovenia or abroad) and/or the address of the organizational unit and the location of the inspection activity are not the same, enter also the location of the inspection activity. Use a separate table for each organizational unit and location within the organizational unit. Make as many copies of the table as necessary.*

Če katere od prijavljenih postopkov kontrole izvajate **tudi v tujini**, prosimo, da obseg prijavljene akreditacije pripravite v dvojezični različici in angleški prevod besedila dodate v poševni pisavi. */ If you carry out any of inspection procedures also abroad, please add also the English translations of text and use italics format.*

**Obseg za namen priglasitve** opredelite v ločeni tabeli (glej primer v S14d3). / *Please define the scope of accreditation for notification purposes in separate table (see example in S14d3).*

V primerih, ko na področju (npr. akreditacija za namen priglasitve na področju dvigal) obstaja **shema akreditiranja,** jo navedite v prvi vrstici tabele, v ostalih tabelah pa to vrstico izbrišite. / *In cases where there exists an accreditation scheme in the field (e.g. accreditation for notification purposes in the field of lifts), state it in the first row of the table, and delete this row in other tables.*

V glavi vsake tabele opredelite, ali prijavljate **obseg fiksnega ali fleksibilnega tipa** (glej S14 d3). V primeru fleksibilnega obsega lahko kontrolni organ sam uvede manjše spremembe postopkov kontrole (npr. za prilagoditev novi izdaji normativnega dokumenta), ki ne posegajo v tehnike in principe kontrole. Podatke o trenutnem stanju izdaj vzdržuje kontrolni organ in jih javno objavlja. / *In the header of each table, specify whether you are applying for fixed or flexible type of scope (see S14 d3).* *In the case of flexible scope, the inspection body may introduce minor modifications to the inspection procedures (e.g. for adjustment to new editions of normative documents) which do not intervene with the inspection techniques and principles. Information on the current status of editions is maintained and publicly published by the inspection body.*

**Prvi stolpec:** napišite zaporedno številko. Številčenje nadaljujte skozi ves obseg. Če je potrebnih več tabel, nadaljujte številčenje iz prejšnje, ne začenjajte znova v vsaki tabeli s številko 1. / *Column 1: write the sequence number. Please use continuous numbering through the entire scope. If more tables are needed, continue numbering from the previous one, do not start again by number 1 in each table.*

**Drugi stolpec:** jasno in nedvoumno definirajte predmet kontrole, ki je lahko proizvod, proces ali storitev. / *Column 2: Clearly and unambiguously define an item of inspection which can be a product, a process or a service.*

**Tretji stolpec:** jasno in nedvoumno definirajte vrsto (tip) kontrole. Uporabljajte izraze, ki so določeni v normativnih dokumentih. V primeru dejavnosti priglašenega organa navedite tudi modul ugotavljanja skladnosti. / *Column 3: Clearly and unambiguously define an inspection type. Use the terms defined in normative documents. In case of activities as notification body, please state also the conformity assessment module.*

**Četrti stolpec:** jasno in nedvoumno navedite metode in postopke, po katerih se izvaja kontrola. To so lahko različni predpisi (npr. pravilniki, direktive, standardi …), ki se navedejo z originalnim naslovom in podnaslovom ter letnico izdaje, interni postopki z navedbo različice in/ali drugi normativni dokumenti. / *Column 4: Clearly and unambiguously state methods and procedures according to which inspection is carried out. These may be different legislative acts (e.g. rules, directives, standards…) indicated by the original title and subtitle and the year of issue, internal procedures indicating the version, and/or other normative documents.*

**Peti stolpec:** za vsako od navedenih področij kontrole v opombe vpišite morebitne omejitve v obsegu in druge za natančnejšo opredelitev obsega akreditacije pomembne podatke, kot npr. merilno področje, ali opravljate kontrolo na terenu, na začasnih lokacijah, v mobilni enoti. / *Column 5: For each inspection area stated in the scope, please enter in the notes any limitations to the scope and other important data relevant for precise definition of accreditation scope, such as measuring field, whether you perform inspection on site, at temporary locations or in a mobile unit.*

### Organizacijska enota, naslov / *Organizational unit, address*

Tabela / *Table*

Pri izpolnjevanju tabele se zgledujte po obsegih že akreditiranih kontrolnih organov, dostopnih na / *When completing the table, please see the scopes of already accredited inspection bodies available at*:

[https://www.slo-akreditacija.si/?post\_type=lpacreditation&s=&podrocja[0]=5&order=Akreditacija\_DESC](https://www.slo-akreditacija.si/?post_type=lpacreditation&s=&podrocja%5b0%5d=5&order=Akreditacija_DESC).

| \* Kontrola v skladu s shemo / *Inspection in accordance with scheme*: **oznaka dokumenta / *identification of document*** | | | | |
| --- | --- | --- | --- | --- |
| Tip obsega: **fiksni / fleksibilni (možnost uvajanja manjših sprememb metod) /** *Type of scope:* ***fixed / flexible (possibility of introducing minor modifications to the methods)*** | | | | |
| **Št.**  No. | **Predmet kontrole**  (proizvod, storitev, proces)  Item of inspection  (product, service, process) | **Vrsta kontrole**  Inspection type | **Metode in postopki**  (normativni dokumenti, interni postopki)  Methods and procedures  (normative documents, internal procedures) | **Opombe**  Notes |
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\* Izpolnite le v primeru, če shema obstaja, sicer vrstico izbrišite. / *Fill in only if the scheme exists, otherwise delete the line.*

# ŽELIMO, DA SA IZVEDE PREDOCENJEVANJE / *We want that SA performs pre-assessment*

DA / YES  NE / NO

**ŽELIMO, DA SA OCENJEVANJE ZA ŠIRITEV OBSEGA AKREDITACIJE IZVEDE IZVEN TERMINA REDNEGA NADZORA KOT IZREDNO OCENJEVANJE (to možnost lahko izkoristite le enkrat v akreditacijskem ciklu) / *We want that SA performs assessment for extension of accreditation scope outside the regular surveillance period as an extraordinary assessment (this option can be used only once in accreditation cycle)***

DA / YES  NE / NO

1. **IZJAVA / Statement**

**Izjavljamo, da smo seznanjeni z naslednjimi pogoji za izvedbo postopka akreditiranja in jih sprejemamo / We hereby declare that we are aware of and accepting the following conditions for the performance of accreditation procedure:**

* vzpostavljen in delujoč sistem vodenja kakovosti, ki omogoča izpolnjevanje vseh zahtev standarda SIST EN ISO/IEC 17020 / implemented and operational quality management system which fulfils all requirements of the standard SIST EN ISO/IEC 17020;
* sistem vodenja kakovosti dokumentiran v obsegu, ki ga zahteva standard SIST EN ISO/IEC 17020 / management system documented as required by the standard SIST EN ISO/IEC 17020;
* izvedena najmanj ena notranja presoja v celotnem obsegu in najmanj en vodstveni pregled, upoštevajoč zahteve standarda SIST EN ISO/IEC 17020 / *performed* at least one complete internal audit and at least one management review respecting all requirements of the standard SIST EN ISO/IEC 17020;
* izvajanje postopkov kontrole v celotnem obsegu, ki je naveden v tej prijavi / performance of inspections specified in the scope of accreditation applied for;
* izpolnjevanje zahtev za akreditacijo in obveznosti do SA v zvezi z akreditacijo / fulfilling the requirements for accreditation and other obligations to SA relating to accreditation.

**Poleg tega izjavljamo, da smo seznanjeni s splošnimi pogoji za izvedbo postopka akreditiranja, vezanimi na informacije in dostop do osebnih podatkov, ki so dostopni na spletni strani SA:** [**https://www.slo-akreditacija.si/o-nas/o-slovenski-akreditaciji/politika-varstva-osebnih-podatkov/**](https://www.slo-akreditacija.si/o-nas/o-slovenski-akreditaciji/politika-varstva-osebnih-podatkov/)**, in jih sprejemamo. / We in addition hereby declare that we are aware of and accepting the conditions for the performance of accreditation procedure regarding information and access to personal data, which are available at SA website:** [**https://www.slo-akreditacija.si/about-us/about-sa/personal-data-protection-policy-in-carrying-out-accreditation-procedures-2/?lang=en**](https://www.slo-akreditacija.si/about-us/about-sa/personal-data-protection-policy-in-carrying-out-accreditation-procedures-2/?lang=en)**.**

# PRILOGE / Attachments

**Ob prvi prijavi za akreditacijo** priložiti vsa navedena dokazila, v ostalih primerih pa le tista, ki so relevantna za prijavljeno širitev obsega: / *When first applying for accreditation attach all listed evidence, and in other cases only those that are relevant to the applied scope for extension*:

Potrdilo o nekaznovanosti pravne osebe oz. Potrdilo o nekaznovanosti fizične osebe, kadar gre za samostojnega podjetnika (za pridobitev se obrnite na Ministrstvo za pravosodje RS) (opomba: dokazila ne priložite, če spadate med državne organe) / Certificate of non-conviction for legal person or – in the case of sole trader – certificate of impunity of natural person (contact the Ministry of Justice of the Republic of Slovenia) (note: no certificate needed if you belong to state authority)

Izpisek iz evidence o pravnomočnih odločbah o prekrških, iz katerega izhaja, da niste bili pravnomočno spoznani za odgovorno za storitev prekrška, ki je v povezavi s področji dejavnosti, prijavljenimi za akreditacijo (za pridobitev se obrnite na Ministrstvo za pravosodje RS) / Extract from the Criminal Record to certify that the client has not been finally held liable for committing an offence related to the fields of activities applied for accreditation (contact the Ministry of Justice of the Republic of Slovenia)

Organizacijski diagram / Organizational chart

Izpis dejavnosti iz sodnega registra / Extract of activities from judicial record

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| --- | --- | --- |
| , |  |  |
| Kraj, datum  *Place, date* |  | Ime in podpis odgovorne osebe  *Name and signature of responsible person* |

Žig

*Stamp*