

## **FORM AD 2 – INSPECTION BODY REGISTRATION**

Objective: This form is to register an agency (company or organization), as well as to gather information and for monitoring purpose. This form does not indicate that a company is accredited under the Pusat Standard dan Akreditasi Brunei Darussalam.

### **AD 2: Inspection Body Registration**

| <b>Inspection Body Details</b> |  |                       |  |
|--------------------------------|--|-----------------------|--|
| Inspection Body Name           |  |                       |  |
| Accreditation Body:            |  | Accreditation Ref No: |  |

| <b>No.</b>                                                                                                                                                           | <b>Field of Inspection</b><br>(e.g. Product Design, Products (material or equipment), Installation, Plant, Premises, Processes, Services and Surveys) | <b>Type and range of Inspection</b><br>(e.g. In-services Inspection or Inspection of new products) | <b>Methods and Procedures</b><br>(e.g. EC Directives, Regulations, Standard Specs, Internal Procedures) |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|
|                                                                                                                                                                      |                                                                                                                                                       |                                                                                                    |                                                                                                         |
|                                                                                                                                                                      |                                                                                                                                                       |                                                                                                    |                                                                                                         |
| Is this application linked to an application to a local/ an overseas competent authority for the purposes of appointment as a notified body? Please provide details) |                                                                                                                                                       |                                                                                                    |                                                                                                         |
| If 'Yes' Then please provide details:                                                                                                                                |                                                                                                                                                       |                                                                                                    |                                                                                                         |

**For whom does the inspection body undertake inspection?**

Own or Parent Organisation

☐

Other Organisation

☐

## AD 2: Inspection Body Registration

What independence type, as defined in ISO/IEC 17020, do you consider your inspection body to be?

Type A ☐ Type B ☐ Type C ☐

Does your inspection body carry out any in-house calibration(s) of equipment used for any measurement activities?

Yes ☐ No ☐

*If 'Yes' please provide details below :*

| No. | MEASURED<br>QUANTITY/INSTRUMENT | REFERENCE STANDARD USED | PROCEDURE | PURPOSE (DETAILS OF<br>MEASUREMENT ACTIVITIES THAT<br>THIS SUPPORTS) |
|-----|---------------------------------|-------------------------|-----------|----------------------------------------------------------------------|
|     |                                 |                         |           |                                                                      |

### MULTI-SITE APPLICATION:

| SITE NO. | SITE LOCATION | ACTIVITIES PERFORMED AT THIS SITE | CONTACT DETAILS |
|----------|---------------|-----------------------------------|-----------------|
|          |               |                                   |                 |

## AD 2: Inspection Body Registration

**Note:**

- a) Each page of this form should be initialed or signed.
- b) The last page of this form should include a signature with the organisation/company stamp.

**DECLARATION:**

- I declare that I am authorized, on behalf of the company, to submit this application, and that the information contained herein is both correct and accurate to best of my knowledge and belief.

Signature/Chop:

Name:

Designation:

Date:

**PLEASE SUBMIT TO:**

Email: [accreditation@mofe.gov.bn](mailto:accreditation@mofe.gov.bn)

Tel No: 2333964

**Accreditation Unit**

**Pusat Standard dan Akreditasi Brunei Darussalam**

Ministry of Economy, Trade and Industry

Block 19, Simpang 32-15

Bangunan Flat Kerajaan, Kampong Anggerek Desa

Mukim Berakas 'A' BB 3713

Negara Brunei Darussalam