LCIE C 00-196
June 2015

QUALITY MANAGEMENT SYSTEM CERTIFICATION

in accordance with ISO 9001 standard

CERTIFICATION REGULATIONS
Edition 10

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This document is a translation of the French edition. In case of conflict, the French edition will prevail.
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TABLE OF CONTENTS

Page

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CERTIFICATION OF QUALITY MANAGEMENT SYSTEM of a company in accordance with ISO 9001 standard

CERTIFICATION REGULATIONS

This issue cancels and replaces the edition 9 dated November 2014.

Foreword

The Rules of Certification LCIE C 00-196 have been up-dated for considering mainly the following changes:

- *Alignment of requirements to other Certification Regulations of other similar schemes, typically for the Committee of Preservation of Impartiality.*
- *Withdrawal of Annexe 1 "Application Form", managed separately.*

1 Purpose and scope

The present Certification Regulations apply to companies that want to obtain and retain certification of compliance of their quality management systems with ISO 9001 standard by LCIE. The companies belong to one of the accredited domains of LCIE.

LCIE is a fully-owned subsidiary of the Bureau Veritas group. LCIE, by its Certification Department, is an impartial and independent Certification Body in the following fields:

- certification of quality management systems according to ISO 9001 standard,
- quality certification of electronic components (according to Certification Regulations LCIE C 00-190 for the NF electronic components mark NF011, and LCIE C 00-195 for the IECQ mark according to IECQ 03-x),
- certification of independent testing laboratories in the framework of electronic components (in accordance with IECQ 03-6 based on ISO/CEI 17025),
- Certification of processes according to IECQ Rules of Procedures, notably IECQ 03-5 (IECQ HSPM).

LCIE is accredited by COFRAC for the certification of the Quality Management System (ISO 9001) for companies belonging to the electrical, electronic domain (IAF/EA code 19) or other domain (IAD/EA codes 14, 17, 18), and product certification for products related to the NF Mark.

Within this framework, LCIE offers internationally recognised certification.

The present document is available on request at LCIE – Certification department secretariat and on LCIE Web site (www.lcie.fr). It is also sent to the companies applying for the certification. Up-dates are sent to each company certified for acceptation and consideration.

For the purpose of this document, LCIE France is designated as "Certification Body" or "CB".
Also, the terms "LCIE", "LCIE Bureau Veritas", "LCIE-SNQ" means "LCIE".

2 Certification reference standards

For the undated references, the latest issue of the reference document prevails (including the possible amendments).

- ISO 9001 : 2008 “Quality Management Systems – requirements”,
- Standard NF EN ISO/CEI 17021 : May 2011 “Conformity Assessment - Requirements for Bodies providing audit and certification of management systems”,
- The IAF MD1, MD2, MD3, MD4, MD5, MD10 mandatory documents,
- ISO 19011 standard “Guidelines for quality and/or environmental management systems auditing”, used in audit assessment and auditor qualification.
- XP ISO/CEI TS 17021-3 : December 2013 « Competence requirements for auditing and certification of quality management systems »

3 Use of the certificate

The holder may refer to its ISO 9001 certification granted by LCIE, provided that this corresponds to the specific characteristics of the certificate issued to him.

4 Procedure for obtaining ISO 9001 certification

The certification process is managed by the Certification Body (LCIE) up to the delivery of the certificate. The audit may be performed either by an auditor of the Certification Body or by a sub-contracting auditor duly qualified by the CB.

4.1 General Conditions

Before making an application, the applicant must ensure that the activity to be certified belongs to the electrical and electronic sector (code EAC 19), or other accredited domain of LCIE.

By his application, the applicant commits himself to:

- set up and maintain a Quality Management System in conformity with the ISO 9001 standard requirements, or equivalent,
- comply permanently to the certification requirements including control of changes required by the Certification Body,
- take any provision needed for
    1. conducting the assessment and the surveillance (in case maybe), including providing elements to be assessed like documents and records, access to equipment, sites, zones, personnel and sub-contractors of the client concerned,
    2. instructing the customer claims,
    3. accepting participation of observers in case maybe.
- use his certificate only for the scope and perimeter defined.

The applicant commits also to the following (cf. ISO/IEC 17021 : 2011 § 8.4.3):

- comply with the Certification Body requirements when he refers to the situation of his certification through his communication means, such as internet, brochures or advertisement, and any other documents,
- do not make false declaration concerning his certification,
- do not make improper use of any document of certification, in total or partial,
- cease immediately, in case of suspension or withdrawal, usage of the certificate, any communication referring to the statement of a certified system,
- modify any object of publicity in case of reduction of his perimeter of certification,
- do not let use the reference to the certification of his quality management system for letting supposed that a product or a process is approved by the certification body,
- do not let understand that the certification applies to any activities out of the perimeter of certification,

- do not use his certification in a manner which causes degradation of the reputation of the certification body and impacting the confidence the public has in him.

The program of certification includes an initial audit in two phases, some surveillance audits during the first and second year and a renewal audit during the third year before expiration of the certification. The cycle of 3 years begins with the decision of certification or renewal of the certification.

4.2 Application and File

4.2.1 Certification Application Form and Information relative to the company

The applicant must fill in an Application Form which shall specify
- the perimeter aimed for the certification,
- the general characteristics of the organism, including the name, address of list of the site(s) concerned with certification, significant aspects of its processes and operations, and any legal applicable obligation,
- the activities to be certified, the population of each site, the number of employees per shift,
- the information relative to the outsourced process which may have an impact on the management system,
- the ISO 9001 or other equivalent reference standard chosen by the company for the certification,
- any information relative to any individuals/companies having providing consultancy to the company in relation to the management system.

A representative of the company to be audited is designated to be the permanent interface with the Certification Body (this person maybe called "DMR", Designated Management Representative).

4.2.2 Case of Multi-site Organizations

As per IAF MD1, a multi-site organization is defined as an organization having an identified central function at which certain activities are planned, controlled and managed, and a network of offices or branch (sites) at which such activities are fully or partially carried out.

The companies with multiple sites may be certified with a unique certificate for all the sites, titled “Company certificate” when some required conditions listed hereafter apply.

a) All sites shall have a legal or contractual link with the central office of the organization and be subjected to a common management system
b) The common Quality Management System must be settled, managed in a central manner and be audited internally periodically, on all sites, according to the ISO 9001 requirements,
c) The Quality Management System must comply with ISO 9001 requirements,
d) The activities which can be centralised includes the following:
    1- The document system and management of the system changes,
    2- The management review of the QMS,
    3- The customer claims,
    4- Planning of quality and continuous improvement actions,
    5- Planning of internal audits and measurement of their results,
    6- Evaluation of Corrective Actions Efficiency,

    And, according to the structure of the company:

    7- Design activities,
    8- Supplier qualification
    9- Evaluation of Training needs
    10- Customer order review (out of local order acceptance.

In order to audit the Quality Management System totally, it is needed to audit each site.

The number of man-days per site, including the central office, shall be calculated for each site using the calculation man-days table of IAF MD5. Reduction can apply to take into account the clauses that are not relevant to the central office or local site(s). Reasons for justification shall be documented.

The total time spent is the total sum of the time spent at each site plus the central office and should never be less than that which would have been calculated for the size and complexity of the operation if all the work has been undertaken at a single site (all employees on 1 site).

For companies having multiple offices doing the same operations, like the commercial agencies of distributors, when they have all the same structure and the same activity, sampling of sites may be decided by the Certification Body according to the IAF MD1 rules.

The Application for Certification prepared by the applicant must explicit the company situation in detail, for allowing a clear understanding of the CB.

4.2.3 Case of Certification Transfer

As per IAF MD2, transfer of Certification already get from another Certification Body (CB) is possible. The previous certification must not be suspended nor withdrawn by the previous CB; the non conformities detected by the previous CB must be closed.

The certification Application must explicit the company situation as far as possible.

The review of the Application corresponds to a review of Pre-Transfer (document review, including a visit on the client site normally). This documented review includes:
- Confirmation that the certification perimeter relates to the accreditation of LCIE,
- Reason of transfer,
- Confirmation that the site(s) belong(s) an accredited valid certification in terms of authenticity, duration and scope of activity,
- The previous audit reports and the cleared non conformities,
- The claims received and corrective actions implemented,
- The status in the current certification cycle,
- The commitment of the top management towards the administrative authorities for the regulatory requirements.

With this information, the Certification Officer can verify that:
- The certification perimeter is the same as before,
- No non-conformity found during the previous cycle is still in process
- The management provisions for the customer complaints are efficient,

The Certification Officer decides about consequences to be given in case of unsatisfactory element.

From this pre-transfer review, the certification body determines the competencies needed for the audit team and the appropriate steps of the certification process.
The transfer is done after an on-site audit normally (renewal or specific audit).

The audit file is assessed and a decision is taken, like for an initial certification.

4.3 Review of the Application

Before planning the audit, the Certification Body shall make a review of the application and of the information provided, in order to be sure that:
- information provided are sufficient to proceed with the audit,
- the requirements relative to the certification are clearly defined and documented,
- any discrepancy in understanding between the certification body and the candidate organism a been solved,
- the certification body has competency and capacity to perform the certification mission,
- the perimeter, the site(s), the duration required to perform the audits, and any other points having an impact on the certification tasks are taken into account,
- the records of the justification of the decision to perform the audit are kept.

On the basis of this review, the Certification Body determines
- The duration of the audit taking into account the number of people in each site to be certified, nature and complexity of activities, the multi-site situation in case maybe (see §4.2.2) in respect of the IAF MD5 requirements,
- the needed competences for the audit team.

All shifts must be audited. Otherwise, it must be documented and justified.

The Certification Body decides upon the audit team according to the competence and availability of the auditors.
The review of the application is prepared by a Reviewer and validated by the auditor in charge of the file.

4.4 Tender, Certification Contract and Order

4.4.0 Tender and Order

- A commercial and technical **"offer of service"** is drawn up and submitted to the company. Once agreed, it is asked to place an order for invoicing purposes.

- A **"Certification Contract"** is addressed to the company for fixing the mutual obligations of the Parties. The Contract is signed by both Parties.

- The Customer Service is charged of making the Contract review to confirm the order corresponds to the offer. In case of gap, he make the necessary action to the client for solving the issue.

- The certification process may start only at reception of order and contractual documents for certification (contract).

Before each audit, the lead auditor verifies the conditions of the audit with the nominated company representative of the client, takes the offer and the order into consideration and confirms that the conditions of the audit correspond to the offer/order. In case of significant gap, he requires emission of an amendment to the offer.

4.5 Initial Certification Audit

4.5.1 Initial Audit phase 1

The audit step 1 is done for evaluating the Quality Management System to be audited:

a) Audit the documentation of the Management System,
b) Evaluate the place and specific conditions of the client site, and create opportunity for exchange of information with the personnel of the client in order to determine level of preparation for the audit step 2,
c) 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) collect necessary information regarding the scope of the management system, processes and location(s) of the client, and related statutory and regulatory aspects and compliance (e.g. quality, environmental, legal aspects of the client's operation, associated risks, etc.);
e) review the allocation of resources for stage 2 audit and agree with the client on the details of the stage 2 audit;
f) 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) 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 audit.

The stage 1 audit is performed at least partially on the site(s) to be certified, for evaluating the reality of the QMS implementation and complete the document review. A check-List may be used for collecting data of the company. This audit determines the possible corrections or complements to be done to the QMS before the stage 2 audit of certification.

The results of the stage 1 audit are documented and communicated to the client, including identification of any problem likely to be classified like nonconformity during stage 2.

For determining interval between stage 1 and stage 2, it is needed to consider the time for the client for solving the issues identified during the stage 1 audit.
The conditions scheduled for the Stage 2 may be reviewed (tender).

4.5.2 Initial Audit Stage 2

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

- Preparation of the stage 2 audit:

In the case of an Initial audit, the Lead Auditor:

- get the elements of the file defining the applicable reference standard and the scope of the audit,
- determine if the audit is achievable by examining the appropriate documents of the QMS of the applicant. In case maybe, he may ask for complementary documents,
- establishes the planning of the audit with the applicant according to the duration of the audit
- The audit planning and the audit team are communicated to the company, at least 2 weeks before the starting of the audit,
- A Customer Satisfaction Questionnaire relative to the auditor mission is sent to the company, either with the audit planning of with the audit report, to be returned to the LCIE, Quality department.

- Carrying out the audit
  - The audit is carried out according to the requirements of ISO/IEC 17021. It aims to collect information and proofs of conformity regarding all the requirements of the applicable reference standards, notably regarding surveillance, measurement, review report and performance review of the QMS in relation to the objectives of the organism.
  - The opening meeting is a formal one, and the participants are registered,
  - All the sections of the ISO 9001 standard are taken into account.
  - In case of discrepancies to the requirements (non-conformances), a Corrective Action Request is drawn up, indicating the requirements which are not respected, and the non-conformity observed.
  - The non-conformity(is) is/are communicated to the auditee and the CAR (s) is /are provided at the end of the audit allowing the auditee to complete with the corrective actions he decides to implement to solve the non-conformity reported.
  - The audit is summarised at the closure meeting and the participants are registered. Presence of the Top Management or his representative is required.

4.6 Audit conclusion

- An audit report is drawn up, incorporating the Corrective Action Requests issued during the audit and completed by the audited company with the corresponding corrective action. The report is delivered to the audited company.
- 90 days are allowed to the auditee for returning the Corrective Action Requests to the Lead Auditor, and for providing evidence that the corrective actions are implemented. Beyond this time, the audit should to be performed again.
- A proposal of certification is prepared by the lead auditor.

4.7 Certification decision:

- The information transmitted by the audit team is examined by a competent Reviewer having not participated to the audit. Those information concerns at least the following:

- The audit report,
- Observations relative to the non-conformities and corrective actions undertaken by the client organism,
- Confirmation of the information provided to the certification body and used for the application review
- Proposal relative to the decision to grant or not the certification, with any reserves or remarks,
- and any complementary document useful for making the decision of certification.

- The decision of certification is never made by the personnel involved in the audit.
- The Reviewer recommends a certification decision.
- From the elements gathered by the audit, the Director for Certification or his delegate designated in CERT-DIR « Delegation of signature », takes one of the following decision:
  - certification is granted,
  - decision is adjourned with request of a complement of action, like a complementary audit,
  - certification is refused.

- In case of positive decision, the certificate is issued and sent to the audited company.
- In case of adjournment or refusal, a motivated letter is sent to the applicant.

4.8 Surveillance of the Certification

4.8.1 Surveillance Audit

- The surveillance activities are made of surveillance audits mainly. Other activities may include surveys of the certified organism, review of customer declaration regarding its operations, request made to the client to get documents or records, or other surveillance methods.

- Surveillance audits are held regularly to ensure that the quality system still complies with the requirements of the ISO 9001 standard.
- The surveillance audits are prepared, performed and concluded in the same way as for the initial audit and the certification decision as well.
- The audit conditions are verified before starting each audit.
- The program of the surveillance audit includes at least the following:
  - Internal audits and management review,
  - Review of the corrective actions implemented according to the non-conformities identified during the previous audit,
  - Treatment of complaints,
  - Efficiency of the QMS regarding the objectives,
  - Statement regarding the continuous improvement actions,
  - Control of the daily operations,
  - Review of the any changes impacting the QMS,
  - Usage of logos and marks, and any reference to the certification.

4.8.2 Frequency of the surveillance audits

- The surveillance audits shall be scheduled once a year at least. The date of the first surveillance audit following the initial certification shall be fixed in 12 months maximum after the last day of the audit step 2.

- Further the first year of certification, on justification from the company, and acceptance of the Director for Certification, and under reserve of respecting the date for the renewal audit (see 4.9) flexibility of -2 months / +4 months maximum is accepted around the target date of the audit, without change of the target dates for the following years (the target date stays unchanged all along the years, except specific events independent of the flexibility). Exceptional circumstances may be taken into consideration and lead to a concession by the Director of Certification. In any case, this concession may last more than 6 months.

- The Renewal audit is organized at the end of the certification cycle of 3 years, in such a manner the corrective actions are closed and the decision for certification may be taken before expiration of the current cycle, in such manner the cycles continue without interruption.

Certification must be suspended in case of non-respect of audit dates at the target dates required (see chapter « Suspension/Withdrawal/Reduction of scope »).

4.8.3 Decision for maintenance of the certification

The information transmitted by the audit team is examined by a Review Committee made of competent people having not participated to the audit. Information The Review Committee recommends a certification decision, and the Director for Certification takes one of the following decisions:

- maintenance of the certification,
- adjournment of the decision and request for a complementary action of evaluation,
- maintenance is refused and request for suspension or withdrawal or reduction of scope.

In any case, a motivated letter is sent to the client and complementary actions are undertaken.

4.9 Renewal of the certification

4.9.1 Planning of the renewal audit

A renewal audit is planned and performed for evaluating the continuity of conformity to all the ISO 9001 clauses requirements, and also evaluating efficiency of the global QMS, pertinence and permanent applicability for the perimeter of certification.

The renewal audit concerns the performance review of the QMS over the certification period and includes review of the previous surveillance audit reports.

When significant changes occurred for the QMS, the company or the context of operation, the renewal audit activity may require to performing again an audit phase 1.

In the case the certification covers several sites the renewal audit is planned for assuring that on site audits cover the sites sufficiently to provide confidence in the certification.

4.9.2 Application for Renewal of the Certification and Revue

Before each Renewal audit, an Application Form is addressed to the company for confirming conditions of the coming Renewal audit (number of people, activity and scope of certification, changes, etc.)

Like for the initial audit, analysis of the Application for Renewal is the basis for the commercial Offer for the new cycle of certification. The client is invited to place an order for confirming his acceptance of the service to be done.

4.9.3 Scheduling of the Renewal audit

Scheduling of the Renewal audit must be done for having no interruption of the certification.

It is organized 3 months before expiry of the current certificate, approximately.

When the client certified has not allowed realization of the renewal audits according to the frequency required, the certification body must suspend the certification. (See chapter « Suspension/withdrawal/Reduction of scope »).

Clearing of the suspension may lead the LCIE to take one of the following decisions:

- restart the normal course of the certification,
- reduce the date of expiry of the new certificate, in order to be in line with the previous cycle,

- require a complement audit (before a decision of certification) or a supplement audit (after the decision of certification),
- require enforcement of the surveillance audits,
- perform a complete initial audit.

When the renewal audit is performed before the expiry date of the previous certificate, but the treatment of the corrective actions leads to pass over this date, the lead auditor may propose emission of a temporary certificate for 3 months if he has confidence in the action plan received from the company before the expiry date. The final certificate is issued when the decision is taken on the whole file closing the NCs.

4.9.4 On site Audit

The renewal audit implies the following points:
- Efficiency of the QMS in its totality, regarding internal or external changes, its pertinence and applicability for the perimeter of the certification,
- Proof of commitment to maintain and improve the QMS in order to increase the global performances,
- Verification that the operations in the QMS contribute to reaching the objectives fixed in the quality policy of the audited company,

The non-conformities identified are documented onto non conformity sheets. The audited company has 90 days maximum for implementing the corrective actions needed to solve the non-conformities.

4.9.5 Decision for renewing the certification

The decision for renewing the certification is taken considering the results of the renewal audit, the results of the review of the QMS over the period of certification, and complaints received from users of the certification.

4.10 Particular audits

4.10.1 Extension of the perimeter of certification

In case of request for extension of the certification perimeter already granted, review of the application shall determine any audit activity needed for deciding or not to grant the extension. This extension may be made during a surveillance audit.

4.10.2 Audit with short notice

It may be needed to plan an audit with short notice, in order to instruct a complaint or following changes or to make a follow-up of suspended customers.
In this case, the audit date is fixed by common agreement with the company, taking care to the audit team designation which cannot be refused by the audited company.
This audit is concluded by an audit report like another audit. The corresponding decision is taken in the current conditions of the Certification Body (as initial, surveillance, renewal).

4.11 Certification by equivalence

A company already granted with IECQ (IECQ-CECC) certification by the LCIE may obtain certification according to ISO 9001 standard directly, since the IECQ (IECQ-CECC) reference documents IECQ “IECQ 03-1, 03-2” are based on ISO 9001 with additional requirements.

The company should apply to the LCIE, which will analyse the application, update the file and print the certificate of compliance of the quality management system (QMS) with the chosen standard.

5 Commitment of the applicant

The applicant commits to maintain and improve its quality management system in accordance with the ISO 9001 requirements.
The certificate holder must keep a record of all complaints relative to its quality management system. This record must be produced to the LCIE’s auditor during audits.

6 Organisations responsible for the ISO 9001 certification and follow-up of certification

This chapter describes the different parties implies in the Certification process.

6.1 Laboratoire Central des Industries Electriques (LCIE)

The LCIE, Certification department, is responsible for applying the present Certification Regulations and for all decisions made in the frame of them.

It is responsible for the following operations:

a) drawing up and updating the Certification Regulations defining the procedures for assessing and monitoring compliance with the standard, notably the requirements concerning the manufacturer's management of its quality system,
distributing amended Certification Regulations to companies already certified so that they can apply the new requirements where applicable,

b) investigating applications for granting, maintaining, extending or reducing certification, plus partial or total suspensions and withdrawals, for all or part of the scope of certification of the company concerned,

c) drawing up the Certification Contract with the company concerned,

d) performing the initial and surveillance audits for the certification of the company concerned,

e) issuing the certificates,

f) updating and publishing the list of certified companies,

g) secretariat of the Certification Committee (see 6.3),

h) supervising the financial situation of the certification activity.

6.2 The Certification Committee

The « Comité de Direction Certification » of LCIE plays the role and functions of Certification Committee.

Note: Mission, composition and mode of operation of the Certification Management Committee of LCIE are detailed in the internal procedure CERT DIR CDC (edition in force).
Information set forth below is an abstract only.

The Certification Management Committee has the following functions, relative to the certifications delivered by the LCIE:

- On a strategic level, and of a general nature:
  - It formulates principles of actions concerning the operation of certification,
  - It supervises the application of the policy defined, including the promotional actions of certifications,
  - It supervises the financial situation.
- Moreover, it is the Committee for preservation of Impartiality and authority of recourse for certifications delivered by LCIE.

The Certification Management Committee is formed by three colleges:

A- "Manufacturers"
B- "Users" including representatives of final users, installers, operators, etc.
C- "Others" including representatives of Public Authorities, Standard institution, the LCIE.

The LCIE ensures the secretary charges of the Certification Management Committee.

6.3 Resources

6.3.1 Internal resources

The auditors in charge of Certification operations have qualifications, competencies and experience in the audited field, according to the requirements of NF EN ISO/CEI 17021 : May 2011 and XP ISO/CEI TS 17021-3 : December 2013. They are approved by the LCIE.
They commit to respect a code of ethics with respect to confidentiality, potential conflict of interest and methodology rules.

6.3.2 External resources

LCIE assumes the full responsibility of all the certification operations.
LCIE may sub-contract some certification operations, like realization of audits. In this case, competence criteria and qualification of external auditors follow the same rules as for the internal auditors, and are controlled in the same manner.
Missions are controlled by contract, including impartiality, confidentiality, and absence of conflict of interest.
In case of sub-contracting the client is informed.

6.5 Impartiality

LCIE manages its activity if strict impartiality relatively to the applicants.

Personnel engaged in the certification process are under contract with LCIE, and have no subordination with the client companies.
The Certification Management Committee is the Committee for the Preservation of Impartiality and in this aspect, performs an annual review of impartiality of processes, assessments, reviews and decision taking for certification which are proper to LCIE in the frame of QMS and Product certifications.

6.6 Confidentiality

All these members are committed to the professional secrecy.
The members must guarantee the protection of the documents which are entrusted to them against duplication and the unauthorized diffusion.

The information data relative to the client which are made publicly available are those from the certificate.
Other information is considered as confidential.

However, any information data of the certification file are accessible to the Accreditation Body (i.e. COFRAC) or Peer Assessment bodies, which are themselves committed by confidentiality.
Confidentiality may also be waived according to a written agreement given by the company.

7 Appeals and recourse

In case of dispute for any reason, the requestor has 15 working days deadline after notification of a decision or knowing about the contested situation for submitting his observations by writing to the Director of Certification.

The appeals and recourses are not suspensive.

If the contestation cannot be resolved kindly, the litigation is transmitted to the Certification Committee of LCIE which makes the final decision.

Information of end of treatment of the appeal and the decision are communicated to the company.

People implied in the process of treatment of appeals are different from those having performed the audits and taken the decision of certification.

Appeals are recorded and managed according to the corresponding applicable general procedure of LCIE. The appropriate corrective actions are also managed according to this procedure.

Notes
The application of the present Certification rules is subjected to the French law; the unresolved disagreements or litigations may be carried in justice to the courts of Paris, only qualified.

8 CLAIMS AND COMPLAINTS

Two categories of calims and complaints may be defined:
- From a Tiers against a certified company
- From a certified client to a decision taken by LCIE

In all case, claims and complaints are recorded and managed according to the corresponding applicable general procedure of LCIE. The appropriate corrective actions are also managed according to this procedure.

a) When the claim concerns a certified company, the client is notified in due time and the claim is examined regarding efficiency of the QMS of this client.
b) When the claim concerns an action taken by LCIE, instruction of the claim is conducted under the Quality department control, according to theLCIE General Procedure “Treatment of Claims, Appeals and Complaints”.

The claimer is acknowledged about reception and consideration of his claim, and about progress and completion as well.

The decision concerning the claim is taken by a person being not involved in the subject of the claim. In general, this person is the Quality Director of LCIE.

The LCIE, the customer and the claimer decide all together if the object of the claim and its solution may be made publicly available, and how far it is.

In the case of a claim issued by a Tiers against a certified client, LCIE shall charge costs related to the claim instruction to the certified client, when the claim is justified by by the instruction led by LCIE.

9 Procedure to be followed by the holder in the event of changes affecting compliance of the Management System with ISO 9001

Holder of ISO 9001 certification must notify the LCIE without delay in writing of any change in their quality management systems that may have an effect on the certification obtained, in the legal corporate status or any change of company name as well. In the event of merger, liquidation or acquisition of a holder, its right to refer to ISO 9001 certification is cancelled immediately and the certificate is withdrawn.
The LCIE-SNQ reserves the right to check that any changes made do not compromise existing certification.

Changes may concern the following:
- The legal or commercial status, its owners or the organization
- The organization and management (i.e. key people such as managers, decision-makers or technicians),
- Name and address of the person to be contacted and the main sites,
- The perimeter of operations made in the frame of the management system certified,
- The important changes made to the Quality Management System and to the processes.

10 CERTIFICATES, VALIDITY AND RENEWAL

10.1 Certificate

The template is a LCIE certificate stating compliance with ISO 9001.

- The date of issue of the certificate cannot be before the date of decision of certification.
- Certificates and other certification documents may be communicated but only in full.
- The Certification Body shall control Certificates, Licenses and Marks of Conformity as specified in the certification program, concerning property, usage, display, any means used for communicating status of QMS and product.

- The registration number is allocated as follows:
  196 -YY-XXX 196: certification according to the present Certification Regulations, where
  YY: year of issue.
  XXX: chronological number in the year

10.2 Validity period

The effective date of the certificate is put on it, and the expiration date as well.
The system and product certificates are valid for 3 years, in general.
The certificate remains valid, as long as the surveillance by the surveillance audits is satisfactory.
Otherwise, it may be suspended or cancelled.

10.3 Renewal

See chapter 4.9.

11 SUSPENSION / WITHDRAWAL/ REDUCTION OF SCOPE OF CERTIFICATION

The **suspension** of the certification may be taken

- either by the company which can decide it. The request is managed by the Certification manager and a notification of withdrawal is sent to the company.
- or by the Certification Body in case of serious failure of the company to its commitment to maintain the conditions of certification, and possibly after recall of the Certification Body remained without effect, notably when
  - the QMS does not respect the certification requirements critically, including the requirement for efficiency of the QMS,
  - the customer has not allowed the realization of the surveillance or renewal audits according to the frequency required,
  - It can also occur if the company does not pay the invoices duly emitted for covering the charges of the certification.
  - Refusal to access without justification accepted by LCIE to areas included in the scope of certification,
  - Company does not pay invoices corresponding to the certification services.

The certification body verified the satisfactory conditions before closing the suspension.

Withdrawal of certification may be done

- On voluntary request of the company to stop the certification,
- After a period of suspension having not allowed to revalidate the certification,
- In case of serious and repeated infringement to the rules, notably in solving issues in the time fixed by the certification body,
- Cease of the activity certified.

Reduction of the scope of certification
When the company has seriously and repeatedly infringed the rules for certain requirements of the scope certification the LCIE must reduce the scope of certification for excluding the elements which do not comply with the rules. Such reduction of scope must be conforming to the standard requirements used for the certification.

The certification shall be suspended for non-respect of the dates of audit at the target dates required.
The suspension may only be cleared by doing the planned audit.
Suspension is pronounced for 6 months only. An extension of 6 other months may be decided exceptionally, on justified decision of the Director for Certification. Beyond, certification is withdrawn and the cycle has to restart with an Initial audit.

A suspension not cleared in the required time leads to the withdrawal of the certification.

In case of suspension or withdrawal, the holder of the certificate commits to cease any publicity relative to his status of certified company and to return the certificate without delay to the certification body which has granted it.

Any wrong reference to the system of certification and any deceptive usage of the certificates or marks allow the Certification Body to treat this failure as an infringement to the Rules of Certification. The actions are decided by the Director of Certification according to the gravity of the situation, which can be a formal notice or taking the case to court.

On a simple of a third, the LCIE is require to communicating the status of the certification of a customer, as valid, suspended, withdrawn or reduced.

12 IMPROPER USE OF CERTIFICATE GRANTED BY LCIE

Wrong references to the certification program or misleading use of licenses, certificates, trademarks or any other device that a product is certified, in the documentation or other advertising tools must be corrected by appropriate action

The improper use of the certification granted by LCIE, the withdrawal request is documented by the Certification Manager, and the decision is taken by the Director for Certification. The certificate is withdrawn immediately and the offender is notified for stopping and solving the improper situation.

13 RECORDS RELATIVE TO THE REQUESTORS AND TO THE CUSTOMERS

The records relative to the QMS certification activity are kept by LCIE, according to the relevant applicable general procedure, and respecting the confidentiality rules.

The records include:

- Information relative to the application, review of application and audit reports,
- Certification contract
- In case of multi-site certification, the method used for the sampling,
- Definition of the time allocated to the auditors,
- Verification of the Corrective Actions,
- Records of the Claims and appeals, including any relevant corrective action,
- Minutes of Certification Committee meetings
- Documentation relative to the decisions taken for the certification,
- Certification documents, including those relative to the perimeter of certification,
- Records relative to the competency and the qualification of the auditors.

Records are kept at least for the current cycle and the previous cycle.

14 FINANCIAL TERMS

The company undertakes to pay all dues relative to certification. The LCIE will be entitled to terminate the certification procedure if any such dues are not paid.

Certification expenses include administrative expenses, the cost of drawing up certificates and audit expenses (which depend on the number of audit days determined according to the IAF MD1 to MD5 documents.
Travel expenses may be included in overall certification expenses or presented separately.

15 CHANGE OF ACCREDITATION AND CERTIFICATION RULES

In case of changes, and if those changes impact the current contracts, LCIE will inform its clients of the methods linked to the changes.
The maintenance of existing certificates shall be dependent of the respect of transition methods imposed by the Rules.

16 APPROVAL / REVISION

The present Certification Regulations, and its revisions, are submitted to the Certification Director and the Certification Committee for getting his opinion, and then approved by the LCIE General Director.