



**VINÇOTTE International Algérie s.p.a**

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**MANAGEMENT SYSTEM CERTIFICATION**

**GENERAL REGULATIONS**

## 1. SCOPE

The current General Regulations define the rules applied to the certification and registration of various items such as quality management systems, safety management systems, environmental management systems and food safety management systems operated by Organizations for the supply of goods or services. The general term "management system" will be used.

They also apply when the assessment of the management system is done in combination with the specific assessment requested by some directives of which AIB-VINCOTTE International has been notified of national normative documents.

## 2. DEFINITIONS

The definition of the terms used in the current document complies with the ISO 9000:2005 - "Quality Management Systems - Fundamentals and vocabulary" and with the ISO 14001:2004: "Environmental Management System - Specifications with guidance for use".

Furthermore, the following definitions apply:

- ✓ Applicant: Organization seeking the certification and registration of its management systems system by **VINCOTTE International Algeria (VIAlgeria)**.
- ✓ Organization: under the current Regulations, the term "Organization" is used to designate an organization as defined in the ISO 9000:2005 standard (§3.3.1: group of people and facilities with an arrangement of responsibilities, authorities and relationship).
- ✓ Certified/Registered Organization: organization of which the management system has been certified by AIB-VINCOTTE International (AVI), **VINCOTTE International Algeria (VIAlgeria)** and to which a certificate of conformity has been issued by AIB-VINCOTTE International (AVI) and **VINCOTTE International Algeria (VIAlgeria)**..
- ✓ AVI: AIB-VINCOTTE International
- ✓ VIAlgeria : **VINCOTTE International Algeria**

## 3. REFERENCE STANDARDS - CERTIFICATION SCHEMES

The certification process applied is based upon a demonstrated compliance with the requirements of the latest version of the following normative international, European and national documents and of their European and national counterparts:

- ✓ ISO 9001: Quality management Systems - Requirements.



- ✓ ISO 14001: Environmental management systems - Specifications with guidance for use.
- ✓ OHSAS 18001: Occupational health and safety management systems - Specification.
- ✓ VCA/LSC: SHE Checklist Contractors.
- ✓ ISO 22000: Food safety management systems - Requirements for any organization in the food chain.

#### **4. GENERAL RULES**

- 4.1. The current General Regulations are the only ones applied by **VIAlergia** for certification and registration of management systems complying with the standards and normative documents listed in par. 3.
- 4.2. Any Organization seeking certification and registration of its management system by **VIAlergia** must abide by the General Regulations in force at the time the certification contract is concluded. Likewise, when the conformity assessment is carried out within a regulatory framework, any applicable regulatory requirements are in force in compliance with the calendar set by the law.
- 4.3. When the General Regulations are revised, the Organizations concerned may choose either to adopt the revised version or the one already applicable to them. This option is available until the next (re)certification audit.  
An exception to this is when the General Regulations have to be adapted as a result of a change to the accreditation rules.
- 4.4. The requirements of the current General Regulations supersede the corresponding requirements of the **VIAlergia** Standard Terms and Conditions of Supply of Services.

#### **5. CERTIFICATE CHARACTERISTICS**

##### **5.1. Scope**

The **VIAlergia** management system certificate attests that the management system implemented by a Certified Organization, according to a specific normative document, complies with the requirements of the reference document (standard, directive, sectoral specifications.)

##### **5.2. Period of validity**

The **VIAlergia** certificate is valid for a period of three years from the date of issue. The period may be adapted according to the limits of the period of validity of the reference normative document.

At the end of said period, **VIA**lgeria automatically applies a new procedure as defined in par. 7.12. of the current General Regulations.

### 5.3. Conditions of validity

The validity of an AVI certificate is maintained provided that the Certified Organization concerned continuously complies with the following requirements:

1. The certified management system is continuously maintained.
2. A controlled and updated copy of the management manual and/or documented procedures for the management system is maintained at the Organization's site, for review by **VIA**lgeria. The manual will be made available to **VIA**lgeria upon request.
3. Any significant modification to the management system is communicated to within one week after they have come into force.

Examples:

- ✓ Replacement of the Management Representative
- ✓ Significant changes within the organization, product categories or processes, addition of a new production line, addition of new activities, ...
- ✓ Stop or cessation of existing activities
- ✓ Significant increase or decrease in the number of employees
- ✓ Changes in the Organization's name or address
- ✓ New organizational structure
- ✓ Changes in shareholders
- ✓ Modification of the legal articles of association
- ✓ Bankruptcy
- ✓ Possible legal proceedings with respect to product safety or legality (in particular in the food industry)
- ✓ Product Recall

See also par. 8.1.

4. Any complaint raised by a third party about the quality of products or services covered by the certified management system, must be recorded and presented to **VIA**lgeria auditors at the beginning of each audit or upon request by the auditor.

Any official report concerning an aspect of the Organization's activities included in the scope of certification has to be presented to the **VIA**lgeria auditors at the beginning of

the audit or on request of the auditor.

5. The frequency of the surveillance audits is somewhere between 6 and 12 months. When the applicable normative documents specifically refer to a period for the surveillance audits (12 months, for example), the surveillance audits for other reference standards will be performed according to the same periodicity, unless there are conflicting requirements. An annual surveillance audit is a minimum necessary to ensure continued certification. In the case of joined certification (see par. 8.3), a yearly surveillance audit is not systematically required for all sites.
6. **VIAlgeria** is authorized to carry out any unscheduled audit at any time and without notice. If the assessment of the management system is carried out within a regular framework, this audit will be carried out when public authorities issue a reasoned complaint concerning the requirements of the applicable directive.
7. All financial obligations with regard to **VIAlgeria** are satisfied.

## **6. CERTIFICATION APPLICATION**

6.1. Any Organization interested in the certification of its management system may apply to **VIAlgeria**.

6.2. As soon as the Organization's intention is known, **VIAlgeria** will supply the Organization with a Preliminary Questionnaire. The interested Organizations should complete the questionnaire and return it to **VIAlgeria** together with appropriate documentation which provides a clear description of the Organization's organizational structure and the activit(y)(ies), product(s) or service(s) to be covered by the management system to be certified.

6.3. **VIAlgeria** may also send one of its employees to the interested Organization to collect the necessary data, to get a precise idea about the management system and to offer **VIAlgeria** services in detail.

6.4. As soon as the necessary information has been collected and reviewed, the Applicant and **VIAlgeria** agree the certification conditions, which are finalized in a quotation.

These conditions must define:

- ✓ the applicable certification scheme (see par. 3)
- ✓ the Applicant's entit(y)(ies) concerned
- ✓ the activit(y)(ies), product(s) or service(s) concerned and
- ✓ the audit-time based on the EA guidelines and the applicable certification model

At the Applicant's request, the certification process may include a pre-audit of the management system that is to be certified.

6.5. Ordering proceeds with the filling in and the signing of the applicable order forms by the Applicant. These forms are part of the **VIAlgeria** quotation.

The relevant order forms must be returned to **VIAlgeria**, if necessary attached to a standard order. The provisions of the purchase order must conform to the requirements of the **VIAlgeria** order forms, the current General Regulations and the requirements of the certification scheme.

## **7. CERTIFICATION PROCESS**

### **7.1. Registration**

**VIAlgeria** acknowledges all orders received.

Before the beginning of the documentation review, **VIAlgeria** communicates to the Applicant the names of the auditors who will conduct the certification services. The Applicant will be informed beforehand if there is any change to the assigned auditors.

The Applicant may refuse the participation of an auditor, providing such refusal is made in writing (including justification) and not less than four weeks before the beginning of the certification process. If the Applicant is unable to accept any of the auditors proposed by AVI, the certification order is considered to be void. **VIAlgeria** will inform the Applicant of this decision in writing.

Requirement of auditor impartiality: an auditor may not be assigned to and participate in the certification process if he/she has provided consulting or internal audit services to the Organization concerned within the last 2 years.

### **7.2. Preparation of the audit and review of the Management System documentation**

The management system has been implemented for at least 3 months so that significant evidence will be available.

The purpose of the preparation stage (called "stage 1" in many cases, according to the reference standard concerned) is to obtain the optimal preparation of the certification audit. According to the contract (depending on the reference standard, the size of the Organization, the scope of the audit, and the status of "initial certification" or "renewal"), this preparation takes the form of a preliminary visit on site (mostly), or will be executed at a distance using phone calls, faxes or e-mail.

It includes, as a general rule,

- Acquaintance with the Organization and its activities,
- the review of the system documentation (the auditors examine the manual and/or documented procedures to assess their compliance with the requirements of the

legislative reference document, accordingly the Applicant provides these documents to **VIA**Algeria, checking the level of preparedness for the certification audit in the light of the internal audits and management review reports, the establishment of an audit program and all necessary arrangements.

In principle, the Lead Auditor takes care of the preparation, but he may delegate this task to an Auditor of the audit team. This preliminary site visit mainly involves the Applicant's Quality, Safety or Environmental Management Head or Coordinator.

The auditor will communicate possible findings regarding non-conformities and needs for clarification to the Applicant. The Applicant is expected to take necessary actions and to submit to the auditor any modifications to the documentation that may resolve all non-conformities.

The certification audit will be scheduled after completion of the preparation visit/examination (normally 3 weeks) on a date allowing the Applicant to make any improvements that may be necessary.

### **7.3. Certification audit**

During the certification audit (called "stage 2" in many cases, according to the reference standard concerned), the appointed auditors verify that the management system described in the manual and in the supporting documented procedures is implemented effectively and in compliance with the requirements of the reference normative document. For this purpose, all documented procedures not yet reviewed are examined, the personnel involved in the management system are interviewed and the relevant management reports are thoroughly analyzed. In this phase, all levels of responsibility are involved and the audit is conducted on the Applicant's premises and other premises if these areas are relevant to the agreed scope of the audit.

In the event that a non-conformance or an indication of non-conformance towards a requirement of the regulation is found, the auditor will immediately inform the Applicant.

The auditor will assess if this non-conformity has to be covered by a Corrective Action Request. At the same time, the auditor will determine the major or minor character of the non-conformity. See par. 7.4. for a breakdown of the non-conformities.

For the duration of the audit, an office with sufficient seating and desks will be allocated to the audit team for their private meetings.

The audit process commences with an opening meeting involving the Applicant's management and the auditors. During the meeting, the participants introduce themselves and the details of the audit program are defined.

The audit itself begins with an interview of the highest level of responsibility involved

(usually the General Management).

It ends with a closing meeting with the Applicant's management and the auditors. During the closing meeting, the auditors will present their conclusions and issue any possible Corrective Action Requests.

If this is the case, the Applicant will respond to the Corrective Action Request by giving his position and action plan and a proposed completion date for each accepted Corrective Action Request. These responses will be sent by the Applicant to **VIA**Algeria at the earliest convenience but in any event not later than two weeks after the end of the audit.

#### 7.4. Corrective Action Requests

Non-conformities may be discovered during an audit. The non-conformities are classified as major or minor according to the following criteria:

✓ Major non-conformity:

Insufficient planning of the quality management system considering the objectives to be reached: insufficient, unsuitable or non-existent management plan or **lack of resources** to realize the established objectives (missing capability).

Lack of an essential QMS component: no evidence of documentation or of implementation of a **criterion** (or of a **significant part** of a criterion) of the reference standard.

When only a part of a system component is missing and **when the missing part has a critical influence** on the global operation of the system or on the delivered product, and this **to such an extent that the negative consequences of this failure are established in the past period.**

Evident / deliberate non-conformance with statutory or regulatory requirements.

**Breach of a statutory or regulatory requirement** which can call into question consumer safety (or the general interest).

In particular:

- Significant non-conformity with specific requirements of the applicable European directive when the certification is requested in this context.
- lack of an essential element of a license/permit, without introducing a regularization request, or a major breach of the conditions of the permit.

When a non-conformance is such that the **balance of the system and its global working is harmed** (in particular: when in such a situation, the improvement loop can not be demonstrated: from the identification of the needs and expectations of the clients to



the definition of relevant objectives, the surveillance and measurement of processes, the analysis of data, the management review and finally back to the definition of new objectives in a continual improvement perspective, etc.)

Accumulation of minor non-conformities which leads to a lack of confidence in the system's efficiency.

Too long a period for the resolution of the corrective action requests established by the auditors, in such that the Organization's capability to handle them may be in doubt.

✓ Minor non-conformity:

Any individual non-conformities which do not impair the operability of the Quality Management System, so far not mentioned above as major, for instance:

Incomplete documentation of an applicable criterion of the reference standard, on the condition that the missing documentation is not essential for the operation.

Incomplete implementation of an applicable criterion of the reference standard, on the condition that the missing implementation is not essential for the operation.

- Lack of evidence demonstrating the conformity with a criterion of the reference standard, if this does not harm confidence in the implementation of an essential element of the system.
- Incomplete license/permit (no essential item), non-compliance with the conditions of the license or a minor breach of relevant regulations.

Regarding the ISO 22000 standard, there are three levels of non-conformity

- ✓ Critical: there is a critical failure to comply with a food safety or legal issue.
- ✓ Major:
  - a) there is a substantial failure to meet the requirements of a statement of intent and/or
  - b) there is a failure to meet any clause of the Standard and/or
  - c) a situation, which would on the basis of available objective evidence raise significant doubt as to the conformity of the product being supplied.
- ✓ Minor:
  - a) where absolute compliance to the statement of intent has not been met, but on the basis of objective evidence the conformity of the product is not in doubt and/or
  - b) a clause has not been fully met, but on the basis of objective evidence the conformity of the product is not in doubt.



Note: The level of non-conformity assigned by an auditor against a requirement of the ISO 22000 International Standard is judgmental with respect to severity and risk and is based upon evidence and observations made during the audit.

### **7.5. Answers on Corrective Action Request**

Within a fortnight after the audit the Organization provides answers to the Requests for Corrective Measures along with an action plan. The auditor checks if the proposed actions are suitable for remedying the non-conformities discovered and their causes.

### **7.6. Audit report**

Following the audit, a confidential report is prepared by the auditors.

This report includes a brief description of the Applicant, the description of the products or services covered by the related management system, and the Corrective Action Requests with all of the non-conformities found.

The report also contains the Applicant's responses to the Corrective Action Requests.

The assessment of the mandatory and optional requests are featured for VCA/LSC

### **7.7 Certification file**

The Lead Auditor prepares the certification file. This file contains:

- ✓ the audit report,
- ✓ the recommendation of the audit team regarding the certification of the audited management system.

This certification file is presented to **VIA**Algeria Certification Committee.

### **7.8. Certification**

The certification file is reviewed by **VIA**Algeria Certification Committee.

The Certification Committee is composed of a Chairman, the Senior Auditors and the persons who have the right to veto during the certification process according to certain applicable normative documents. The Senior Auditor is a Lead Auditor having the benefit of a long experience and of a high esteem in his work field. For VCA/LSC , the Certification Committee at a minimum comprises the VCA coordinator.

The Certification Committee normally meets every week. At each meeting, the committee reviews all files that have been submitted. If necessary, the concerned auditor(s) is/are heard. In each case, the Certification Committee will decide either to grant a certificate and

under what conditions, or to refuse the certification and for what reason(s).

The granting of a certificate is refused when the Certification Committee judges that the management system implemented substantially derogates from the requirements of the reference normative document. This judgment is based upon the following factors:

- ✓ Evidence of critical / major non-conformities.
- ✓ Accumulation of minor non-conformities giving rise to a lack of confidence in the operability of the management system.
- ✓ Attitude of the Applicant towards the resolution of Corrective Action Requests.

The decision of the Certification Committee is communicated to the Applicant within three working days.

If awarded, the effective date of issuance of the certificate is the date of the meeting of the Certification Committee. The certificate is generally valid for 3 years, except for the limitations described in paragraph 15 (change in reference normative documents).

## 7.9 Registration and publication

As soon as a certificate is granted, a registration number is assigned. It is printed on the certificate.

The certificate is established in compliance with international requirements applicable to certification bodies and notified bodies. The certificate normally states:

- ✓ the reference normative document(s),
- ✓ the certified Organization's name and address,
- ✓ the scope of the certification (activities, products or services covered),
- ✓ the reference of the latest audit report, and
- ✓ the period of validity.

## 7.10 IQNet certification

The certificate issued by **VIA**Algeria is associated with an certificate, recognized by an International IQNet.

## 7.11 Certification surveillance

When a certificate is granted, a surveillance program is defined. Maintaining the certificate requires the execution of this surveillance program. The practical arrangements are defined when the order is made, based on the proposal made by **VIA**Algeria.

The surveillance audits include:

- ✓ the review of complaints and PVs (see above) received since the last review,
- ✓ dealing with the Corrective Action Requests issued during the previous audit(s),

- ✓ the review of internal audits and their scheduling,
- ✓ the review of parts of the management system,
- ✓ the review of the use of the certificate.

As a general rule, all elements of the reference normative document will be re-assessed during the validity period of the certificate.

In the case of a certification that includes the assessment of conformity with the regulatory requirements (European directives), the requirements established by law are applicable by rights.

Additional audits may be taken in a number of cases such as:

- ✓ a (some) major modification(s) of the certified management system;
- ✓ major non-conformities found during the scheduled surveillance audits,
- ✓ a number of repeated complaints raised by third parties.

These additional audits involve reviews of the documentation at **VIA**lgeria offices or audits at the Certified Organization's premises or at the site that so requires.

A report is written for all audits. These reports are sent to the (certified) Organization within one month after the receipt of acceptable actions in response to any requests for corrective measures.

The reports, together with the recommendations of the auditors, are presented to the Certification Committee during its next meeting. The Certification Committee decides whether to maintain, modify, suspend or withdraw the corresponding certificate or to impose additional conditions.

The conditions given in par. 7.8 also apply in this situation.

## 7.12. Renewal

The Applicant has to act promptly to submit a request for the renewal of the Applicants certification so there is no interruption to the validity of the certification. Three months before the end of the validity period of a given certificate, **VIA**lgeria issues a proposal for the renewal of the certificate.

The renewal process is comparable to the original certification. However:

- ✓ the program takes account of the knowledge gained of the management system to be re-assessed.
- ✓ the General Regulations in force at the date of the renewal proposal are applicable,

The renewal audit normally has to be performed before the expiration date. After this date, no temporary certificate is issued, but **VIA**lgeria can confirm by letter that the renewal process is ongoing, on condition that the new contract is signed and the audit dates are agreed.

If the audit cannot be programmed within 3 months after the expiration of the certificate, this audit will have to be considered as a "certification audit". A new tender has to be prepared and the audit time duration has to be reassessed.

The certificate is then issued for 3 years from the new decision date (after the audit) and a new registration number is allocated.

In the case of renewal of a certificate previously issued by another certification body, the "Renewal" status can be maintained after a "transfer procedure" similar to that described in paragraph 8.5.

## **8. SPECIFIC CASES**

In addition to the standard certification program described above, special cases can also be accommodated. The most common examples are detailed below.

### **8.1. Change to the certification**

A Certified Organization may request that modified activities be covered by its current certificate (see also par. 5.3.3.). This request may involve new products, services, activities or locations or another reference standard. See par. 6 for the application procedure.

In such a case, a specific program is developed, taking account of the nature of the request. In general, the program is limited to the Certified Organization's new developments.

In cases where the modification is granted, either the initial certificate is adapted to the new situation or it is withdrawn and replaced by a new certificate with new conditions, or an additional certificate is established. The certification surveillance program is modified accordingly.

### **8.2. Combined certification**

Upon request, **VIA**lgeria can at the same time certify the management system several reference standards and/or the compliance with a regulation/directive if this is practically possible.

The intention of combined certification is to examine the common parts for the different systems, thus saving time and resources if this is feasible.

The specific parts of every management system are examined separately in conformance with the requirements of the different reference standards (see par3).



### 8.3. Joined certification

Upon request, **VIA**lgeria may organize the certification of multiple Organizations belonging to the same group with or without the co-operation of its approved partners (IQNet network) and this on a worldwide basis.

In such a case, one single or multiple certificates are issued by **VIA**lgeria. Alternatively, some or all of the certificates may be issued by the concerned approved partners.

### 8.4. Transfer of certificates

On the request of a Certified Organization that wishes to transfer a certificate issued by another certified body to **VIA**lgeria, **VIA**lgeria can, on some conditions, issue a certificate based on previous audit results and take over the certification programs.

The original certificate and the last audit reports are examined and assessed, including the status of outstanding non-conformities, as well as complaints and actions taken.

The results of this Transfer Review are submitted to the Certification Commission, which issues (or not) a certificate, expiring on the same date as on the original certificate.

The Certification Commission decides about possible complementary actions (preliminary audit, etc.) and defines the new surveillance program (or confirms the original one).

The committee of certification will emit an expiring certificate the same day as the certificate of origin.

## **9. USE OF THE CERTIFICATE AND THE REGISTRATION LOGO**

The Certified Organization may:

- ✓ display, reproduce and issue copies of the certificate (additional originals are available from **VIA**lgeria),
- ✓ disclose only full copies of the audit reports to any third party,
- ✓ reproduce the **VIA**lgeria registration logo referring to the applicable normative document, but only on correspondence, promotional documentation, advertising documentation (including websites) and company vehicles. In this case, the following conditions apply.

- The registration logo will always be used together with the name of the certified Organization.

- The logo will never be associated with activities, products or services in such a way as to seem themselves to have been certified by **VIA**lgeria.

Therefore, the logo may not be applied on the product itself .



- The registration logo will only be related to activities, products or services covered by the relevant certificate. The Certified Organization will identify the activities, goods or services to which the certificate applies when the use of the logo might lead to confusion.
- The Certified Organization discontinues any use of the logo, judged unacceptable by **VIAlgeria** and any form of declaration relating to the authority of the Certified Organization for the use of the logo, which **VIAlgeria** might deem to be misleading.
- Upon termination of the certification for whatever reason (expiration of the validity period, withdrawal notified by **VIAlgeria**, etc.), the Certified Organization undertakes to discontinue all use of the logo immediately, and destroy stock of any material on which it appears.
- In the case of scope modification, the Certified Organization commits itself to use the modified certificate and/or logo.
- The registration logo can be printed in black or in blue (quadrachromatic 100% CYAN or trichromatic PANTONE/ Process blue).

## **10. CERTIFICATE WITHDRAWAL**

A certificate may be withdrawn by **VIAlgeria** only in the following cases:

- ✓ at the written request of the Certified Organization to **VIAlgeria**,
- ✓ when the Certified Organization does not abide by the applicable General Regulations,
- ✓ on recommendation of the Lead Auditor.

Only **VIAlgeria** Certification Committee has the authority to withdraw a certificate.

A withdrawal is notified to the Certified Organization concerned by registered mail and is signed by the president of the Certification Committee after which the original certificates have to be returned.

## **11. APPEALS**

Any party concerned may object to a decision made by the Certification Committee. To be considered, all objections must be sent to **VIAlgeria** by registered mail. The Certification Committee's decision continues to apply during the appeal procedure.

To resolve the matter, a meeting of the Appeals Committee is called.

The Appeals Committee comprising the **VIAlgeria** Manager invariably includes an external member of the impartial committee.

In the case of an appeal involving the certification of a safety system, a representative of the College of Experts is included in the Appeal Committee.



The members of the Appeals Committee will be communicated to the appellant. The appellant has the right to contest members of the committee by registered letter within 8 days of being notified of the committee members.

A meeting of the Appeals committee is called within two weeks after the final agreed constitution of the Committee members. At the meeting, both the appellant and the Certification Committee will be entitled to be heard in confidence. The Appeals Committee may also hear any other individuals who may be relevant to the appeal. Each interviewee will be given one week's notice of the time and place of the meeting.

The Appeals Committee will release its decision on the appeal within two weeks after the

meeting. The decision of the majority of the Appeal Committee, as declared by its Chairman, will be final. The appealed decision will stand for the duration of the appeal procedure.

## **12. CONFIDENTIALITY**

All information about the applicants and the Certified Organizations is held confidential and measures are taken to restrict access to the certification files.

**VIA**lgeria commits itself not to disclose any private information about the applicant or Certified Organizations nor any information collected during the audits, except for the data directly related to the status of the certification (all the data mentioned on the certificate, see § 7.9).

However, **VIA**lgeria may disclose parts or all of the certification files to the accreditation or notification bodies and to auditors of other certification bodies with which a mutual recognition agreement of certificates is sought or in effect.

Where appropriate, the Organizations accept the presence of representatives of the accreditation or notification bodies, or auditors undergoing training whom **VIA**lgeria auditors supervise during the audits.

## **13. LANGUAGES**

By default, **VIA**lgeria conducts certification services in French and exceptionally in English.

The language(s) to be used during the audit as well as the language of the report will be defined by the Applicant at the time of contract acceptance.

## **14. CERTIFICATION FEES**

The certification fees fixed by **VIA**lgeria are defined in lump sums and a set of



daily and hourly rates. The sums notably cover:

- ✓ the audit preparation and documentation review (par. 7.1. to 7.2)
- ✓ the certification audit and report (par. 7.3 to 7.6.)
- ✓ the certification, registration and publication (par. 7.6. to 7.10)
- ✓ the certification surveillance program (par. 7.11.)

The sums are defined on the basis of the certification model chosen such that the auditing times depend in particular on the size of the Organization, her complexity, ... Account can be taken of any existing certification or previous review of the management system by **VIA**lgeria.

A sum is fixed per certificate for certification, registration and publication. All sums are invoiced after completion of the corresponding certification phase (generally after sending the report to the Organization).

Supplemental activities not chargeable to **VIA**lgeria such as re-review of the documentation; re-audit, additional performances as described in par. 7.11., etc. are invoiced at the daily and hourly rates (based on the same principles as the standard costs).

## **15. REFERENCE STANDARDS CHANGES**

When a revised reference standard or normative document is published, a transition period is defined in compliance with the criteria defined by the competent authorities in the matter: ISO, IAF, CEN, EA, BELAC, ALGERAC, National or European Authorities. During this period, Applicants and Certified Organizations will have the choice between the previous or revised version of the normative document. Beyond this period, the latest edition will apply for the purpose of assessing conformity and preparing certificates.

Non-conformities against the new version of the standard will first be noted as remarks and will be written as Corrective Action Requests only after the transition period.