

## 1. GENERAL

- 1.1. TUV Rheinland of North America, Inc. (hereinafter referred to as TRNA) offers interested organizations its services for the certification of aerospace quality management systems based upon the requirements of AS9100 and/or AS9120.
- 1.2. The TRNA Business Field Systems office at 295 Foster Street, Suite 100, Littleton MA, 01460, has overall responsibility for the implementation of the AS9104-series requirements.
- 1.3. TRNA, as a Certification Body (CB), assesses and registers the management systems of organizations, including but not limited to product manufacturers and service companies. The TRNA structural and procedural organization ensures that the criteria stated in ISO/IEC 17021-1:2015, IAF Mandatory Documents and IAQG AS9104-1:2022, AS9101F and all accreditation requirements, are fulfilled. TRNA regularly obtains, reviews, and implements IAQG, SMS, and IAQG OPMT (Other Party Management Team) ICOP (Industry Controlled Other Party) scheme resolutions affecting the operation of TRNA or the AQMS standard certification of its organizations. This is done by monitoring information flowed down from ANAB, participating in periodic SMS (Sector Management Structure)/RMS (Regional Management Structure) meetings and visiting governing websites seeking revised information.
- 1.4. For the certification process to occur, a fully executed contract between TRNA and the organization (“the organization”) requesting certification services is required. The following documents are considered as part of the contract and are binding on both parties:
  - 1.4.1. Service Agreement, Quotation and Executed Purchase Order Form;
  - 1.4.2. TUV Rheinland of North America, Inc. General Terms and Conditions (MS-0002298)
  - 1.4.3. General Conditions and Procedural Guidelines for TRNA Audits (MS-0043256)
  - 1.4.4. General Conditions and Procedural Guidelines for AS91XX Certifications (MS-0005710)
  - 1.4.5. Promoting Certification and Using the TRNA and ANAB Marks (MS-0005743)
  - 1.4.6. Purchasing Terms and Conditions, Sales Terms and Conditions, Certification Regulations and other legal documents in use for TRNA legal entity is available on TUV website. Link for legal documents/ Systems: <https://www.tuv.com/usa/en/imprint.html>.

## 2. SCOPE

- 2.1. These “General Conditions and Procedural Guidelines...” apply to the total certification process to the requirements of AS9100 and/or AS9120 which includes:
  - Certification Preparation (Phase 1);
  - Quality Management System Review (Phase 2);
  - Certification Audit (Phase 3);
  - Certificate issuance, surveillance, recertification, short notice and special audits (Phase 4).
- 2.2. Additional information in these “General Conditions and Procedural Guidelines...” includes:
  - TRNA’s current procedures that apply to the certification process
  - duties and responsibilities of TRNA;
  - duties and responsibilities of the organization

## 3. PROCESS FOR THE PERFORMANCE OF THE SERVICE

This section describes the general process for an organization seeking AQMS certification by TRNA.

### 3.1. Phase 1: Certification preparation

In the first phase, TRNA determines the qualifications needed to provide the requested services. The scope of the QMS to be assessed and the suitability of AS9100 and/or AS9120 certification are determined. This is done through a quotation questionnaire and by interviewing a suitable representative of the potential organization. The AQMS standard(s) (i.e., 9100 or 9120) utilized for certification shall be selected based on the organization’s scope of certification. Refer to the “Intended Application” of the AQMS standards to determine the selection of the appropriate standard.

3.1.1. If requested, TRNA will provide preliminary assessments to assist the organization in determining their level of preparation for the certification audit.

#### 3.1.2. Information meeting

3.1.2.1. TRNA may request an informational meeting with the potential organization concerning TRNA's certification service prior to the signing of a contract. This meeting can cover, among other topics, the following points:

- the aim and benefits of certification;
- the basic requirements for certification;
- performance of the certification process;
- standard or standards applied;
- verification level, scope of application;
- organization's AQMS data to capture estimated costs;
- estimated costs;
- Proposed scheduling.

#### 3.1.3. Certification Structure Requirements

3.1.3.1. In selecting the appropriate certification structure applicable for 9100 and/or 9120 certification, TRNA will utilize IAF MD1 in addition to the definitions and requirements contained in MS-0005685 Management System Auditor – Time Tables.

#### 3.1.4. Certification Structure Review and Determination

3.1.4.1. TRNA will maintain documented evidence of the review and determination the certification structures, including the OCAP (Organization Certification Analysis Processes) Tool within the ICMS database and OASIS.

#### 3.1.5. Quotation

3.1.5.1. TRNA provides each prospective organization with a quotation detailing the services that will be provided and the associated estimated costs. The costs are also summarized for the initial period of validity of the certification. These costs are only an estimate based upon the information provided by the organization to TRNA at the time that the quote is issued. Any changes from this initial information may cause the costs to change.

#### 3.1.6. Contract and purchase order

3.1.6.1. Once the organization has accepted the quotation, two sets of contracts will be submitted for signature. In order to proceed with the activities in the next sections, a fully executed contract between TRNA and the organization and a purchase order (if applicable) from the organization to TRNA, is required. Finally, TRNA makes the final determination as to the feasibility of moving forward to the assessment process through the final contract review process.

#### 3.1.7. Preliminary assessments

3.1.7.1. Agreement can also be made to conduct more comprehensive preliminary assessments by TRNA. These can cover, for example:

- preliminary assessment of the quality system by means of a quality documentation review, either on or off-site;
- Performance of an on-site preliminary assessment.

3.1.7.2. The goal of the preliminary assessment(s) is to identify weak points in the AQMS and to assist the organization in deciding upon the next steps in the certification process. The organization receives a written report on the results of the preliminary assessment(s). These services can be ordered at any time before the certification audit, but are not a prerequisite or requirement for certification.

### 3.2. Phase 2: Quality management system review

#### 3.2.1. Review and evaluation of quality system documentation

3.2.1.1. In Phase 2, the organization's current quality system documentation (quality manual and any other relevant documents such as process maps, quality procedures, work and testing instructions, etc.) are reviewed by an audit team member for compliance with the requirements of the agreed standards. The results of the review will be documented and provided to the organization.

### 3.2.2. Management review and internal audits

3.2.2.1. Prior to conduct of the certification audit, the organization must conduct one complete internal audit of the entire AQMS and one management review. All elements of AS9100 and/or AS9120 are to be audited and the results presented to management for discussion during their management review.

3.2.2.2. If it is determined during the certification audit that this requirement has not been fulfilled, then a successful re-audit of the deficient area will be required prior to issuing the certification.

## 3.3. Phase 3: Certification audit

### 3.3.1. Audit team selection

3.3.1.1. TRNA shall utilize AQMS auditors that are both competent and authenticated in accordance with the requirements of ISO/IEC 17021:2015, AS 9104/3:2012, and AS9104-1:2022. If TRNA utilizes AQMS auditors authenticated in other IAQG sectors, it shall provide appropriate supplemental education/training (e.g., local regulations, laws) to the auditors and maintain such records in accordance with their auditor-training program.

3.3.1.2. The independence, confidentiality and impartiality of the auditors are guaranteed by TRNA. Any individual who in the past two years provided consulting services to an organization shall not be involved with the certification of that organization.

3.3.1.3. All auditors for TRNA have signed an agreement not to disclose to third parties information obtained during the audit process and related activities.

3.3.1.4. TRNA shall not allow requests for AQMS auditor changes/substitutions without substantial evidence of improper activity or contract violations. Conformance to rules concerning export controls, auditor nationalities and confidentiality/conflict of interest challenges shall be an exception to this requirement. TRNA will assign and rotate AQMS auditors, as available.

3.3.1.5. If specific technical issues outside of the expertise of the assigned audit team must be addressed in order to assess the quality management system, an appropriate technical expert will be included on the audit team.

3.3.1.6. If a translator is required, the translator shall be impartial.

3.3.1.7. TRNA AQMS audit teams shall be constituted as follows:

- The Audit Team must be a TRNA-qualified in accordance with MS-0005719 Competency Requirements for Personnel
- All members of each TRNA AQMS audit team must be one of the following:
  1. An Aerospace Experienced Auditor (AEA) qualified in accordance with TRNA's auditor qualification procedure,
  2. An "Aerospace Auditor (AA)" qualified in accordance with TRNA's auditor qualification procedure,
  3. Technical Expert.
- It shall be the responsibility of the AEA Team leader on the audit team to provide guidance to the audit team throughout the audit on the interpretation of aerospace requirements and, when requested, the significance of any issues identified.

3.3.1.8. If representatives from the ANAB, RMS, IAQG OPMT, Regulatory Agencies or Customer Representatives are accompanying the TRNA AQMS audit team to evaluate the audit process and are participating in the audit, the TRNA Audit Team Leader (Team Lead Auditor) shall have the option of including (or not) in the audit report any findings brought forward by these representatives.

3.3.1.9. Prior to the audit the organization will be informed about the audit team member(s).

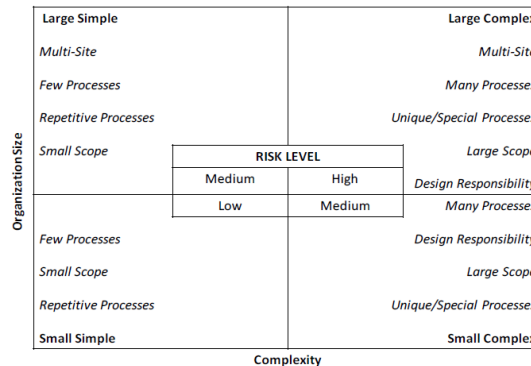


Figure 2 - Organization complexity risk level

**3.3.2. Audit plan**

3.3.2.1. Prior to the audit, the organization receives an audit plan prepared by the TRNA Team Lead Auditor detailing the activities that will be occurring during the audit. The schedule of activities may be modified with the concurrence of the Team Lead Auditor. The audit plan must encompass all of the requirements of AS9100 and/or AS9120, and enough time must be allocated in order for the audit: for the audit must be in accordance within all standard requirements.

**3.3.3. Audit conduct**

- 3.3.3.1. The audit team will conduct an opening meeting to discuss how the audit will be conducted and provide any requirements to the organization.
- 3.3.3.2. If during the audit it has been determined that the auditee has a quality system consultant present, the consultant’s role, until the completion of the audit, is one of an observer only.
- 3.3.3.3. The company's role during the audit is to demonstrate the complete and effective implementation of the AS9100 and/or AS9120.
- 3.3.3.4. The audit team’s role during the audit is to confirm the complete and effective implementation of the documented AQMS and to assess conformance with the requirements of AS9100 and/or AS9120.
- 3.3.3.5. During the audit, the audit team evaluates how well the quality management system conforms to all of the requirements of AS9100 and/or AS9120 and certification requirements. If there are areas found that do not meet the requirements of the standard then nonconformities will be raised, documented, classified, and the auditee will be notified at time of discovery. In addition, opportunities for improvements may be determined. The TRNA audit team will notify the auditee at time of discovery.

**3.3.4. Audit conclusion**

- 3.3.4.1. Upon completion of the audit, the organization will be notified of the outcome of the audit in a closing meeting.
- 3.3.4.2. Any nonconformity will be explained and documented by means of the Nonconformity Report. They must be countersigned by the organization’s audit representative in the OASIS database.
- 3.3.4.3. During the closing meeting, the audit team leader shall, at a minimum, provide the organization with any applicable NCRs and PEARs associated with the NCRs documented and a draft of the Audit Report.
- 3.3.4.4. The audit team leader should present the complete audit report to the organization within seven days, but later than 14 days of the closing meeting using the audit report and associated forms defined in the AS9101 standard in the OASIS database.

3.3.4.5. The audit will be recorded by the TRNA Audit Team using the OASIS database, defined in the AS9101 standard. These reports shall be entered into the OASIS database at the conclusion of each audit following the guidelines below.

3.3.4.5.1. For audits involving a certification decision, this data will be “published” into OASIS within 30 days after the certificate issue date but no earlier than 90 days prior to the current certificate expiry date (if applicable).

3.3.4.5.2. For all other audits, this data will be “published” into OASIS within 90 days from the last day of the audit.

3.3.4.6. A certification audit ending with no nonconformities will receive a recommendation for certification by the audit team.

#### 3.3.4.7. Nonconformity Report

3.3.4.7.1. If any nonconformities are found, the organization must effectively implement corrective actions prior to the issuing of the certification.

3.3.4.7.2. If containment is required, the immediate corrections should be recorded and reported into OASIS within 7 days from the last day of the audit. Specific containment actions and corrections, should be agreed upon within 14 days from the last day of the audit.

3.3.4.7.3. The organization has up to 30 days from the last date of the audit date to achieve an accepted root cause and corrective action plan for each nonconformity – major or minor – into the OASIS database. The organization has up to a preferred 75 calendar day but no later than 90 calendar days from the last day of the audit to provide acceptable objective evidence of implementation and effectiveness of the corrective action plan.

3.3.4.7.4. Any audit that requires a certificate decision (e.g.: recertification audit, initial audit, scope expansion), require all nonconformities to be accepted and associated corrective actions are deemed effective.

3.3.4.7.5. TRNA reserves the right to invoice the organization for any nonconformity follow up and review(s).

#### 3.3.4.8. Re-audit for Nonconformities

3.3.4.8.1. If the audit resulted in one or more nonconformities, then the audit team can recommend that a re-audit be done prior to issuing the certification.

3.3.4.8.2. The organization must propose and effectively implement corrective action to the nonconformities before the re-audit can be conducted.

3.3.4.8.3. The organization has up to 90 calendar days from the last date of the audit to effectively implement the necessary corrective action **and** have the re-audit conducted. If the re-audit does not occur within 90 days, the initial certification audit will need to restart.

### 3.4. **Phase 4: Certificate issuance, surveillance, recertification, short notice and special audits**

#### 3.4.1. **Certificate issuance**

3.4.1.1. Based on the recommendation of the audit team and an independent review of the technical information, TRNA decides on whether the registration will be granted and the Certificate issued or whether a re-audit is required.

3.4.1.2. Once issued, the certificate are valid for three years (minus one day). The certification’s continued validity is dependent on the audits having a positive outcome.

#### 3.4.2. **Transfer of Certificates**

3.4.2.1. For transfer of AQMS certificates, IAF MD 2 is applicable in full with the following additional requirements:

- a. Only valid certifications issued, under the 9104-series standards ICOP scheme, and by a CB with a valid accreditation are eligible for transfer.
- b. No certificate transfer shall occur, if the CB controlling the existing certificate has nonconformities documented that are awaiting correction, corrective action and verification.
- c. Prior to certificate issuance, a special audit is carried out by an AEA to confirm the validity of the certification being transferred, including nonconformities (accepted and associated corrective actions are deemed effective).
- d. If an organization who is certified in PBSRP program is transferred from another CB, then it will be evaluated based on Management System Work Instruction (General Conditions and Procedural Guidelines for AS91XX Certifications), Number: MS-0005710 Revision: 8, section Process Based surveillance Process (PBS/RP).

### 3.4.3. Surveillance audits

3.4.3.1. The certification requires periodic surveillance audits to determine whether the implemented AQMS remains in conformance with the requirements of AS9100 and/or AS9120. Surveillance audits shall be conducted, as a minimum, once per year, but may be done on a more frequent basis if requested by the organization. This is typically every six months.

3.4.3.2. The annual surveillance audits are scheduled to occur -90/+30 days of their due date (90 days prior to the certificate expiry date and current year the audit is required to occur).

3.4.3.3. At least once a year during the surveillance audits, an evaluation is made of:

- management responsibility and quality management system review;
- internal audit conduct and results;
- corrective and preventive action, including customer complaints
- changes to the quality management system;
- Other processes and/or Standard elements determined on a random and/or need basis.

3.4.3.4. The audit process is as described in Sections 3.3.

3.4.3.5. Nonconformity report-See Section 3.3.4.7

3.4.3.5.1. If the NCs do not have acceptable objective evidence(s) after 90 calendar days from the last day of the audit, TRNA will be obligated to suspend the certificate until conformance has been re-established.

3.4.3.6. Re-audit for nonconformities- See Section 3.3.4.8.

### 3.4.4. Recertification audits

3.4.4.1. A recertification audit of the company is performed to extend the certification validity for another three years. Recertification Audits are scheduled to occur 120-90 days prior to the certificate expiration date.

3.4.4.2. During a recertification audit, all elements of the entire quality management system are audited.

3.4.4.3. The audit process is as described in Sections 3.3.

3.4.4.4. Nonconformity report-See Section 3.3.4.7

3.4.4.4.1. If the NCs do not have acceptable objective evidence(s) after 90 calendar days from the last day of the audit, TRNA will be obligated to suspend the certificate until conformance has been re-established.

3.4.4.5. Re-audit for nonconformities- See Section 3.3.4.8

### 3.4.5. Short Notice Audits

3.4.5.1. It may be necessary for TRNA to conduct audits at short notice to investigate complaints, or in response to changes, or as follow-up on suspended organizations.

### 3.4.6. Special Audits

3.4.6.1. May include but are not limited to the following examples:

- transfer from one certification body to TRNA
- extension of scope (geographical and/or process based),
- reduction of scope (geographical and/or process based),
- significant changes to the organization,
- verify corrective action effectiveness,
- investigate a concern and/or complaint of the certified organization's AQMS
- adding a site to an existing PBSRP certified organization, and it will be under requirements of

This will be additional audit time with the regular scheduled audit or can be a separate event.

### 3.4.7. Remote Audits

3.4.7.1. An audit may be conducted using various methods of Information and Communication Technology (ICT). For regularly scheduled audits, the percentage of remote auditing can be no greater than 50%, depending on the risk assessment.

### 3.4.8. Process Based Surveillance/Recertification Process (PBS/RP)

3.4.8.1. Organizations can apply for PBS/RP through the Application Questionnaire, MS-005683, and/or Aerospace Scheduling Questionnaire and Audit Program, MS-0013356. Once qualified, the organization shall continue to conform with the required qualifications. Organizations who are not in conformance with the PBS/RP requirements shall implement corrections or be subject to adjustments, suspension and/or loss of PBS/RP program.

## 4. GENERAL CONDITIONS

### 4.1. Duties and responsibilities of TRNA

#### 4.1.1. Confidentiality

4.1.2. Any data resident at TRNA concerning the organization shall be considered as sensitive or proprietary and shall not be shared with any other organization, with the exception of the ANAB, SMS, RMS and IAQG OPMT (Other Party Management Team) in accordance with their requirements. This includes data relative to nonconformities in the SAE OASIS database as well as other pertinent information concerning their AQMS certification at TRNA.

#### 4.1.3. Liability

4.1.3.1. The liability of TRNA towards the organization or third parties exists only insofar as is prescribed by law in the event of gross negligence. More extensive claims are excluded.

#### 4.1.4. Audit termination

4.1.4.1. TRNA reserves the right to terminate an audit in cases of:

- obvious and demonstrated lack of interest or opposition by the senior management of the organization regarding the audit;
- Members of the audit team are threatened, blackmailed or bribed.

#### 4.1.5. Customer Complaints

4.1.5.1. If an organization or certificate holder is not satisfied with the service or other deliverables provided during the test and certification procedure, other than an appeal, the organization has the option of filing a complaint with TRNA. TRNA shall work with the organization to resolve the complaint, keep the organization's apprised of the complaint's progress, and provide the organization with detailed reasons for its final decision. All complaints should be sent to [wecare@us.tuv.com](mailto:wecare@us.tuv.com).

#### 4.1.6. Appeals

4.1.6.1. If an organization or certificate holder is not satisfied with decisions made during the test and certification procedure, the organization has the option of filing an appeal with TRNA. TRNA shall work with the Appellant to resolve the appeal; keep the Appellant apprised of the appeal's progress, and provide the Appellant with detailed reasons for its final decision. All appeals should be sent to [wecare@us.tuv.com](mailto:wecare@us.tuv.com).

4.1.6.2. At any time, the Appellant may formally present its case.

Note: timeline for open nonconformities, noted in 3.3.4.7, apply until a final decision has been made.

4.1.6.3. If the reasons given by TRNA are not acceptable to the Appellant, the appellant has the option to escalate the appeal to the governing accreditation body, ANAB. Appellant shall have no other remedies and no right to pursue the matter in any way whether outside nor within any judicial procedure including but not limited to a court or arbitration procedure. The organization herewith already irrevocably waves any right to any judicial procedure regarding any decision by TRNA, the certification body, or its Affiliates in a testing and certification procedure.

#### 4.1.7. Complaint/Appeal Resolution Process

4.1.7.1. All requests for corrective action shall be responded to within 30 calendar days from receipt of complaint.

4.1.7.2. All feedback received is reviewed and, if response requested, the response is provided within 30 calendar days from receipt of complaint.

4.1.7.3. If TRNA determines that a short notice audit is necessary, this audit shall be completed within 90 calendar days from receipt of the complaint.

4.1.7.4. It is further noted that TRNA is responsible for the resolution of all complaints. Complaints that cannot be resolved by TRNA shall be referred to ANAB.

#### 4.1.8. Quality records:

4.1.8.1. TRNA maintains records on its activities with its organizations. This is done so that performance of these activities can be demonstrated. The records maintained include but are not limited to:

- Quotations;
- Contracts;
- Correspondence;
- Audit documentation.

4.1.8.2. These documents will be kept for at least ten years.

#### 4.1.9. Notification of changes in the certification process

4.1.10. TRNA will inform its organizations of changes to the certification process stating at what date the modified requirements will become effective and advising the organization of any need to take action. The transition periods for the implementation of changes in the certification process is between three months and three years and will be identified to the organization.

4.1.11. Organizations should comment on these changes within a specified period of time – normally 30 days - after receiving the notification. If the organization gives confirmation within the specified period of acceptance of the modification, its participation in TRNA's management system certification program will be continued. If the organization does not give confirmation within the specified period of acceptance of the modification the certification shall be terminated on the date on which the modified requirements became effective unless otherwise decided by TRNA.

#### 4.1.12. List of registered companies

4.1.12.1. TRNA will maintain a list of registered companies, stating the respective scope of application. The list will be available to the public upon request.



**4.2. Organization duties and responsibilities**

- 4.2.1. The organization agrees to provide TRNA with accurate data for the completion of the Aerospace Scheduling Questionnaire and Audit Program, MS-0013356, preferably 90 days in advance of their due date but no later than the organization's due date. This may result in additional costs, a nonconformity from TRNA, and/or suspension/withdrawal of the organization's certificate.
- 4.2.2. The organization shall provide TRNA with any significant changes (e.g. organizational changes, reduction/addition to scope, acquisitions requiring DBAs, etc.) as soon as possible or at least 90 days prior to the formally scheduled audit. Additional audit time and costs may be required.
- 4.2.3. The formally scheduled audit may be re-scheduled or canceled by the organization, up to six weeks prior to the audit to be conducted. After this date, TRNA reserves the right to charge up to 100% of the quoted audit fee as per the accepted quotation.
- 4.2.4. The organization will identify to TRNA an audit representative who will act as the main point of contact for all audit-related activities.
- 4.2.5. The organization will permit the auditors access to the relevant departments in the company.
- 4.2.6. All documents relating to the QMS (including records) shall be made available to TRNA.
- 4.2.7. The organization shall keep record of complaints and remedial actions relative to the AQMS. These records shall be made available to TRNA during the audits.
- 4.2.8. The organization shall permit TRNA's audit team to be accompanied by representatives of CB's accreditation body (ANAB), IAQG OPMT, SMS and/or RMS representatives for any requested witness audits, without objection.
- 4.2.9. The organization shall support ICOP scheme oversight activities to confirm the effectiveness of the CB audit processes (reference 9104/2).
- 4.2.10. The organization shall provide copies of the audit report and associated documents/records to their customers and potential customers, upon request, unless justification can be provided (e.g., competitor confidentiality, conflict of interest). The organization may provide access to this data through the OASIS database or by providing the audit report directly to the customer.
- 4.2.11. OASIS (Online Aerospace Supplier Information System)
- 4.2.11.1. The organization shall allow TRNA to publish public data (e.g. AQMS certification status) and non-public data (e.g. audit results, nonconformities, KPIs).
- 4.2.11.1.1. It is the organization's responsibility to identify when to omit propriety or restricted information from the audit report, prior to the OASIS database entry.
- 4.2.11.2. The organization shall appoint and maintain an administrator responsible for but not limited to:
- Managing requests of the organization's audit data either to download or distribute to their ASD customers and regulatory authorities upon request unless justification can be provided.
  - Managing feedback tickets
  - Updating the organizations point of contact, website, etc.
  - Providing access to other roles/administrators within the organization
  - Managing OASIS feedback generated or received.
- 4.2.11.3. OASIS database users can provide feedback to ICOP scheme stakeholders. Feedback can include ICOP scheme information, complaints, questions, or suggestions users have with respect to:
- Management of the ICOP scheme;
  - AQMS certificates;
  - AQMS audit data;
  - Certified organization performance;
  - Clarification of standards; or
  - Support needed.

### **4.3. Suspension/Withdrawal and revocation of the certification**

#### **4.3.1. Suspension/Withdrawal of certification**

- 4.3.1.1. If the certification is placed on suspension or withdrawn, the organization cannot actively promote the certification until the certification is re-instated.
- 4.3.1.2. TRNA will update the OASIS database when an organization's AQMS standard certificate(s) is suspended or withdrawn. This shall be performed within 14 calendar days to reflect any change in an organization's certification status.
- 4.3.1.3. The organization shall notify their ASD customers within 15 days of suspension or withdrawal of the status change of their certification.
- 4.3.1.4. TRNA has the right to place a certificate on immediate suspension/withdrawal due to the following:
- the organization does not have the periodic audit carried out according to this document, section 3.4.3.3;
  - nonconformity(s) not closed with the stated time period;
  - the identification of one or more major nonconformities during a surveillance audit;
  - the certificate or certification is improperly used;
  - failure to meet financial obligations to TRNA;
  - conditions where public safety and/or health is at risk;
  - the organization ceases to supply a product, process or service for an extended period of time;
  - the system requirements are changed and the organization will not or cannot conform to the new requirements;
  - Voluntary suspension/withdrawal;
  - Any other reasons which result specifically from these conditions or that are agreed formally between TRNA and the organization.

#### **4.3.2. Revocation of certification**

- 4.3.2.1. If the certification is revoked or withdrawn, the organization loses the right to use the trade mark. In such a case the organization may continue to use existing documents, media etc., which are printed with the trade mark, for no more than one month from definitive cancellation of the certification.

#### **4.3.3. Revocation of TRNA's Accreditation and/or AQMS qualifications**

- 4.3.3.1. In the event that TRNA's accreditation and/or AQMS qualifications are revoked, TRNA will attempt to rectify the reasons leading to revocation of its accreditation. If this is not performed within a period agreed upon by the accreditation body, then TRNA will attempt to transition all registered companies to another certification body that offers the same services and holds the same accreditation.

### **4.4. Voluntary withdrawal of accreditation**

- 4.4.1. If TRNA chooses to voluntarily terminate its accreditation, it will do so by means of a written notification sent to the Accreditation Body within thirty (30) days. It is the responsibility of TRNA to provide any remedies to any certified organization affected by this withdrawal, appropriate to the nature of the problem that is acceptable to the Accreditation Body and in accordance with program requirements. These remedies could include the notification of the withdrawal to the certified organization and any plans to transition the certified organizations to another accredited registrar that offers the same services and holds the same accreditation. Additionally, TRNA will cease to use any advertising materials containing reference to the accreditation and will return any accreditation documents to the Accreditation Body. All unpaid fees will be paid upon the withdrawal.

### **4.5. Termination of Contract**

- 4.5.1. This contract may be terminated by either party after giving 30 days prior written notice to the other party..

## 5. TERMS AND DEFINITIONS:

<b>Terms/Abbreviations</b>	<b>Description</b>
Aerospace Quality Management System (AQMS)	A QMS based upon ISO 9001 that includes additional ASD requirements, as established in 9100, 9110, and 9120 standards.
Aerospace Quality Management System (AQMS) Auditor:	A person with the demonstrated attributes (i.e., training, audit experience, industry experience) and competence to conduct an audit on ASD organizations. An AQMS auditor is either an Authenticated Experienced Auditor (AEA) or an Authenticated Auditor (AA), and shall have met the requirements set forth in 9104/3.
Industry Controlled Other Party (ICOP) Scheme:	An IAQG and industry managed scheme for the audit and certification of an organization's AQMS by accredited other party CBs, in accordance with the requirements defined in the 9104-series standards.
International Aerospace Quality Group (IAQG)	A non-profit global association comprised of member companies from the ASD industries, whose mission is to achieve significant performance improvements world-wide in terms of quality, delivery, and cost, through the development and deployment of standards, industry oversight, and guidance materials for use at all levels of the global supply chain.
International Aerospace Quality Group (IAQG) Other Party Management Team (OPMT)	An organization comprised of member companies within the ASD industries who design, develop, manufacture, and support original equipment at system or subsystem levels; established by the IAQG to manage the ICOP scheme.
International Aerospace Quality Group (IAQG) Sector	A sub-structure of the IAQG that consists of members in a specific geographic area (i.e., Americas, Europe, Asia/Pacific).
Online Aerospace Supplier Information System (OASIS™) Database	The web-based IAQG application containing information on participating National Aerospace Industry Associations (NAIAs), Accreditation Bodies (ABs), Training Provider Approval Bodies (TPABs), Auditor Authentication Bodies (AABs), accredited CBs, AQMS auditors, certified organizations, and audits, which are approved and recognized by the Sector Management Structure (SMS) through the ICOP scheme.
Organization Certification Analysis Process (OCAP)	An interactive process between the organization and CB to determine the organization's AQMS scope and associated certification audit program, and conduct a risk assessment for certification within the ICOP scheme.
Performance Based Surveillance/Recertification Process (PBS/RP)	ICOP scheme AQMS surveillance and recertification optional process based on objective evidence and demonstration that a certified organization continually maintains a conforming, effective, and high performing AQMS.
Regional Management Structure (RMS)	Committee within a SMS that operates at the regional level, responsible for 9104-series standards conformance in their respective regions. They perform the same functions as the SMS, under control of the SMS within their sector.
Sector Management Structure (SMS):	A committee established in an IAQG sector that manages the application and oversight of the ICOP scheme. NOTE: Each sector may use a different name for this organization.
Training Provider Approval Body (TPAB)	A body approved by the SMS or RMS that has the primary responsibility to conduct the review and approval of training courses and Training Providers (TPs).