

Form VII  
(refer sub-regulation (1) of regulation 11)  
Bureau of Indian Standards  
Application for Renewal of Recognition of Assaying and Hallmarking Centre in accordance  
with IS 15820  
(Strike-off whichever is not applicable)

1.	Name of Assaying and Hallmarking Centre and Complete Address	
1.1	Name of the Centre	
	Complete Address (clearly indicate prominent landmark and attach location plan)	
	Telephone / FAX / Email	
1.2	Complete address of the Registered Office (if different from 1.1 above)	
	Telephone / FAX / Email	
1.3	Type of Ownership	Proprietorship / Partnership / Limited Company / Government / PSU
1.4	Premises of the Centre and its Legal Identity	
	Document authenticating premises of the centre in case of any change (otherwise confirm – no change) (enclose self-attested copy of document)	
	Document establishing legal identity of the centre in case of any change (otherwise confirm – no change) (enclose self-attested copy of document)	
2.	Recognition	
2.1	Validity of the Recognition (applicable in case of renewal of recognition)	
3.	Scope of Recognition	
3.1	Existing Scope of Recognition (specify details as per guidelines)	Gold / Silver / Gold & Silver Both
3.2	Any change proposed in the scope of recognition. If yes, please indicate details.	Yes / No
4.	Management Structure of the Centre	
4.1	Name & Designation of Owner/Chief Executive of the Applicant	

	Telephone / FAX / Email								
4.2	Name & Designation of the person responsible for the Quality System Management in the Centre								
5.	Employees/Personnel								
5.1	Total number of employees in the centre								
5.2	Department-wise details with name, designation, qualification, experience, training details, etc. (attach separate sheet as per the following format)								
	Department	Name	Designation	Qualification	Experience	Training Details	Name of deputy, if any		
6.	Test Equipment/ Instruments and Test facilities								
6.1	Clause wise list of test equipment/facilities including consumables, water & electricity supply with back up as per the following format ( <i>please attach separate sheet</i> )								
Sl. No.	IS No. & Clause Ref.	Method of Test (if and as applicable)	Test Facility (Equipment Ref. Material etc.)	Model/Type/ Serial no. and make	Range, Accuracy and Least Count (if and as applicable)		Calibration (if and as applicable)		Remarks, If any
					Range	Least Count	Validity	Traceability	
7.	Centre Premises/Layout								
7.1	Total space available & Space of Assay room (in Sq feet)								
7.2	Layout plan of the centre indicating testing area, office etc. ( <i>attach Layout Plan</i> )								
8.	Centre's Quality Management System								
8.1	Details of Quality Manual implemented in the Assaying & Hallmarking Centre (Document No, Issue No & date) (copy of Quality manual to be enclosed, if revised)								
8.2	Is your centre accredited as per IS/ISO/ IEC 17025 If yes, date of validity of accreditation					Yes / No			
9.	Details of Payment (refer to the fee applicable for AHCs)								

9.1	Amount	
9.2	Name of the Bank	
9.3	DD No./UTR No./Bank Challan No.	
9.4	Date	
10	Any other information which the centre may like to provide	

Declaration – This is to declare that I have read and understood provisions of Bureau of Indian Standards Act, 2016, Bureau of Indian Standards Rules 2017 and Bureau of Indian Standards (Hallmarking) Regulations 2018 and guidelines for conformity assessment scheme for Assaying and Hallmarking (A and H) Centre and undertake to abide by them.

Signature

Name

Designation

(Proprietor/Partner/Director)

Date:

Seal

Place: