Third Edition – 2025

GAS.MCB-01:2025

GAS Accreditation Criteria for Management System Certification Bodies

Contents

0. FOREWORD

This document establishes the accreditation criteria for management system certification bodies seeking to obtain or maintain accredited status within the **Global Accreditation System (GAS**).

The purpose of this document is to define a unified approach to evaluating the **competence,** impartiality, and technical capability of certification bodies that perform audits and certifications of various types of management systems — including, but not limited to, quality management, environmental management, energy management, occupational health and safety, and anti-bribery management systems.

The requirements set forth herein are based on the provisions of **ISO/IEC 17021-1**, **ISO/IEC 17011**, and on the principles of professional ethics, transparency, and sustainable development.

These criteria are intended for use by:

- the **GAS Accreditation Agency**, in conducting initial accreditations, surveillance, or reassessments of certification bodies;
- **Certification Bodies** — for self-assessment of their readiness for accreditation or for confirming ongoing compliance with applicable requirements;
- **Clients of Certification Services** — as a reference source regarding the requirements applicable to accredited certification bodies.

Compliance with these criteria ensures transparency, international recognition of certification results, and enhanced confidence in certificates issued under GAS accreditation.

This document forms part of the normative framework ,
nal standards, regulatory requirements, market conditions, and current environmental and climatic challenges affecting certification body operations.

1. SCOPE OF APPLICATION

This document establishes the requirements that shall be followed by bodies conducting audits and certification of management systems in accordance with international standards (including ISO 9001, ISO 14001, ISO 45001, ISO 50001, ISO 37001, ISO/IEC 27001, and others).

The document defines the requirements for:

- the management system of the certification body;
- the competence, impartiality, and ethical conduct of personnel;
- the procedures for auditing, decision-making, and issuance of certificates;
- the management of information, risks, complaints, and appeals;
- the consideration of environmental, energy, and climate aspects in the body's activities;
- ensuring sustainability, transparency, and trust in certification processes.

This document applies to all types of management system certification bodies—regardless of their size, ownership structure, or sectoral specialization—and covers both national and international levels of activity.

The requirements of this document are used by the GAS Accreditation Agency when conducting initial, surveillance, or reassessment evaluations of certification bodies. In addition, the document may be used by the bodies themselves for internal conformity monitoring, self-assessment, and continual improvement of their activities.

2. NORMATIVE AND REFERENCE DOCUMENTS

This section lists the international and internal documents whose provisions are applied during the accreditation of management system certification bodies.

The documents listed are valid at the time of publication of this document. In the event of their revision or replacement, the latest editions, including all amendments and additions, shall be used.

International standards:

- **ISO/IEC 17021-1:2023** Conformity assessment — Requirements for bodies providing audit and certification of management systems — Part 1: Requirements;
- **ISO/IEC 17011:2017** Conformity assessment — Requirements for accreditation bodies accrediting conformity assessment bodies.

Internal GAS documents

- **GAS.MCB-02:2025** — GAS Policy on Accreditation of Management System Certification Bodies;
- **GAS.MCB-03:2025** — Additional Criteria for Certification Bodies of Quality Management Systems in the Aerospace and Defense Industry;
- **GAS.MCB-04:2025** — Requirements for the Audit and Certification of Management Systems of Organizations with Multiple Sites;
- **GAS.MCB-05:2025** — Regulations on the Transfer of Management System Certification Issued by Bodies Accredited by GAS;
- **GAS.MCB-06:2025** — Accreditation Assessment of Management System Certification Bodies Operating in Multiple Countries;
- **GAS.G-01:2025** — Code of Ethics for GAS Experts, Assessors, and Personnel;
- **GAS.G-02:2025** — Policy on the Use of GAS Accreditation Marks and References;
- **GAS.G-03:2025** — Policy on Conflict of Interest and Impartiality;
- **GAS.G-04:2025** — Complaints and Appeals Procedure;
- **GAS.G-05:2025** — GAS Policy on Sustainable Development and Climate Responsibility**.**

This list is not exhaustive. The GAS Accreditation Agency may apply additional standards, guidelines, or internal documents if necessary to fully assess the conformity of a body with the requirements established within its scope of activity.

3. TERMS AND DEFINITIONS

This section provides the key terms used in this document, namely:

Accreditation — the official recognition of a certification body's competence to carry out specified conformity assessment activities.

Certification Body — an independent organization authorized to conduct management system audits and make decisions regarding the issuance, maintenance, suspension, or withdrawal of certificates.

Management System — a set of interrelated elements through which an organization establishes its policy, objectives, and processes to achieve them.

Competence — the ability to apply knowledge and skills to achieve intended results.

Impartiality — the absence of conflicts of interest or influences that could compromise the objectivity of the assessment.

Auditor — a qualified person authorized to conduct management system audits to verify compliance with the requirements of standards.

Expert — a person who possesses specialized knowledge or experience in a specific area and is engaged in the assessment as a technical consultant during an audit or accreditation.

Assessor — a qualified person authorized by the GAS Accreditation Agency to conduct assessments of certification bodies to determine their compliance with established requirements. The assessor may perform document review, on-site evaluations, and observation of audits (witness assessments) within their competence.

Surveillance — periodic confirmation by the accreditation body that the accredited body continues to comply with the established requirements.

Climate-related aspects — factors affecting the performance of the body related to climate risks, energy efficiency, and reduction of greenhouse gas emissions.

Risk — the effect of uncertainty on the achievement of objectives.

Register of Accredited Bodies — the official database containing the list of accredited bodies, their status, and scope of accreditation.

If certain terms are not defined above, they shall be interpreted in accordance with the current ISO/IEC 17000, ISO/IEC 17021-1, and ISO/IEC 17011 standards.

4. REQUIREMENTS

This section establishes the main requirements that management system certification bodies must comply with to obtain or maintain accreditation.

The requirements cover management matters, personnel competence, impartiality of processes, compliance with climate and environmental aspects, as well as ensuring trust in certification results.

4.1 Загальні вимоги

The certification body shall:

- operate as an independent, impartial, and responsible organization;
- have a legal status and structure that ensure objectivity in decision-making;
- comply with ISO/IEC 17021-1 and applicable GAS documents;
- implement a quality management system that ensures control, traceability, and reliability of all certification processes;
- have a documented policy on risk management, confidentiality, conflict of interest prevention, and integrity assurance.

4.2 Impartiality and Independence

The body shall:

- identify, analyze, and minimize risks to impartiality;
- ensure that commercial, financial, or other interests do not affect the objectivity of decision-making;
- establish an Impartiality Committee composed of representatives of interested parties;
- guarantee that personnel conducting audits or making decisions have no connection to the client's activities.

4.3 Personnel Competence

The certification body shall:

- have a sufficient number of competent auditors, experts, and technical specialists;
- define requirements for education, professional experience, technical knowledge, and personal attributes of personnel;
- provide systematic competence development and verification;
- maintain records of personnel evaluation, training, and competence maintenance;
- engage technical experts only within their confirmed competence and according to their qualification scope.

4.4 Certification Processes

The certification body shall develop, implement, and maintain procedures that ensure:

- objective, consistent, and documented audits;

- clear definition of the stages of the certification process — from application review to decision-making;
- independence of decision-making from the audit team composition;
- timely provision of audit reports and certification decision information to the client;
- effective management of appeals and complaints, including their documentation, impartial review, and feedback to the client.

4.5 Information and Documentation Management

The certification body shall develop, implement, and maintain procedures that ensure:

- preservation, confidentiality, and version control of documented information;
- maintenance of a register of issued certificates and the current status of clients;
- timely updating of data in the official GAS register;
- availability of information on the scope of accreditation, policies, and procedures for interested parties.

The body shall ensure that information exchange, storage, and data use comply with the requirements of applicable GAS documents and the information security principles defined in ISO/IEC 27001 or equivalent standards.

4.6 Climate and Environmental Aspects of Activities

The certification body shall:

- identify and assess the environmental and climate-related aspects of its operations;
- consider risks associated with climate change, resource use, and environmental impact;
- take measures to improve energy efficiency, reduce emissions, and ensure rational use of resources;
- contribute to reducing the environmental footprint of its activities, including through the use of digital document management, remote audits, and “green” office practices.

4.7 Additional Requirements for International Activities

Certification bodies operating outside their country of origin or across multiple countries shall comply with additional requirements to ensure consistency, transparency, and trust in certification results.

The body shall:

- operate in accordance with the legislation of the country where certification is performed, considering local regulatory requirements, climate, and environmental conditions;
- ensure that all auditors and experts involved in international audits possess knowledge of local legislation, regulations, and the language used in the audit;

- confirm the existence of official cooperation agreements with local partners (if necessary) for technical or administrative support;
- ensure the application of uniform conformity assessment methods regardless of the audit location;
- maintain a register of international clients and promptly inform the GAS Accreditation Agency about any expansion or modification of the geographical scope of activities;
- monitor and assess the impact of climate-related factors in the countries of operation (e.g., risks of natural disasters, local emission standards, waste management, energy efficiency, etc.);
- demonstrate responsibility in reducing the environmental footprint of international operations – through logistics optimization, use of remote audits, implementation of eco-offices, and carbon offset programs.

4.8 Requirements for Remote Audits

A certification body may apply remote (remote or hybrid) audits to improve the efficiency of management system assessments, provided the following requirements are met:

A. Planning and Justification

- The decision to conduct a remote audit shall be documented and justified (based on a risk-based approach).
- Before the audit, the body shall assess the client's technical capability to ensure proper communication, data transmission, and access to information.
- The audit plan shall clearly indicate which elements are assessed remotely and which are evaluated during the on-site visit.

B. Information Security and Confidentiality

- Platforms for video communication, file exchange, and document sharing shall ensure data protection and information confidentiality.
- All participants in the remote audit shall be informed of the rules for safeguarding commercial and personal information.
- Auditors are responsible for maintaining confidentiality of obtained materials and for compliance with ISO/IEC 27001 or equivalent information security requirements.

C. Auditor Competence and Training

- Auditors conducting remote assessments shall have verified competence in using digital audit tools, data verification, and visual observation.
- The body shall provide training for personnel on ethical, legal, and technical aspects of remote assessment.

D. Technical Requirements and Evidence Verification

- Evidence collected remotely (photo, video, screenshot materials) shall be verified for authenticity and stored in accordance with documented information management procedures.
- In case of doubt about the authenticity of remote evidence, the body shall conduct an additional on-site verification.

E. Transparency and Reporting of Results

- The audit report shall clearly indicate the proportion of remote and on-site assessment.
- The client shall be informed about the audit format before it begins and shall provide written consent.
- Results of remote audits shall meet the same reliability standards as on-site audits.

F. Monitoring and Improvement of Remote Audit Practice

- The body shall periodically analyze the effectiveness of remote audits, identify risks, and update corresponding procedures.
- Data on conducted remote audits shall be included in the body's annual report to the GAS Accreditation Agency.

4.9 Ethical Principles and Prevention of Conflicts of Interest

The certification body shall operate based on integrity, objectivity, impartiality, and professional ethics, ensuring confidence in certification results and upholding the reputation of GAS accreditation.

4.9.1 General Principles of Ethical Conduct

The body shall:

- ensure adherence to the principles of integrity, respect, responsibility, and transparency in all activities;
- develop, implement, and maintain a Code of Ethics mandatory for all employees, auditors, experts, and external consultants;
- establish mechanisms for preventing, detecting, and responding to cases of ethical misconduct;
- ensure that personal, commercial, or other interests do not in any way affect the results of audits and certification decisions.

4.10 Environmental and Climate Responsibility of Certification Bodies

Certification bodies, as participants in the global conformity assessment system, shall demonstrate responsible environmental conduct, energy efficiency, and consideration of climate-related factors in their operations.

This requirement forms part of the principles of sustainable development and aims to enhance confidence in certification services.

4.10.1 General requirements

The body shall:

- implement an environmental and climate responsibility policy aligned with international sustainable development initiatives (SDGs, ESG principles, Paris Agreement);
- identify the environmental aspects of its activities, assess related risks, and establish objectives for reducing adverse environmental impacts;
- integrate environmental and climate aspects into its quality management system or integrated management system.

4.10.2 Resource Management

The body shall ensure:

- the rational use of energy, water, paper, and other materials;
- the implementation of digital document management, remote audits, and modern communication tools to reduce travel and CO_2 emissions;
- monitoring and annual reporting on resource consumption and measures taken to reduce it;
- preference for suppliers and contractors with environmental certification (in particular, ISO 14001 or ISO 50001).

4.10.3 Emission and Climate Impact Management

The body shall:

- assess and document its carbon footprint related to operational activities and staff mobility;
- develop and implement measures to reduce or offset greenhouse gas emissions (carbon neutrality programs, use of renewable energy, offset projects);
- consider local climatic conditions when planning audits, including risks associated with extreme weather events or seasonality;
- assist clients in understanding the role of management systems in climate change adaptation and reduction of environmental impact.

4.10.4 Environmental Competence of Personnel

The body shall ensure that all auditors and technical experts:

- possess basic knowledge of environmental and climate aspects, sustainable development, and environmental legislation;
- undergo regular training on energy efficiency, waste management, and climate adaptation;

- are capable of assessing environmental risks during audits across various sectors of activity.

4.10.5 Reporting and Monitoring

The body shall:

- maintain a register of environmental indicators (resource consumption, emissions, achievement of environmental objectives);
- report annually to the GAS Accreditation Agency on results in the field of environmental responsibility;
- make monitoring results available to interested parties, including through publication in an integrated sustainability report.

4.11 Management of Risks Related to the Activities of the Certification Body

Effective risk management is a key element in ensuring the stability, impartiality, and reliability of the certification body's activities.

The body shall implement a systematic approach to identifying, analyzing, assessing, monitoring, and mitigating risks that may affect the competence, objectivity, or reputation of certification processes.

4.11.1 General Requirements

The body shall:

- define the context of its activities, interested parties, and internal/external factors that may create risks;
- implement a risk management procedure covering operational, financial, legal, reputational, informational, ethical, and climate aspects;
- document the risk management process (methodology, responsible persons, review frequency);
- conduct regular risk assessments at least once per year or following significant changes in activities.

4.11.2 Identification and Classification of Risks

The body shall identify risks under the following categories:

- **Impartiality risks** — related to commercial, personal, or organizational interests;
- **Competence risks** — related to personnel qualifications, limited technical resources, or new areas of certification;
- **Information security risks** — involving leakage or loss of clients' confidential information;
- **Environmental and climate impact risks** — including weather conditions, energy crises, and logistics disruptions;

- **Reputational risks** — arising from unreliable certifications, ethical violations, or client complaints;
- **Digital systems risks** — associated with cybersecurity threats or technical failures during remote audits.

4.11.3 Risk Assessment and Prioritization

The body shall:

- apply a standardized assessment scale (likelihood × impact);
- define acceptable risk levels and measures to reduce them;
- involve management and responsible persons in decision-making regarding high-level risks;
- integrate the results of risk assessment into audit planning, resource management, and strategic decisions.

4.11.4 Impartiality Risk Management

The body shall establish a Committee on Impartiality that:

- exercises independent oversight over all activities that may create a conflict of interest;
- considers complaints and proposals for improving risk management procedures;
- has the authority to initiate corrective actions or review policies in case significant threats to impartiality are identified.

4.11.5 Monitoring and Improvement

The body shall:

- take into account risk assessment results during internal audits and management reviews;
- develop and implement corrective and preventive actions based on monitoring outcomes;
- maintain a risk register documenting the current status, control measures, and responsible persons;
- provide the GAS Accreditation Agency with information on major risks and methods of their mitigation during accreditation assessments.

4.12 Management of Complaints, Appeals, and Comments

The certification body shall have a transparent, independent, and effective system for handling complaints, appeals, and comments, ensuring objectivity, impartiality, and trust in the certification processes.

4.12.1 General Provisions

The body shall:

- develop, implement, and maintain a procedure for managing complaints and appeals, open to all interested parties;
- publish information on the procedure for submitting complaints and appeals on its official website or in another accessible format;
- ensure that submitting a complaint or appeal does not result in discrimination or adverse consequences for the applicant.

4.12.2 Complaints

A complaint may concern the actions or omissions of the organization, its personnel, an auditor, or a certified organization.

The body shall:

- acknowledge receipt of the complaint within five working days;
- register the complaint in a log, indicating the date, subject matter, responsible persons, and review deadlines;
- conduct an impartial investigation by appointing individuals who did not participate in the related audit or decision;
- inform the complainant of the review results and actions taken within the established timeframe (no more than 30 calendar days, unless otherwise specified).

If nonconformities are identified, the organization shall take corrective and preventive actions and provide documentary evidence of their implementation.

4.12.3 Appeals

An appeal may be submitted by a client or another interested party in case of disagreement with the organization’s decision (for example, refusal to issue, suspension, or withdrawal of a certificate).

The body shall:

- ensure that appeals are registered separately from complaints;
- refer the appeal to an independent appeals committee that does not include individuals involved in the disputed decision;
- document the committee’s decision and communicate it to the appellant in written form;
- implement the decision of the appeals committee within the established timeframe.

All appeals and the results of their consideration shall be analyzed during internal audits and management reviews.

4.12.4 Comments and Suggestions

The organization shall promote open communication and continuous improvement by accepting comments and suggestions from clients, auditors, and other parties. Such submissions are considered part of the quality management system improvement process.

The results of the review and the response measures shall be documented and, where possible, reflected in the organization’s annual activity report.

4.12.5 Confidentiality and Impartiality

All complaints, appeals, and comments shall be reviewed confidentially, in compliance with the requirements for the protection of personal and commercial data.

Individuals involved in the review of complaints and appeals shall sign a declaration confirming the absence of any conflict of interest.

Information concerning typical complaints or systemic issues may be published in a summarized form, without disclosure of personal data, in order to enhance the transparency of the body’s activities.

4.12.6 Monitoring and Improvement of the Complaint Handling System

The body shall:

- periodically analyze trends in received complaints and appeals to identify recurring issues and systemic risks;
- take the results of the analysis into account when reviewing policies, procedures, and improvement plans;
- evaluate the effectiveness of the complaint management system during internal audits and external assessments conducted by the GAS Accreditation Agency.

5. ACCREDITATION PROCEDURE FOR MANAGEMENT SYSTEM CERTIFICATION BODIES

5.1 General Provisions

Accreditation of management system certification bodies is carried out by the GAS (Global Accreditation System) Accreditation Agency in accordance with the requirements of ISO/IEC 17011 and GAS internal procedures.

The purpose of the accreditation process is to confirm the technical competence, impartiality, and operational stability of the certification body within the declared scope.

5.2 Stages of the Accreditation Procedure

5.2.1 Submission of Application

The certification body submits an official application to GAS accompanied by a supporting documentation package, which includes:

- founding documents and confirmation of legal status;
- policy on impartiality;
- description of the quality management system;
- procedures for conducting certification;
- information on personnel, auditors, and technical experts;
- list of the declared management system standards (for example, ISO 9001, ISO 14001, ISO 45001, etc.).

All documents must be submitted in the prescribed format and must contain up-to-date information regarding the activity of the body.

After the application is registered, the GAS Accreditation Agency provides confirmation of its receipt and assigns an accreditation process coordinator.

5.2.2 Preliminary Document Review

The GAS Accreditation Agency conducts a preliminary review of the submitted materials for completeness, relevance, and conformity with the requirements.

If any nonconformities are identified, the applicant body is sent comments and required to correct the deficiencies within a specified timeframe.

5.2.3 On-site Assessment (On-site Audit)

After a positive result of the document review, an on-site assessment (on-site audit) of the certification body's activities is conducted.

The assessment is carried out by a team of experts from the GAS Accreditation Agency and includes evaluation of:

- the effectiveness of the body's quality management system;
- the competence of personnel and auditors;
- the conformity of procedures to actual practice;
- the assurance of impartiality, confidentiality, and transparency of processes;
- compliance with requirements for record-keeping, reporting, and control of certification decisions.

If necessary, GAS representatives may conduct witness observation of an audit being performed by the certification body at a client's site (witness audit) in order to evaluate the auditors' competence and the effectiveness of the applied certification procedures.

5.2.4 Report and Decision-Making

Based on the results of the assessment, a report is prepared that includes conclusions, evidence of conformity or nonconformity, and recommendations regarding the granting, refusal, or postponement of accreditation..

The decision is made by the Independent Accreditation Commission of GAS, whose members did not participate in the audit.

The applicant is notified of the decision in writing and, if necessary, receives a corrective action plan.

5.2.5. Issuance of the Accreditation Certificate

In the case of a positive decision, the applicant is issued an accreditation certificate which includes:

- the name of the body;
- the scope of accreditation (list of standards and areas of activity);
- the registration number;
- the date of issuance and the validity period;
- a reference to the official GAS register.

5.3 Post-Accreditation Surveillance

The GAS Accreditation Agency conducts scheduled and unscheduled surveillance to confirm the ongoing conformity of the accredited body with the established requirements:

- Scheduled surveillance is carried out annually.
- Re-accreditation is conducted every five years.
- Unscheduled assessments are conducted in cases of confirmed complaints, reports of violations, or significant changes in the body's activities.

5.4 Suspension, Restoration, and Revocation of Accreditation

The GAS Accreditation Agency has the right to suspend or revoke accreditation in the following cases:

- failure to comply with GAS standards or procedures;
- violation of ethical norms or the principle of impartiality;
- refusal to participate in a surveillance audit;
- submission of false or misleading information.

Restoration of accreditation is possible after confirmation that the identified nonconformities have been corrected and a repeated assessment has been successfully completed.

5.5 Changes to the Scope of Accreditation

The certification body may submit an application to expand or reduce its scope of accreditation.

The decision is made based on the review of the submitted documents or an additional assessment, if required by the nature of the change in scope.

5.6 Publication of Information

Information about all accredited bodies is published in the official GAS register, indicating their status, scope of activity, accreditation date, and validity period.

The information is updated regularly to ensure openness, transparency, and confidence in GAS accreditation.

5.7 Archiving of Assessment Results

The GAS Accreditation Agency ensures the preservation of all documented information related to accreditation processes for at least 10 years after the expiration of the accreditation.

Data retention is carried out in compliance with confidentiality requirements, personal data protection, and traceability of assessment results.

6. RIGHTS AND OBLIGATIONS OF ACCREDITED MANAGEMENT SYSTEM CERTIFICATION BODIES

7. 6.1 General Rights and Obligations of Accredited Management System Certification Bodies

Provisions

Accredited management system certification bodies are required to operate in accordance with the requirements of international standards; the policies and rules of GAS; and the principles of impartiality, transparency, competence, and integrity.
The purpose of this section is to define the ethical, administrative, and technical requirements for accredited bodies, as well as the rules for the use of GAS accreditation status.

6.2 Rights of Accredited Bodies

An accredited body has the right to:

- use the GAS accreditation status in its activities, promotional materials, and public communications strictly within the granted scope of accreditation;

- apply the accreditation mark (GAS logo) in accordance with GAS.G-02:2025 “Policy on the Use of Accreditation Marks and References to GAS Accreditation”;
- participate in qualification improvement programs, experience exchange, seminars, and conferences organized by GAS;
- submit requests, proposals, and communications to the GAS Coordination Council regarding the improvement of accreditation procedures;
- receive official clarifications regarding the interpretation of requirements of standards, procedures, and GAS policies;
- submit applications for expansion, reduction, or renewal of the scope of accreditation;
- appeal decisions of the GAS Accreditation Agency in accordance with the established appeals procedure.

6.3 Obligations of Accredited Bodies

An organization that has received GAS accreditation is required to:

- comply with all requirements, standards, and procedures on the basis of which accreditation was granted;
- ensure continual conformity with the criteria of competence, impartiality, confidentiality, and sustainable development;
- promptly inform GAS of any significant changes in its structure, management, personnel, legal status, or scope of activities — in the format specified by the GAS Accreditation Agency;
- conduct internal monitoring of the quality of certification processes and provide GAS with the results of internal audits upon request;
- provide representatives of the GAS Accreditation Agency with access to premises, records, personnel, and information during surveillance or special assessments;
- maintain documentation confirming the competence of auditors and the effectiveness of the management system;
- implement the decisions issued by the GAS Accreditation Agency based on the results of surveillance or investigations;
- refrain from any actions that could discredit GAS or undermine the objectivity of certification results.

6.4 Use of the GAS Logo and References to Accreditation

Accredited bodies have the right to use the accreditation mark (GAS logo) only within the granted scope of accreditation and in accordance with the graphical and content requirements established by the GAS Mark Usage Policy (GAS.G-02:2025).

The logo must not:

- be placed on the client's products;
- create the impression that the client's product, service, or organization itself is accredited by GAS.

All publications, reports, and certificates shall clearly state:

"Certification body accredited by the GAS (Global Accreditation System) Accreditation Agency.".

It is prohibited to alter the colors, proportions, or elements of the logo without the approval of GAS.

The use of the logo by a body whose accreditation has been suspended or revoked is strictly prohibited.

6.5 Reporting and Information Obligations

Accredited bodies are required to submit an annual report to the GAS Accreditation Agency, which includes:

- statistics on conducted certifications (quantity, standards, regions);
- information on auditors, their training, and competence;
- changes in management structure, policies, or procedures;
- a description of identified nonconformities and corrective actions taken;
- information regarding complaints, appeals, and cases of suspension or withdrawal of certificates.

GAS reviews the submitted reports and may request additional explanations or evidence of conformity.

6.6 Ethical Requirements and Principles of Conduct

The accredited body shall:

- adhere to the principles of honesty, independence, confidentiality, and equal treatment of all clients;
- prevent conflicts of interest between certification activities and any other commercial services;
- ensure transparent investigation of all complaints, appeals, and potential violations of ethical norms;
- demonstrate social responsibility and environmental awareness, taking into account the principles of sustainable development (SDGs, ESG principles);
- maintain a culture of integrity among personnel, auditors, and partners.

6.7 Responsibility for Noncompliance with Requirements

In the event that violations of the requirements of this document are identified, GAS may apply the following measures:

1 Written warning;

2 Requirement to eliminate nonconformities within a specified period;

3 Suspension of accreditation;

4 Revocation of accreditation and removal of the record from the official GAS register.

The decision to apply such measures is made by the GAS Accreditation Commission based on the results of the assessment and is communicated to the body in written form.

The body has the right to submit an appeal in accordance with the established procedure.

8. FINAL PROVISIONS

7.1. This document is a component of the regulatory framework of the Global Accreditation System (GAS) and is subject to mandatory application by all management system certification bodies seeking to obtain or maintain accreditation.

7.2. Compliance with the requirements is monitored by the GAS Accreditation Agency during initial, surveillance, and re-accreditation assessments.

7.3. The document is reviewed at least once every three years or when international standards or GAS policies are amended.

7.4. The GAS Accreditation Agency is responsible for reviewing, updating, approving, and publishing the current version of the document.

7.5. The current version of the document is published on the official website at **gas.international**.

