Regulation for the certification of quality management systems of companies operating in the aviation, space and defence sector, according to the aerospace scheme (ref. UNI EN 9100:2018 / UNI EN 9120:2018)

18	21/07/2026	Update of section 6.2 regarding the annual count date and section 6.3 with clearer highlighting of the 3-year requirement for renewal intervention	CC SG	DIR GOV	DIR CC
17	05/06/2026	Incorporation of ACCREDIA observation on management of information regarding delay in execution of interventions, sections 6.2 and 6.3	CC SG	DIR GOV	DIR CC
16	20/05/2026	Incorporation of Accredia observation and reference to incorporation of certification application in the Offer	CC	DIR GOV	DIR CC
15	22/03/2023	Clarifications regarding the classification method of NCs found during inspections. Ref: Observations VA SGQ ASD - AERO GAMA SRL of 25, 26/11/2022	OPE	DIR GOV	DIR OPE
14	31/12/22	Amendment following Accredia audit of 30 November – 01 December 2022. Added IAQG Resolutions management method and details on suspension and withdrawal timescales for certificates..	OPE	DIR GOV	DIR OPE
13	07/12/22	Amendment following Accredia audit of 30 November – 01 December 2022. Addition of OFI / NCm classification	OPE	DIR GOV	DIR OPE
12	21/11/22	Amendments following Accredia 9100 document review	OPE	DIR GOV	DIR OPE
11	05/09/2022	Amendment following EAQG audit	OPE	DIR GOV	DIR OPE
10	17/11/2021	Amendment of paragraphs 2.0 and 5.0 to respond to the Accredia ED for extension to 9120	OPE	DIR ISG	DIR OPE
09	20/09/2021	Extension to 9120 and removal of MD3 and consequently the reference to ASRP	OPE	DIR ISG	DIR OPE
08	15/07/2019	Transition from regulation to scheme	OPE	DIR ISG	DIR OPE
07	11/09/2018	Update following identification of incorporated standards	OPE	DIR ISG	DIR OPE
06	18/06/2018	Update following issuance of EN 9100:2018	OPE	DIR ISG	DIR OPE
05	20/04/2017	Update following transition plan to 9100:2016	SG	DIR	AD
04	15/02/2015	Updated transfer phase following issuance of Resolution Log 124. Closure in the field provided for major NCs. Updated following new 9101..	SG	DIR	AD
03	27/06/2014	Pre-audit phase redefined and transformed into pre-assessment	SG	DIR	AD
02	25/06/2013	Updated in highlighted points for integration of 9104-001 requirements	SG	DIR	AD
01	21/12/2012	Changes following ACCREDIA observations	SG	DIR	AD
00	14/09/2012	Cancels and replaces document 45R036 "Regulation for the certification of quality management systems for companies operating in the aviation, space and defence sector, according to the aerospace scheme (ref. EN 9100:2009/9110:2009)" in revision 1	SG	DIR	AD
Rev.	***Date***	***Description***	***Prepared***	***Verified***	***Approved***
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This document is an official translation, but the legally valid version is only in Italian language

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1.0 SCOPE AND FIELD OF APPLICATION

This Regulation defines the requirements with which an Organisation requesting certification of its Quality Management System (QMS) must comply in order to obtain and maintain the certification issued by ICIM according to the aerospace schemes EN9100-9120 and for registration in the relevant register of organisations holding certification.

ICIM services are available, without any discrimination, to any Organisation that requests them in compliance with this Regulation; such services do not include consultancy activities relating to the preparation of QMS documentation or to the implementation of the quality system itself.

The application of this Regulation is overseen by an Impartiality Safeguarding Committee (CdI), in which the parties interested in certification are represented.

The ICIM certificate is the document by which ICIM certifies that the requesting Organisation operates with a QMS conforming to the reference standards.

The Organisation, not the Certification Body, is responsible for conformity with the Certification requirements.

The Certification Body is responsible for evaluating sufficient objective evidence on which to base a certification decision.

2.0 REFERENCES

The reference standards for QMS certification are those indicated below and are to be considered applicable in the latest valid edition.

UNI EN 9100:2018	Quality management systems – Requirements for organizations in the aviation, space and defence industry
UNI EN 9120:2018	Quality management systems – Requirements for distributors in the aviation, space and defence industry
UNI EN 9101:2023	Quality management systems – Audit requirements for organizations in the aviation, space and defence industry
UNI EN 9104-1:2024	Aerospace series – Quality management systems – Part 1: Requirements for aviation, space and defence quality management system certification
UNI EN 9104-002:2016	Aerospace series – Quality management systems – Part 002: Requirements for oversight of aerospace quality management system registration/certification processes
UNI EN 9104-3:2023	Aerospace series – Quality management systems – Part 3: Requirements for training, development, competence and authentication of aviation, space and defence auditors
UNI EN ISO 9000:2015	Quality management systems – Fundamentals and vocabulary
UNI EN ISO 9001:2015	Quality management systems – Requirements
UNI CEI EN ISO/IEC 17000:2020	Conformity assessment – Vocabulary and general principles
UNI CEI EN ISO/IEC 17011:2018	Conformity assessment – Requirements for accreditation bodies accrediting conformity assessment bodies
UNI CEI EN ISO/IEC 17021-1:2015	Conformity assessment – Requirements for bodies providing audit and certification of management systems – Part 1: Requirements

UNI CEI EN ISO/IEC 17021-3:2019	Conformity assessment – Requirements for bodies providing audit and certification of management systems – Part 3: Competence requirements for auditing and certification of quality management systems
UNI CEI EN ISO/IEC 17024:2012	Conformity assessment – General requirements for bodies operating certification of persons
UNI EN ISO 19011:2018	Guidelines for auditing management systems
IAF GD 3:2003	Guidance on Cross Frontier Accreditation
IAF MD 1:2018	IAF Mandatory Document for the Audit and Certification of a Management System Operated by a Multi-Site Organization
IAF MD 2:2017	IAF Mandatory Document for the Transfer of Accredited Certification of Management Systems
IAF MD 4:2018	IAF Mandatory Document for the Use of Information and Communication Technology (ICT) for Auditing/Assessment Purposes
IAF MD 5:2019	Determination of Audit Time of Quality, Environmental, and Occupational Health & Safety Management Systems
IAF ML 4:2016	Policies and Procedures for a MLA on the Level of Single Accreditation Bodies and on the Level of Regional Accreditation Group
ICIM 0001CR	ICIM General Regulation
ICIM 0002CR	Management Systems Regulation
Accredia RG-01 rev. 6	Regulation for the accreditation of Certification, Inspection, Validation and Verification Bodies – General Part
Accredia RT - 18 Rev. 06	Requirements for the accreditation of bodies operating quality management system certification for companies in the Aerospace, Security and Defence sector
IAQG OPMT ICOP Resolutions Log	
IAQG FAQ 9101, 9104, 9100, 9120	
IAQG SCMH	Supply Chain Management Handbook
UNI EN 9102:2024	Aerospace series – Quality systems – First article inspection requirements
UNI EN 9103:2023	Aerospace series – Quality management systems – Variation management of key characteristics
UNI EN 9162:2018	Aerospace series – Self-audit programmes for aerospace operators
UNI EN 9131:2020	Aerospace series – Quality management systems – Nonconformance Data Definition and Documentation
UNI EN 9132:2017	Aerospace series – Quality management systems – "Data Matrix" quality requirements for parts marking
UNI EN 9133:2018	Aerospace series – Quality management systems – Qualification procedure for aerospace standard parts
AS9100D	Quality Management System – Requirements for aviation, space, and defence organizations

3.0 DEFINITIONS

For the purposes of this Regulation, the definitions set out in the 9100 series standards, UNI CEI EN ISO/IEC 17000 and UNI EN ISO 9000 apply; the following additional definitions, drawn from EN9101 and EN9104, also apply.

- **Adequacy of the quality system**

  In this context, adequacy means that the Supplier's specific documentation satisfies the objectives of the scope of the Organisation's specific activities.

- **Aerospace**

  The business of designing, manufacturing, maintaining, distributing, or providing support/assistance of aeronautical, space or Defence vehicles, or engines, accessories, or parts and components; and all related activities, including vehicle maintenance operations and parts distribution.

- **Auditor**

  Person who has the competence to conduct an audit.

  Note: the terms auditor, assessor and inspector are to be considered equivalent.

- **CAAT - Computer Assisted Auditing Techniques**

  Audit methodology conducted with the support of Information Technology tools as described in document IAF MD4

- **Conformity (of the quality system)**

  Fulfilment of the requirements of the applicable standards and therefore when no Major or minor Non-Conformities are found during the Audit.

- **Containment**

  Action to control and mitigate the impact of a non-conformity and protect customer operations (stopping the problem from getting worse); includes correction, immediate corrective action, immediate communication, and verification that the non-conforming situation does not further deteriorate.

- **Capability**

  Ability of an Organisation, System or Process to produce a Product and/or Service capable of meeting the requirements for that Product and/or Service.

- **Value chain**

  A business process that delivers a product or service to a customer. The process stages may produce or use intermediate goods, services or information to deliver the final product or service.

- **Effectiveness (of a process or quality management system)**

  Degree of realisation of planned activities and achievement of planned results.

- **Efficiency**

  Ratio between results achieved and resources used to achieve them.

- **Objective Evidence**

  Qualitative or quantitative information, documentation or findings pertaining to the quality of a product or service, or the existence and application of a QMS element, based on observations, measurements or tests and which can be verified.

- **Technical Expert**

  Person who provides specific knowledge or expertise to the audit team.

  Note: the specific knowledge and expertise relate to the Organisation, process or activity to be audited..

- **Audit Team**

  One or more auditors performing an audit, supported, if required, by technical experts.

  Note: the terms assessment team and audit team are to be considered equivalent..

- **Non-conformity**

  Non-fulfilment of a requirement

- **Major non-conformity**

  Non-conformity that affects the ability of the management system to achieve the expected results.

  Furthermore, a major non-conformity may be found in one or more of the following situations:

  - a non-conformity whose effect is judged to be detrimental to the integrity of the product or service;
  - the absence or total inadequacy of a system to satisfy a standard requirement of the 9100 series, a customer requirement for the QS, or documented information defined by the organisation;
  - any non-conformities that may result in the probable delivery of non-conforming products or services; and
  - a condition that may cause failure or reduce the usability of the product or service and its purpose.

  For Major Non-Conformities, ICIM requires on-site closure by means of follow-up, unless authorised by the coordinator with documented justification by the lead auditor. The need for such an audit will be signalled by the Lead Auditor at the end of the audit in which the Major Non-Conformity was identified, and it must be planned within the NC closure timeframes.

- **Minor non-conformity**

  Non-conformity that does not affect the ability of the management system to achieve the expected results.

  Furthermore, a minor non-conformity may be a single deficiency within a system or an error in relation to conformity with a standard requirement of the 9100 series, a customer-defined QS requirement, or in relation to documented information defined by the organisation.

  NOTE: Multiple minor Non-Conformities relating to the same requirement (e.g. similar Non-Conformities relating to different sites or different departments/functions/Processes within the same site) may represent a total failure to comply with the System and may therefore be considered as a Major Non-Conformity.

  It is specified that the verification of the Effectiveness of Corrective Actions may be carried out at times subsequent to the closure follow-up, depending on the various operational situations.

  Generally, for minor Non-conformities a documentary closure is acceptable. However, a field follow-up may be necessary due to the number and/or type of Non-Conformities found. This situation will be indicated by the Lead Auditor at the end of the audit.

- **Opportunity for Improvement**

  Observed situation that does not represent a true "Non-Conformity" (either major or minor), but for which the results obtained, also considering the assessor's experience in that specific activity, are not judged as optimal. These opportunities must be recorded in the final report.

- **Certification Body**

  Body that carries out conformity certification.

- **Organisation**

  Organisation means a company, firm, enterprise, body or institution, public or private, that has its own functional and administrative structure connected to ICIM by contractual agreements that provide for compliance with the requirements set out in the ICIM regulation for QMS certification.

- **Process**

  Set of interrelated or interacting activities that transform inputs into outputs.

- **Product, Service**

  Result of a process. Result of the Organisation's activities that must conform to pre-established specifications which may be national or international, requirements developed by a Customer or internal to the Organisation, or other identified documents.

- **Online Aerospace Supplier Information System (OASIS – On-line Aerospace Supplier Information System)**

  The IAQG OASIS online database contains information about participating national aerospace industry associations (NAIAs – National Aerospace Industry Associations), National Accreditation Bodies (NABs), Accredited Certification Bodies (CBs), Authenticated Aerospace Auditors (AEA – AA), Certified Organisations and assessment results.

- **Site**

  A permanent location where an organisation produces a product or provides a service.

- **Certifiable structure**

  The term identifies how companies operating in the aviation, space and defence sector are structured. Defining the structure is essential for establishing an effective audit programme and for providing visibility to the industry through the OASIS database.

  The certifiable structures are as follows:

  - Single site – The organisation has only one site. It may operate in one or more buildings at this site. The organisation may produce one or more products or product families through one or more processes.
  - Multi-site – The organisation has an identified central function and a network of sites where activities are carried out fully or partially. All sites, except the central office, perform substantially the same work and/or processes.
  - Campus – The organisation has an identified central function and a decentralised, sequential and connected production process. The output of one site is the input of another site to realise the final product or service; single value chain.
  - Several Sites – The organisation has an identified central function and a network of sites that do not meet the criteria for multi-site or campus organisation.
  - Complex – The organisation has an identified central function and a network of sites consisting of any combination of multi-site, campus or several sites.

- **Customer satisfaction**

  Customer perception of the extent to which their requirements have been met.

- **Surveillance**

  Activity by which ICIM verifies the maintenance of conformity with the QMS certification requirements.

- **Special Audit**

  Unplanned activity in the audit programme (initial audit stage 1 and stage 2, surveillance, renewal) but generated either by a customer request (e.g. site transfer, extension of certification scope, site extension) or carried out on the occasion of transfer from another body, or following reports from third parties (in particular OEMs in the aerospace sector) in case of a serious problem (supported by objective evidence such as feedback on OASIS)

- **Central Office**

  The organisation's site that controls the common quality management system activities of the organisation within a single certified system. May also be defined as Central Functions.

- **Operational Unit**

  Site at which the Organisation carries out the activities to which the QMS subject to the certification request applies.

- **Assessment**

  Action by which ICIM ascertains that the requesting Organisation operates in conformity with the documented QMS model for which certification is requested.

- **IAQG Resolution LOG**

  The periodically updated ICOP Certification Scheme Resolutions Log document provides an indication of the resolutions approved in relation to standards 9104-1, 9104-2, 9104-3 and their applicability to different geographical areas (EAQG for Europe) and any expiry date. The requirements are to be understood as interpretation or clarification of the requirements of the standards. They must therefore, from the effective date, be applied by all scheme actors (including certification bodies)

4.0 GENERAL CONDITIONS

For ICIM to activate the certification process, the requesting Organisation must:

- have a Quality Management System that meets the requirements of the model chosen within the 9100/9120 scheme and any particular requirements established for the type of process/product/service, considering applicable mandatory requirements and the specific requirements of aerospace manufacturer customers;
- have a Quality Management System that is the result of preventive industrial production risk assessment actions, also considering the methodology proposed by the aerospace standard EN 9100/9120.

  Note: this approach makes it possible to identify the risks of possible anomalies within the System and in relation to Production Processes, and to define the most appropriate control method. The prerequisite for activating the assessment process is the analysis of product and order criticalities, as well as the related processes, activities and/or operations that may impact on functional and performance requirements thereof, and the analysis of their impact on the requirements of Aerospace Standards, mandatory requirements and those specific to aerospace manufacturers. On the basis of such documentation, specific operational controls must be defined, including audit activities, technical and instrumental inspections, as well as the relevant records, useful for the management of risk factors.

- accept the conditions set out in this Regulation and the contractual conditions for certification.

The contractual conditions for certification:

- define the applicable QMS model, identifying the reference standards;
- identify the Organisation and the Operational Unit(s) in which the activities subject to QMS certification are carried out;
- identify the type of certifiable structure;
- define the processes/products/services subject to QMS certification;
- define the duration of the audits;
- define the phases of the certification process;
- (initial audit and maintenance audit);
- establish any particular conditions for the application of this Regulation, which include the general criteria for conducting assessments and granting certification.

To obtain QMS certification, the Organisation must have prepared and maintained an active and fully operational QMS conforming to the requirements of standard 9100/9120, and any other regulatory references contractually applicable to the management system.

The QMS is considered fully operational when:

- it has been applied for at least 12 months, during which performance data from key operational processes are available;
- the internal audit system is fully implemented and its effectiveness can be demonstrated; a complete cycle of internal audits has been carried out and corrective actions in response to findings have been implemented;
- at least one complete management review of the system has been carried out and documented;
- the objectives necessary to achieve results in accordance with Customer requirements and company policies have been defined;
- the processes necessary to ensure the Organisation's objectives in compliance with the specific Customer requirements and applicable mandatory and legal requirements have been defined, controlled and monitored;
- actions for the continuous improvement of processes and the quality of products or services provided have been implemented.

The initial audit process for ICIM's verification of the QMS requirements referred to in the above section 4.3 is structured in the following Phases:

Pre Audit	Optional, not part of the certification process
Phase 1 Audit	Adequacy review
Phase 2 Audit	On-site assessment audit

During the Pre-Assessment activity or at any rate during the Phase 1 audit, ICIM is informed of the applicable specific requirements, the definition of any classified material or material with particular export requirements, and which areas may have access restrictions for the audit team.

Requirements relating to classified material or material subject to particular export requirements must be communicated by the company to enable access for the auditors, and must be included in the service

contract and activity planning. The certification scope cannot include processes that have not been verified with sufficient depth to verify the organisation's conformity. Furthermore, the OASIS administrator proposed by the organisation is registered. At this stage the organisation undertakes to send ICIM information on which aerospace customers it is a tier 1 or tier 2 supplier for. The Organisation being certified also undertakes to transmit the percentage of turnover achieved for customers in the aviation, space and defence sector.

During the initial, surveillance or renewal audit of the QMS, the Organisation that has activated the certification process with ICIM must guarantee ICIM auditors free access to the operational areas, information and documentation necessary to carry out the visit programme. This right of access must be extended, when required, to auditors accompanying ICIM for accreditation and/or mutual recognition agreements, under penalty of denial of certification or suspension of certification in the event of non-compliance. Accreditation Bodies (ABs), IAQG OEM (Original Equipment Manufacturer) members, Customer and Authority or Government and/or Regulatory Body representatives may accompany the assessment team as observers of the assessment process at any time. In addition, certified organisations must allow ICIM access to Tier 1 and 2 data in the OASIS database. AQMS certified organisations must allow access to Tier 2 data in the OASIS database to their customers and aviation, space and defence authorities, if requested, unless they can provide justifications. If a certified organisation loses certification (suspension or withdrawal status of the certificate), it must immediately notify its Aviation, Space and Defence customers. Organisations must identify an OASIS data administrator who is responsible for notifying ICIM of significant changes in the organisation. Organisations must consent that AB representatives, OP Assessors, representatives of their Customers and authorities may accompany ICIM auditors during an audit for the purpose of conducting witness surveillance or to confirm the effectiveness of ICIM's audit process.

Processes and activities where it is not possible to carry out an adequately thorough verification cannot be included in the certification scope; they may only be declared as excludable if they fall within the permitted exclusions of the reference AQMS Standard, i.e. within Chapter 7 of the reference standard.

When the Customer or the Government Authority representative participates in the Audit, the Head of the assessment team shall have the authority to include all findings raised by these representatives in the Audit documentation. Any other restrictions arising for maintenance audits must be communicated by the Organisation and adequately clarified before they are conducted.

In the event that during the initial, surveillance or renewal audit the need arises for audits on processes outsourced to suppliers, the Organisation (Customer) must ensure ICIM auditors and, when required, accompanying auditors (see previous point 4.6) free access to the operational areas of its suppliers.

The grant of the certificate and the maintenance of certification are subject to payment of the applicable fees.

5.0 CERTIFICATION PROCESS FOR THE QUALITY MANAGEMENT SYSTEM

The certification body may not employ assessors who have provided certain clients (Companies) with consultancy or training services relating to the certification of that supplier within the last two years; they will not be authorised to carry out certification activities for those clients (Companies).

More than one preliminary assessment at any site of the same Company will be considered as consultancy.

A complete assessment of all requirements of the applicable AQMS standards is required across all working shifts present in the Organisation, for the initial assessment and the Renewal audit. In surveillance audits, the audit plan will ensure coverage of all working shifts.

The assessment of multiple plants for a single certificate must be conducted by assessing each plant in accordance with the requirements of the applicable AQMS standard prior to issuance of the Certificate.

For organisations seeking certification in accordance with standard 9100/9120 that have more than one site, it should be noted that site sampling is not permitted during the assessment audit.

Temporary sites of the Organisation cannot receive certification.

The certification process will be carried out in accordance with the provisions of EN 9104, depending on the type of certifiable structure identified.

Initial certification: the central office and all sites will be subject to audit.

Surveillance and re-certification: depending on the type of certifiable structure identified, as provided for in standard 9104-001, paragraph 8.2.

The Audit Programme issued for organisations that satisfy IAF MD1 but not IAF MD3 must provide that each site is audited at least once during surveillance activities; the overall man-day count will be distributed across sites based on the number of employees at each individual site.

The Audit Programme for such organisations must demonstrate that each site is assessed at least once every 36 months. In the re-certification visit, the central functions and all sites of the organisation will be visited.

The duration of the field audit at each site must correspond to the duration provided in tab.2 of EN 9104 for each site considered, and must therefore derive from the specific man-day calculation for the site itself. Relative to tab. 2, 0.5 days will be added for the documentation activities required by 9101 for all stage 2, surveillance and re-certification audits. This activity may be carried out on-site or off-site. For special audits, the need to add additional time will be assessed on a case-by-case basis.

Central functions are counted in the calculation of audit days, similar to a production site.

The central functions of the multi-site Organisation will be subjected to audit during every audit.

The Head of the assessment team will present an assessment report to the Organisation using the forms required by the scheme (which will be entered in the OASIS database) comprising:

- Non-Conformity Report (NCR) – (Form 4 9101)
- Process Effectiveness Assessment Report (PEAR) (Form 3 9101) relating to Product Realisation Processes and, upon specific request by the Organisation and as contractually agreed, also on other Processes;
- Audit Report (Form 5 9101) (Phase 2, Surveillance, Renewal/Approval) and (Form 6 9101) for Special Audits;
- QMS Process Matrix Report (Form 2 of 9101)

also declaring, at the closing meeting, the audit findings comprising at least any Non-Conformities/OFIs, the conformity and effectiveness of the Quality Management System, the sampling carried out, the post-audit process including the management of complaints and appeals, the results of PEARs (scores) and further requirements of the Aerospace Standards, and making any "recommendation for certifiability" to the ICIM deliberating functions.

The assessment outcome, the Audit Report and the associated documentation defined by standard 9101 will be made available in final form to the organisation within 15 days of the end of the audit by downloading from the OASIS portal. Any NCR forms and related PEAR documents must be released to the client. During the closing meeting the Head of the Audit Team presents to the Company any Non-Conformity Reports (NCRs) that will form part of the Audit documentation. These highlight any deviations (major and/or minor non-conformities) from applicable requirements and any recommendations for improvement. Upon request from the Organisation, the Certification Body must leave a copy of any additional information relating to the results of the assessment.

During Surveillance Audits and Special Audits, the Head of the Audit will inform the Organisation if the Non-Conformities found compromise the current Certification and, if the Certification is to be suspended, an appropriate plan of subsequent actions between the Organisation and the Head of the Audit must be defined

and agreed. If agreement on the subsequent Actions cannot be reached, an appeal may be made to the competent function for the ICIM aerospace scheme deliberation to activate the possible appeals process.

The procedures for entering audit documentation are those defined by the OASIS new-gen flow and provide for the entry of documents by the Head of Audit and confirmation by the certification body, which must carry out the deliberation[1] and entry of the certificate within a maximum of 30 days for initial audits (from the date of certification) and renewals, and 90 days for surveillance audits (from the date of the last day of the audit).

Note: The management of any Non-conformities will be carried out in OASIS directly by the Head of Audit and the customer representative until approval of corrective actions.

5.1 Outsourcing

With regard to typical business processes that impact on the Conformity, Safety, Reliability and Airworthiness of products, the Organisation may decide to outsource them in full or in part to external suppliers, based on technical-economic opportunity assessments. If these activities and/or Processes are outsourced, the Organisation nonetheless retains full responsibility and control competence, including verification activities.

Note: Outsourcing may also be carried out for design and production activities, where human resources from different organisations may be employed, but operating within the processes and at the sites of the certified or being-certified organisation.

The organisation designated for Outsourcing activities must also undertake all those verification activities, including audits on processes/products, that are capable of providing adequate confidence in the level of reliability of those outsourced processes, with the aim of achieving production conforming to order, mandatory and customer-specific requirements.

Where human resources from supplier organisations operate on processes critical to the product at the sites of the certified/being-certified Organisation, those human resources must be integrated into Company processes with assessment, training, monitoring and motivation methods comparable to those adopted for internal human resources, in order to have adequate confidence in the effectiveness of productive activities. In the case of purchasing parts to be incorporated into the finished product, the organisation must assess the potential impact on Conformity, Airworthiness, Safety and Reliability requirements, and where applicable, request appropriate Declarations of Conformity from Suppliers, establishing in detail the methods of acceptance inspection.

5.2 Offer

The Organisation wishing to activate the QMS certification process must communicate to ICIM all the essential data to enable it to formulate a correct and complete economic offer; in particular, the following must be communicated:

- the applicable reference standards;
- the essential data of the Organisation and related activities;
- any exclusions of standard elements and their justification;
- identification of the Organisation's processes, internal processes and externally outsourced processes, that influence conformity with applicable requirements;
- number of sites subject to certification and related activities carried out, the number of employees at each site being certified operating in the aviation, space and defence sector; the indication of the workforce must include all Human Resources, under any contractual arrangement, operating at the sites subject to certification;
- the applicable type of certifiable structure.

The request for an offer from the Organisation must be made by sending the specific "Request for Service Offer" form, completed in all its parts, available on the website www.icim.it, and must include the definition of the type of certifiable structure (if not a single site).

ICIM, on the basis of the data indicated in the "Request for Service Offer" and in conformity with the applicable provisions of the standards and accreditation rules, prepares and sends the offer to the Organisation.

Certification against the requested AQMS standard will include UNI EN ISO 9001 system certification for the same field of activity audited for the aviation, space and defence sector; any request for additional activities or sectors subject to UNI EN ISO 9001 certification must be specified by the organisation and cannot be included within the 9100/9120 audit duration, as this will expressly require an additional timeframe that will be offered to the organisation as appropriate.

In the event of acceptance of the economic offer, the Organisation formalises the certification request by sending it signed to ICIM, duly completed, stamped and signed by the legal representative of the Organisation, referencing the offer of which it forms an integral part.

Combined and integrated audits. The audit against multiple standards (EN 9100 and EN9120) requires additional minimum audit days based on the level of integration of activities and processes between the primary and secondary standard (see §8.2.3 of 9104-001: over 80% – fully integrated; between 50% and 80% – partially integrated; less than 50% – not integrated). For fully integrated systems the table days must be increased by 15%; for partially integrated systems by 30%; for non-integrated systems the table must be used twice (100%).

5.3 Offer Review

Upon receipt of the offer and related attachments, ICIM reviews them to verify the completeness of the information, with particular reference to:

- the definition of the certification scope;
- the identification of the certifiable structure;
- verification of ICIM's competence and capacity to carry out the specific certification activities.

If any data differs from that communicated for the preparation of the offer, or if the submitted documentation is incomplete, ICIM informs the Organisation.

Following the positive outcome of the Review, ICIM proceeds to register the Organisation in the Information System and to communicate the acceptance of the certification request.

The Organisation's request, which expressly references this Regulation, and the related acceptance by ICIM, contractually formalise the relationship between ICIM and the Organisation and the applicability of this Regulation.

The contractual agreement between ICIM and the Organisation comprises:

- the initial certification audit composed of its phases;
- subsequent surveillance and re-certification audits.

ICIM communicates to the Organisation the name of the personnel assigned to carry out the certification audit (Phase 1 and Phase 2); the Organisation has the right to request the replacement of the personnel assigned by ICIM if there are justified conflicts of interest within 5 working days of the notification date. The auditor notified to the organisation cannot be replaced without justification. Any requests from the organisation for changes to the audit team must be submitted in writing and any such requests must be justified in writing.

5.4 Pre-Assessment

Before commencing the certification activity, the Organisation must confirm to ICIM the existence of the requirements for applicability of aeronautical certification (being a supplier in the aviation, space and defence chain), and as a minimum during phase 1 the following information must be collected:

- turnover for the aviation, space and defence sectors, as a proportion of total turnover;
- confirmation of the number of personnel operating in the aviation, space and defence sector at each site and the overall workforce;
- complete list of the main aviation, space and defence sector customers and their specific requirements;
- any classified activities that may restrict audit activities;
- confirmation of the requested/agreed certification structure;
- the phase 1 notification.

ICIM reviews the composition of the audit team and any technical experts required for the assessment audit. Before the Phase 1 Audit is carried out, the Team Leader of the audit will be confirmed and other possible members of the Audit Team will be identified. The auditor must of course be qualified for the applicable scheme 9100 and/or 9120. In the case of combined audits, the auditor verifying the activities relating to the individual scheme must in any case be qualified for that scheme.

5.5 Phase 1 Audit

The Phase 1 audit is intended to review the adequacy of the design of the Quality Management System and the evidence of the conduct of those activities that allow it to be considered effectively applied in relation to the scope of the certification, and to ascertain whether the Organisation is ready for Phase 2.

Phase 1 is conducted at the Organisation's sites involved in the certification process.

The Phase 1 Audit, which will be conducted by the nominated Team Leader, must include an on-site visit.

For Organisations with a single Quality Management System but more than one site, the Phase 1 Audit must also include an assessment of the central functions identified with responsibility for the administration, control, Internal Audits, Review and maintenance of the Quality Management System. Furthermore, the Audit must include an assessment of a significant and representative number of sites, particularly those with different technologies and activities.

The Phase 1 Audit must include a visit to the Premises to enable the Audit Team to gain a greater knowledge of the Processes, Plants, Areas, products and the Organisation's state of readiness for the Phase 2 Audit.

Phase 1 will be conducted on-site at the Organisation, to protect the confidentiality of documentation and to facilitate the collection and analysis of information; between phase 1 and phase 2 there must be a sufficient period of time for ICIM to evaluate the information collected; consequently, it cannot be carried out on the same day or on the following day.

In particular, phase 1 must be carried out to collect sufficient information to:

- confirm the Audit Programme;
- review the possible need for technical experts and/or additional Assessors for the formation of a competent team;
- determine any additional activities to meet all requirements for initial certification;
- assess the location and particular conditions of the Organisation's site, confirm that all sites involved in the Certification have been identified, confirm the choice of certifiable structure and initiate an

exchange of information with Organisation personnel in order to establish the degree of readiness for the Phase 2 audit;

- review the Organisation's understanding and understanding of the standard requirements, with particular reference to the identification of key performance indicators or significant aspects, processes, objectives and operations of the QMS, application of Aerospace standards and systematic approach to supply risk analysis;
- collect the necessary information on the scope of the QMS, processes and the Organisation's location(s), including the relevant legal and regulatory aspects and conformity therewith;
- confirm that the identified exclusions are declared in the Quality Manual;
- focus the planning of the Phase 2 audit, acquiring sufficient knowledge of the QMS and the activities at the Organisation's site, with reference to possible significant aspects;
- verify that the organisation has registered the person who will hold the Administrator role as a user on the OASIS database.

The documentation and information that the Organisation must make available to the ICIM personnel assigned to carry out the Phase 1 audit are listed below:

- description of Processes with evidence of sequences and interactions, including the identification of all outsourced processes;
- measurements and trends of Business Performance over the preceding 12 months;
- evidence that the requirements of the applicable 9100 series Standards have been taken into account in the Documented Procedures established in the Organisation's Quality Management System;
- interactions with support functions at the site and/or remote sites;
- evidence of Internal Audits of Processes/Procedures including internal and external QMS requirements;
- list of qualified internal assessors;
- the latest results of the Management Review;
- list of main (minimum the top 5) Customers in the Aerospace, Space and/or Defence sector, including those requiring conformity with 9100 series Standards; an indication of the proportion of turnover represented by each Customer and, if applicable, specific QMS requirements, is also required;
- list of applicable specific Customer requirements;
- exact number of Employees (full time, part time, contract, temporary) in the Aerospace, Space and Defence field at the time of the audit;
- number of shifts and shift rotation in Production and/or Maintenance;
- identification of the highest Risks associated with Processes and Products;
- risk management and related tools (FMEA – Failure Mode and Effect Analysis);
- identification of Special Processes carried out or assigned to Suppliers; in the event that the Organisation declares that Special Processes are outside the scope of Certification, the Team Leader will assess the justification for such exclusion;
- applicable mandatory requirements;
- supplementary requirements for configuration management;
- project/programme management;

- continuous improvement activities;
- "On Time Delivery" and quality performance measures;
- identification of special requirements/critical points, including key characteristics;
- production process verification;
- F.A.I. requirements, as reported in contracts;
- prevention programmes (e.g. F.O.D – Foreign Object Damage) and/or human factors;
- special working environments (e.g. ESDS – Electrostatic Discharge Sensitive, clean room);
- customer presence at the organisation (e.g. Resident, regular meetings, etc.);
- evidence of customer satisfaction and list of complaints including verification of customer reports, performance evaluations;
- any customer approval status (limited, trial, suspension, revocation);
- restricted access customer areas or restricted/confidential information;
- non-applicability of 9100/9120 series standards, which must be limited to clause 8, and the supporting justifications;
- export limitations and/or controls (e.g. ITAR – International Traffic in Arms Regulations, EAR – Export Administration Regulation);
- customer-delegated inspections and authority for the Materials Review Board (MRB);
- direct shipping/delivery authorised by the customer.

The findings of the Audit will be recorded in the Phase 1 Audit Report, which will be delivered in copy to the Organisation at the end of the Audit.

ICIM will also review the status of any areas of concern to define the preparation for Phase 2.

Also for Aerospace distribution (EN 9120 Standard), the Phase 1 Audit must be conducted, aimed at assessing the adequacy of the documentary system in relation to the certification scope and ascertaining whether the Organisation is ready for Phase 2, whilst also providing appropriate information for the planning of the subsequent Audit.

At the end of Phase 1, the ICIM auditor issues to the Organisation the Phase 1 Audit Report (Form 1 9101), which records among other things any observations found, including those that could be classified as non-conformities during the Phase 2 audit.

The actions taken by the Organisation to resolve such observations are, generally, verified during the Phase 2 audit.

In the presence of observations deemed particularly significant, in the judgement of the personnel who conducted the Phase 1 audit, their complete resolution may be required before the Phase 2 audit at the Organisation.

5.6 Phase 2 Audit

The Phase 2 audit, to be conducted at the Organisation, is carried out after the positive outcome of Phase 1, in order to verify on-site the application of the QMS, as documented in Phase 1 and in conformity with the requirements of the reference Standards.

Any areas highlighted in phase 1 classified as "areas of concern", i.e. that would be considered potentially Non-Conforming during a Phase 2 audit, must have been resolved by the Organisation before the execution of Phase 2.

When the conditions verified in the Phase 1 audit change, ICIM must carry out a second Phase 1 visit before proceeding with the assessment visit.

Furthermore, in conformity with 9101, the phase 1 audit must be repeated if phase 2 is conducted more than six months after the phase 1 date.

Phase 1 and Phase 2 Audits cannot be conducted on the same day and/or on consecutive days.

ICIM, having verified the requesting Organisation's availability to receive the visit, defines and communicates the audit plan to the Organisation.

At the start of the Audit, the Inspection Audit Team holds an opening meeting with the Top Management or with the Management Representative of the Organisation in order to:

- introduce the participants;
- clarify the roles of the AB (Accreditation Body), OP (Other Party) Assessors, or NAAs (National Aviation Authorities) if the Certification Audit is subject to a "Witness Audit";
- Participants and the positions of those present at the opening meeting will be recorded on appropriate forms;
- confirm the formal communication channels between the audit team and the client;
- confirm the availability of resources and facilities required by the audit team;
- confirm confidentiality matters;
- confirm the availability of roles and the identity of any observers and/or accompanying persons;
- communicate the reporting method, including any classification of audit results;
- provide information on the conditions under which the audit may be terminated early;
- confirm that the audit team leader and the audit team, representing the certification body, are responsible for the audit and will control the execution of the audit plan, including audit activities and audit trails;
- confirm the status of previous audit results;
- communicate the methods and procedures to be used to conduct the sampling-based audit;
- confirm the language to be used during the audit;
- confirm that, during the audit, the client will be kept informed of the progress of the audit and any issues;
- inform the client of the possibility to raise questions;
- confirm any restrictions on areas of the Organisation for Security reasons;
- establish any other requirements for the conduct of the audit.

During the opening meeting, the Team Leader of the Audit may decide to carry out a tour of the site areas to check for any changes since the previous visit, or to familiarise other members of the audit team with the site.

During the Audit, it is the responsibility of the Audit Team to ensure coverage of the entire certification scope, recording appropriate evidence on the QMS (Form 2 9101) and on the PEARs (Form 3 9101).

If the Company carries out Special Processes, the Audit Team will assess the validation of such Processes as well as the monitoring, measurement and control of these Processes.

For Special Processes outsourced externally, the Audit Team will assess how the Organisation's Supplier controls such Processes in accordance with the imposed requirements.

The Audit Team will also assess the use of any Special Process Suppliers designated/imposed by the Customer.

During the Audit, the Audit Team, in addition to the QMS (Process Matrix Report), will complete other registration Forms required by the aerospace scheme on the activities, such as the PEAR(s) (Process Effectiveness Assessment Report) and any NCRs (Non-Conformance Reports).

For each process analysed, at least one sample must be taken in relation to an order to verify conformity with the standard requirements. If issues emerge, at least two further orders must be sampled, for which no issues of the same type must emerge. If, on the contrary, they do emerge, an NC relating to the verified aspect and of proportionate weight to the findings must be raised.

Any OFIs or NCms must be comprehensively justified to provide evidence of their correct classification. OFIs / NCms will be managed similarly during the usual certification process in surveillance or renewal audits.

Before and during the Phase 2 Audit, the head of the Audit Team must also complete the QMS Process Matrix Report for verification of the exhaustive analysis of processes against applicable requirements.

Note: The QMS Process Matrix Report has multiple functions:

- *after Phase 1 for the preparation of the Phase 2 audit plan;*
- *after Certification or re-certification to prepare the planning of the Surveillance cycle;*
- *as an aid for the correlation between the Standard requirements and the Organisation's Processes.*

As a record of evidence not reported on the PEARs (9101)

At the end of the audit, the Team discloses, at the closing meeting held in the presence of the Top Management of the Organisation being audited or a delegated Management Representative, the audit findings comprising any Non-Conformities/OFIs, the conformity and effectiveness of the Quality Management System, the sampling carried out, the post-audit process including the management of complaints and appeals, the results of PEARs (scores) and further requirements of the Aerospace Standards, and making any "recommendation for certifiability" to the ICIM deliberating functions.

The Team Leader of the Audit Team will also present the methods used by the Audit Team to record the evidence of the Audit, including the degree of Non-conformities (Major, minor) and the process used to report such Non-Conformities, including the consequences relating to the maintenance or suspension of Certification when necessary and for closing the Non-Conformities. In this regard, when necessary, the Organisation will be informed of the correction timeframes for Non-Conformities and the Planning of Corrective Actions, as well as the further actions required of the Audit Team after the audit (Follow-up of Corrective Actions and provision of the AR (Audit Report)).

The Organisation has the opportunity to discuss with the Team and clarify its position on the matters presented. The Head of the Audit Team will also clarify to the Organisation how any disputes and/or appeals regarding the results of the audit must be processed.

The outcome of the assessment is documented in a Phase 2 Audit Report, which highlights any deviations from the requirements of the applicable QMS model and any improvement opportunities formulated for the purpose of improving the Quality Management System.

The Phase 2 Audit Report will be made available in final form to the organisation within 15 days of the end of the audit by downloading from the OASIS portal.

The recommendations (audit outcome) that the Audit Team will provide to ICIM regarding the certification proposal will also be communicated.

ICIM, upon receipt of the Report from the Head of the Team, if it considers making changes, informs the Organisation in writing and the authenticated Aerospace assessor who issued it.

The assessed Organisation must inform ICIM in writing, in accordance with the timeframe defined in para. 5.7 (7 days for containment if applicable and 30 days for corrective actions), of the established corrective actions and subsequently provide documented evidence of their completion.

The Head of the assessment team evaluates the corrective actions proposed by the Organisation and, if it does not accept the proposed resolutions of the non-conformities identified in terms of timing and methods of implementation, informs the Organisation in writing (via OASIS).

In the presence of major non-conformities, the certification process is temporarily suspended.

The Phase 1 Audit Report and the Phase 2 Audit Report are submitted to the ICIM deliberation to assess the Certifiability of the Organisation; following the deliberation with a positive opinion, ICIM ratifies the decisions relating to the granting of Certification.

5.7 Non-Conformity Management

No certification or approval against the standards for the management of Aerospace Quality Systems or for any combination of standards for the management of Aerospace Quality Systems with ISO 9001 may be issued until all Major or minor Non-Conformities have been positively corrected with the containment Actions, root cause analysis and verification of Corrective Actions by ICIM.

If the verification of Corrective Actions cannot be achieved on the basis of a documentary examination and the objective evidence provided by the Organisation, an on-site audit or a specific follow-up audit must be conducted.

Major Non-Conformities always require a supplementary on-site audit for their closure, unless authorised by the coordinator with documented justification by the lead auditor. A Non-Conformity management process as described below is also required for Surveillance activities.

Following the issuance of Non-Conformities, detailed with a specific NCR report issued to the Organisation at the end of Phase 2, surveillance, or renewal, it will be necessary:

- that the Organisation defines and formalises the specific containment action, including correction, within 7 calendar days after the Audit and obtains approval from the Team Leader within the subsequent 14 calendar days, in the event that the Non-Conformity requires an immediate containment action;
- that the Organisation analyses and reports on the NCR (Non-Conformity Report) the root cause and the specific corrections and Corrective Actions taken and/or planned to eliminate the Non-Conformity identified within a specified period of time;
- that the Organisation agrees with the Certification Body on the Corrective Actions and a subsequent Corrective Action Implementation Plan within a maximum of 30 days from the end of the Audit;
- that the evidence against which the Non-Conformities are resolved is documented; after the completion of the Corrective Action verifications by the Body, formal communication will be made to the Organisation.

Following receipt of the above information, ICIM will proceed to:

- document the details of the evidence against which the Non-Conformities are resolved;
- formally report to the Organisation following the verification and closure of the Non-Conformity.

The NCR will therefore also be used to document the verification and closure of the Non-Conformity.

Although any containment action and correction may be examined during the Audit, the assessment and closure of the Corrective Action Plan or the Corrective Action itself relating to a Non-Conformity must not be carried out during the same Audit in which the Non-Conformity was issued.

The verification of Corrective Actions must be carried out at the Organisation in cases where it cannot be achieved by examination of documentation and/or objective evidence provided by the Organisation.

The organisation undertakes to demonstrate that it has re-established the conformity of the QMS to applicable requirements within 60 days of the issuance of the NC; failure to comply with this requirement results in the commencement of the certification suspension process for the organisation.

After implementing the Non-Conformity treatment, the organisation must implement the Corrective Actions within a maximum of 90 (ninety) days from the end of the Phase 2 Audit.

ICIM reserves the right to carry out a supplementary Audit to verify the correct application of the Corrective Actions and to reactivate the Certification process in the case of Major Non-Conformities.

If the 90 (ninety) day deadline is not met, the Organisation's QMS may be subjected to a complete Audit within 6 (six) months from the date of the Phase 2 Audit to resume the Certification process, since it was not possible to complete it within the prescribed timeframes.

In any case, in the subsequent audit, the head of the assessment team must carry out an effectiveness check of the non-conformities identified in the previous audit.

5.8 Certification Release

No Certificate may be issued in the presence of open Non-Conformities. Before issuing the certification, all Major and minor Non-Conformities must have been effectively corrected with root cause analysis and the Corrective Action verified by ICIM. Subject to any request for a supplementary investigation, the Certification function deliberates, with the positive opinion of the member with veto power, certification in accordance with the Aerospace scheme.

When certification is granted, ICIM issues the Certificate which defines and indicates in particular:

- the company name and address of the Registered Office and Operational Units for which certification is requested;
- the reference standards;
- the scope and limits of application of the QMS for which certification is issued, specifying the Organisation's activities in relation to Design, Product, Service, Process, etc.;
- for Organisations with multiple sites, the Certification scope must describe the applicable activities for each site;
- the conformity of the Organisation's QMS to the requirements of ISO 9001 and the specific applicable Aerospace Standard (9100, 9120), including the current edition level;
- that the audit was conducted in conformity with the applicable version of the sector scheme (9104/1), including the current edition level, specifying that ICIM is accredited under the ICOP scheme;
- the Certificate issue date;
- the Certification expiry date;
- the maximum validity period of the Certification is 3 (three) years and there is no possibility of extending the Certification beyond 3 (three) years.

Certification is not granted in any case if the following are found:

- unresolved major or minor non-conformities;
- product/service non-conformities relating to mandatory requirements.

In the event of non-granting of certification, the requesting Organisation is informed in writing of the reasons for this decision, specifying the deviations from the requirements for certification of the chosen QMS model that the Organisation must undertake to correct within the timeframe proposed by the Organisation and accepted by ICIM; following this, ICIM may proceed with a new complete assessment audit or a special on-site audit.

The requesting Organisation that does not accept the decision made by ICIM may request a supplementary investigation from ICIM, setting out the reasons for its disagreement, in accordance with the procedures indicated in article 14.

Following the issuance of certification, ICIM registers the Organisation in the Register of Organisations holding ICIM certification and transmits this information to the bodies (national and international) with which ICIM has mutual recognition agreements. The register records the name of the Organisation, the geographic location, the QMS regulatory reference, the scope of application and the validity status of the certification.

This register, updated at least quarterly, is made available to anyone who requests it.

Upon written request from any party, ICIM provides the means to confirm the validity of the certification.

Furthermore, after the successful completion of the Certification process, ICIM will enter the Organisation's certification data in the IAQG OASIS aerospace database, upon receipt from the Company of an appropriate data processing consent for the results achieved by the Company; the registration will be kept up to date including changes made in Surveillance or any cancellation, if the conditions exist.

The Certification deposited in OASIS will be in English with the possibility of bilingual English/Italian issuance.

Certification against both ISO 9001 and 9100 (or 9120) standards will be issued on separate certificates. Certificates for 9100 and 9120 for the same company will also be issued on separate certificates.

Additional audit time beyond that provided for by 9100/9120 must be provided if the ISO 9001 and 9100/9120 certification scopes are not the same.

6.0 MAINTENANCE AND RENEWAL OF CERTIFICATION

6.1 Duration of validity

The validity of certification is 3 (three) years from the date of issuance of the certificate.

6.2 Maintenance of certification

ICIM conducts surveillance audits of the QMS of the certified Organisation in order to verify the maintenance of conformity with the certified requirements, in accordance with the provisions of Sector Standard EN9104-001 and UNI CEI EN ISO/IEC 17021-1.

The first surveillance audit (VS1) subsequent to the initial certification audit is conducted within the twelfth (12th) month from the date of issuance of the certificate.

All other surveillance audits — namely the second surveillance (VS2) of each three-year period and the first surveillance (VS1) of subsequent three-year periods — follow the same rules, i.e. planning within twenty-four (24) months from the date of issuance of the certificate or twelve (12) months from the date of issuance of the certification renewal, respectively. Possible tolerances are permitted provided that the calendar year is not left uncovered.

Failure to comply with the above timeframes results in the application of the certificate suspension measure, for a maximum of six (6) months starting from the 1st day following the prescribed expiry deadlines. ICIM informs ACCREDIA and AIAD/CBMC (RMS) if any postponements of the scheduled VS1 dates after initial certification were to result in exceeding twelve (12) months, within fifteen (15) days of assessing the delay, indicating the cause and possible date of execution. For other surveillance audits, ICIM informs ACCREDIA

and AIAD/CBMC (RMS) if any postponements of scheduled dates were to result in the calendar year being uncovered, within fifteen (15) days of assessing the delay, indicating the cause and possible date of execution.

During the 3 (three) year validity period of the certification, 2 (two) surveillance audits are carried out.

Each surveillance audit must review part of the Organisation's processes, so that all processes relating to the QMS are reviewed within each 3 (three) year cycle.

Surveillance Audits are on-site Audits but are not necessarily audits of the entire Quality Management System and must be planned together with other Surveillance activities so that ICIM can continue to have confidence that the Certified QMS continues to meet the requirements of the applicable Standards during the period between subsequent Renewal Audits.

Also for Surveillance audits, the Inspection Audit Team is required at the opening meeting with Top Management or the Management Representative to present all the elements already indicated in section 5.6. The audit as a whole will also be conducted in a manner similar to that indicated in section 5.6 and the audit activities will include at least an examination of the following aspects:

a) Internal Audits and Management Reviews;

b) a review of the actions taken following Non-Conformities identified during previous Audits;

c) handling of Customer Complaints;

d) new specific Customer requirements;

e) effectiveness of the QMS in achieving the Objectives set by the Organisation;

f) progress of planned activities aimed at continuous improvement;

g) continued control of activities;

h) review of any changes;

i) use of Marks and any other references to Certification;

j) the procurement process.

Furthermore, design processes (where present) and production processes must be sampled at each audit, unless documented justification by the lead auditor and written authorisation from the scheme coordinator are provided.

With the exception of exclusions declared at the Assessment stage, all clauses of the applicable Standards and Processes forming part of the Organisation's Quality Management System must be audited during the full Certification cycle, and the Surveillance Audit Plan must take into account any changes in the Organisation.

The composition of the Surveillance Team may vary at ICIM's discretion, as it will be determined on the basis of the Surveillance Audit Plan; such Plans will be based on the continuous monitoring of Processes and indicators and "trends" relating to Product performance over the preceding 12 months, both in terms of Quality and compliance with delivery schedules (OTD).

Also for the Surveillance Audit, all evidence must be documented and detailed, including references to Processes, documentation and records of those Processes.

At the end of Surveillance Audits, the Team Leader will notify the Organisation on the Audit Report whether any Non-Conformities found are subject to Certification suspension; the Organisation's inability to demonstrate the effectiveness of Corrective Actions preventing the recurrence of Non-Conformities, the lack of performance monitoring or lack of operational control leads to Certification suspension.

Furthermore, design processes (where present) and production processes must be sampled at each audit, unless documented justification by the lead auditor and written authorisation from the scheme coordinator are provided.

With the exception of exclusions declared at the Assessment stage, all clauses of the applicable Standards and Processes forming part of the Organisation's Quality Management System must be audited during the full Certification cycle, and the Surveillance Audit Plan must take into account any changes in the Organisation.

The composition of the Surveillance Team may vary at ICIM's discretion, as it will be determined on the basis of the Surveillance Audit Plan; such Plans will be based on the continuous monitoring of Processes and indicators and "trends" relating to Product performance over the preceding 12 months, both in terms of Quality and compliance with delivery schedules (OTD).

Also for the Surveillance Audit, all evidence must be documented and detailed, including references to Processes, documentation and records of those Processes.

At the end of Surveillance Audits, the Team Leader will notify the Organisation on the Audit Report whether any Non-Conformities found are subject to Certification suspension; the Organisation's inability to demonstrate the effectiveness of Corrective Actions preventing the recurrence of Non-Conformities, the lack of performance monitoring or lack of operational control leads to Certification suspension.

6.3 Certification Renewal

The Renewal Audit is planned and conducted in a manner similar to that indicated in section 5.6, including the obligation for the Audit Team, at the opening meeting with Top Management or the Management Representative, to present all the elements already indicated in section 5.6.

The purpose of this audit is to confirm the continued Conformity and Effectiveness of the Organisation's Quality Management System as a whole, as well as the continued relevance and applicability to the Certification scope.

This audit will take into account the performance of the QMS throughout the entire Certification period (3 years) and will include a review of previous Surveillance Audit reports. If significant changes have occurred in the QMS, the Organisation or the context in which the QMS operates (e.g. legislative changes), it may be necessary to conduct a new Phase 1 Audit.

ICIM provides for a change of audit team on the occasion of renewal in conformity with EN 9104-001, subject to specific derogations and assessments.

The appointment of a new Audit Team could be a justification for a full or partial Phase 1 audit, including an on-site visit.

During the Renewal Audit at the Organisation, the following will be ascertained:

a) the effectiveness of the QMS as a whole in the light of any internal and external changes, and its continued relevance and applicability to the Certification scope;

b) the demonstrated commitment to maintaining the Effectiveness and improvement of the QMS in order to enhance overall performance;

c) that the operation of the certified QMS contributes to the achievement of the Organisation's Policy and Objectives.

The Certification Renewal Audit must be planned at least 3 (three) months before the expiry date of the current valid Certificate, and the Certification scope must be reviewed, verified and confirmed before the on-site visit, considering that any variation in the Organisation's approval status is examined by the Audit Team.

Scope variations require a Renewal Audit with extension, relating to new additional activities, and cannot be combined with the normal renewal activity.

Documented information and documentation relating to the QMS Processes will be examined to assess any changes, and all evidence arising from the Audit will be documented including references to the verified Processes and process documentation.

All Non-Conformities must be closed and verified by the Audit Team before a recommendation for Certification Renewal can be issued.

When the Organisation fails to comply with this timeframe and therefore does not obtain the re-issuance of the certificate within the expiry deadline, the relevant certification must be considered as expired from the day following the expiry date shown on the certificate.

Before the end of the three-year period, ICIM will send renewal quotes for the subsequent period of certificate validity.

Renewal of certification is also subject to satisfaction of the requirements indicated in article 11 of this Regulation.

If it is not possible to carry out the renewal visit within 3 years of the certificate issuance (36 months from the certificate issuance date), the certificate must be considered as expired from the day following the expiry date shown on the certificate, and the Organisation must complete a new certification process with final issuance of a new certificate. In this case ICIM will notify ACCREDIA and AIAD/CBMC (RMS) in the event of revocation and will publish the revocation status in OASIS.

6.4 Special Audits

ICIM reserves the right to carry out special audits in addition to those provided in the three-year programme at the Organisation. Special Audits may be carried out at any time during the validity period of the Certificate:

- in response to a request from an Organisation or another interested party (Stakeholder) when a serious problem has been identified (supported by objective evidence). In this case the applicant will be informed in advance of the expected dates for the Audit and apprised of the results of the Audit itself;
- in the event of transfer from another Certification Body to ICIM; in this case the audit is aimed at verifying the conditions for the transfer of another body's certificate (reports for the last three-year period, verification of NC closure...);
- in connection with changes that have occurred in the Organisation;
- in response to a request for extension of the Certification scope already granted: ICIM will review this request and establish the audit activities necessary to modify the Certification scope (commonly defined as "Extension of Scope") or to update the list of Certified Sites;
- if, following surveillance audits, deviations from the prescribed requirements are found, ICIM informs the Organisation in writing, inviting it to eliminate the deficiencies found;
- in the event of complaints and reports, deemed particularly significant, relating to non-conformity of the QMS with the requirements of the reference standard and this Regulation;
- if an IAQG OEM identifies negative performance or findings during regular Surveillance activities (e.g. process or product audits), this may trigger additional Surveillance activities by ICIM and possibly the suspension or cancellation of the Certification. Following such an event, ICIM or the OASIS database administrator will update the information;
- to Organisations whose certification has been suspended.

The certified organisation is required to promptly inform ICIM of any complaints, disputes or claims received regarding the quality of supplies and/or products output by Aerospace Manufacturers. ICIM will monitor the actions taken to remedy them.

In these cases:

a) ICIM will describe and make known in advance to the Organisation the conditions under which these unannounced visits are conducted;

b) ICIM will take particular care in designating the Audit Team due to the Organisation's lack of opportunity to raise objections to the members of the Audit Team.

The evidence and results of Special Audits will be documented using the dedicated forms provided by IAQG.

Special audits are carried out at the cost of the certified organisation.

7.0 RIGHTS AND OBLIGATIONS OF CERTIFIED ORGANISATIONS

With regard to the rights and obligations of certified organisations, reference is made to regulation 0001CR. Furthermore, the organisation must have an administrator figure who is accountable for the organisation on the OASIS database.

8.0 TRANSFER OF ACCREDITED CERTIFICATES

The transfer of a certificate issued by another Certification Body is possible provided that:

- the certificate is issued by an accredited Certification Body with a currently valid accreditation;
- the certificate issued to the organisation is currently valid;
- any non-conformities identified have not been closed and the related corrective actions accepted by the outgoing body, unless the outgoing body has ceased operations or is unable to close the non-conformities; in the case of open non-conformities, ICIM will assess the management of the non-conformities and their effective resolution – closure of these will allow issuance of the certificate.

If an Organisation with currently valid certification issued by another body accredited under the ICOP scheme in accordance with EN9104 by an Accreditation Body (AB) with a valid recognition status from IAQG submits a request for transfer of certification, ICIM carries out an audit that includes:

- the review of the certification application as set out in point 5.3 of this Regulation;
- the review of the audit reports conducted, during the current three-year period, by the accredited body that issued the certification;
- the status of non-conformities and related corrective actions;
- the possible audit at the Organisation, the extent of which depends on the state of conformity and validity of the previously issued certification.

The Organisation must also communicate to ICIM:

- the reasons for the certification transfer request;
- any observations or reports received from the competent national or local authorities;
- any complaints received and related actions taken.

The contractual agreement between ICIM and the requesting Organisation is managed in the same manner as described in point 5.3, depending on the extent of the audit activity.

In this case, the review of the Certification in force prior to the transfer will also include a special transfer audit of the Organisation's site by an AEA (Aerospace Experienced Auditor) for a detailed verification comprising a review of the previous Certification Audits of the previous Certification Body. In any case, such audits will be agreed with the Organisation prior to the visit, defining the specific reason and subject of the visit with a dedicated Audit Plan that will be presented to the Organisation in advance. This audit must also include verification of the PEARs.

Upon satisfactory completion of the above activity, ICIM issues the QMS certification which, as a rule, maintains the expiry date indicated in the previous certification.

In general, the programme already established by the body that previously issued the certificate is maintained for the conduct of surveillance and renewal audits of the QMS.

The transfer of a certificate with an expiry date within 12 months will require a new initial assessment of Phase 1 and Phase 2.

The ICIM certificate cannot be issued until all major and minor non-conformities have been corrected and the related corrective actions, including root cause analysis, have been proposed, accepted and verified by ICIM. If the closure of non-conformities requires more than 90 days, the transfer cannot take place.

The review of NC closures issued by the previous Certification Body will take place on-site during the special transfer audit.

ICIM (both as the outgoing body and as the new incoming body) must communicate with the other body to facilitate the transfer activity. It must also keep track of the communications with the other body (generally via feedback on OASIS). Notification of transfer by the company must not be used as justification for suspension or withdrawal of the certificate.

9.0 SUSPENSION, WITHDRAWAL OR REVOCATION OF CERTIFICATION

ICIM manages the activities of suspension, withdrawal and revocation of certification of conformity to standard UNI EN ISO 9001 in accordance with regulation 0001CR and the "Operational procedure for suspensions, withdrawals and revocations" (0184BP) available upon request.

Any delays in NC closure timeframes (see §5.8), whether on the part of the organisation or the lead auditor, result in suspension of the certificate. The certificate may also be suspended by ICIM for administrative reasons and the maximum duration of suspension is 6 months. If the conditions for reactivating the certificate are not met, it will be withdrawn within one month of the expiry of the suspension.

Suspension is recorded by ICIM in the OASIS database, while revocation results in cancellation of the Organisation's certification from the OASIS site by ICIM.

10.0 ONLINE AEROSPACE SUPPLIER INFORMATION SYSTEM (OASIS)

All data relating to the Certificate will be visible in the public domain OASIS database, while the details of the Audit are available in the OASIS database to users who have been granted access by the Organisations themselves. This information will not be used by IAQG (International Aerospace Quality Group) members for competitive advantage. All data stored in the OASIS database will be available to Accreditation Bodies during Surveillance (Oversight) activities. Furthermore, ICIM will guarantee access to its offices and records to IAQG members, the Accreditation Body and regulatory agencies.

Before the Certification visit is conducted, ICIM and/or the head of the Audit will inform the Organisation of the need to appoint, within the Organisation, a person (Administrator) who will be responsible for managing responses to non-conformities.

The IAQG Certification Oversight Team (ICOT) is responsible for the functionality of the OASIS database.

Responsibility for the accuracy of data in the OASIS database is as follows:

- for data relating to Organisations: the Organisations themselves;
- for Audits and Certifications: the Certification Bodies.

The OASIS online database contains information on the national aerospace industry associations registered with IAQG, Accreditation Bodies, Certification Bodies, Aerospace Assessors, Certified Suppliers (Organisations/Companies), the results of Assessment, Surveillance and Re-Certification Visits.

The heads of the assessment teams are responsible for uploading audit reports to the database and managing the corrective actions defined by organisations.

ICIM is responsible for uploading the organisations' registry data, the deliberation of the certification or renewal process and the entry of certificates into the OASIS database. All OASIS database users may send feedback information regarding the content of the database in relation to missing or incorrect data, specific requests, information regarding the performance of Organisations and any critical issues to be taken into account in subsequent audits.

ICIM may respond to feedback requests received via the OASIS database on the performance of certified organisations.

ICIM will process feedback requests on Certified Aerospace Organisations within 30 days.

If complaints are reported regarding the performance of Certified Companies, ICIM reserves the right to carry out an Extraordinary (Special) Audit on-site.

ICIM is unable to publish a certification in OASIS if the Organisation's Administrator has not completed its own registration and the registration of data relating to its Organisation in the database.

11.0 DOCUMENTATION USED TO RECORD AUDIT ACTIVITIES

The documentation used during the audit phase is that required by EN 9101.

The documentation is that indicated in 9101:2018:

Stage 1 Audit Report (Form 1), QMS Process Matrix Report (Form 2); PEAR (Form 3), Non-Conformity Report NCR (Form 4), Audit Report (Form 5), Supplemental Audit Report (Form 6).

12.0 USE OF THE LOGO

The AIAD-SCSA logo

may be used on the letterhead, invoices and any brochures of Organisations Certified according to the EN 9100/9120 scheme, maintaining the readability of the captions included in the logo itself and the original colours at the minimum dimensions of use.

13.0 CERTIFICATE

The certificate must include the Certificate Issue Date, the Certificate Reissue Date (which may coincide with the issue date) and the Certification Expiry Date, which must be equal to the issue date plus three calendar years minus one day.

14.0 MANAGEMENT OF IAQG RESOLUTIONS

Upon the issuance of new resolutions, the scheme manager is responsible for assessing their impact on the scheme documentation, auditors and other ICIM entities involved.

Therefore, using form 0958BM Valutazione_OASIS_Resolution, the scheme manager[1] will assess the possible impact of the resolution, involving both internal ICIM personnel and scheme auditors, and coordinating any actions to be taken.

[1] If the scheme manager does not have the necessary qualification, the deliberation will be carried out by a qualified expert who has not conducted the audit activity.