

ICOP Certification Scheme - TEDAE Operating Procedure
ICOP Scheme Oversight Process**Summary**

This document:

- Establishes the requirements that apply to the ICOP Scheme Oversight Process, which apply to the TEDAE CBMC within the framework of the European Sector of the IAQG as per standard EN9104-002.
- Outlines the Continuous Oversight Process that applies both to Certification Bodies (office audits and follow-up visit) and to the CBMC, AAB, AB, TP and TPAB within the framework of the ICOP Scheme within the Spanish CBMC.
- Is complemented by the requirements set forth in TEDAE QC 9104-001 and TEDAE QC 9104-003.

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Revision Index

edition	revision	date	notes
1		24/JAN/2013	First edition
2		06/NOV/2013	Changed oversight process scope, new CB oversight process and new Annexes. Modified reference to period for the planning of audits after Oversight CBMC 2013
3		31/JAN/2014	Addition paragraph 3.3. Escalation process (EAQG NCR#2)
4		31/JAN/2015	Addition of the OP Assessors Conflict of Interest Matrix (EAQG NCR#2)
5		15/SEP/2016	New edition due to complete revision of the document
6		01/FEB/2018	Added evaluation form complementary instructions for compliance. Added requirement for the filing of records of the OP Assessors. Added Annex D with a List of OP Assessors
7		14/JUL/2020	Periodic revision

Distribution Index

- Certification Body Management Committee (CBMC).
- TEDAE Quality Committee (CCT).
- TEDAE CBMC Work Group.
- TEDAE AAB.

Content

1	Purpose and Scope of Application	¡Error! Marcador no definido.
2	Standards for Reference	¡Error! Marcador no definido.
3	Terms & Definitions	¡Error! Marcador no definido.
4	General Information	¡Error! Marcador no definido.
5	Requirements that Apply to Oversight and Auditing Personnel..	¡Error! Marcador no definido.
5.1	General Information	¡Error! Marcador no definido.
5.2	OP Assessors	6
5.3	Confidentiality and Conflicts of Interest	¡Error! Marcador no definido.
6	Responsibilities.....	¡Error! Marcador no definido.
6.1	General Information	¡Error! Marcador no definido.
6.2	Head of the Oversight Audit Team	¡Error! Marcador no definido.
6.3	OP Assessors	8
6.4	IAQG OPMT.....	8
6.5	CBMC	8
6.6	Head of the Oversight Process	¡Error! Marcador no definido.
6.7	IAQG Member Companies.....	¡Error! Marcador no definido.
7	Requirements for Oversight Audits.....	¡Error! Marcador no definido.
7.1	Frequency of Oversight Audits.....	¡Error! Marcador no definido.
7.2	Risk-Based Oversight	¡Error! Marcador no definido.
7.3	Joint Oversight Program Management	¡Error! Marcador no definido.
7.4	Joint Oversight Program Scheduling	¡Error! Marcador no definido.
7.5	Planning of Joint Oversight Audits	¡Error! Marcador no definido.
7.6	OASIS Database Oversight	¡Error! Marcador no definido.
7.7	Oversight of the CBMC	9
7.8	Oversight of the AAB	10
7.9	Oversight of the TPAB	10
7.10	Oversight of the TP	10
7.11	ENAC Accreditation Body Oversight	¡Error! Marcador no definido.
7.12	Certification Body Oversight	¡Error! Marcador no definido.
7.13	Additional Oversight by an IAQG Member Company	¡Error! Marcador no definido.

ICOP Certification Scheme - TEDAE Operating Procedure

ICOP Scheme Oversight Process

7.14	Oversight Audit Reports	15
7.15	Oversight Audit Nonconformity ...	¡Error! Marcador no definido.
8	Annual Review of Oversight Audit Results	¡Error! Marcador no definido.
8.1	General Information	¡Error! Marcador no definido.
8.2	CBMC Review.....	¡Error! Marcador no definido.
8.3	ENAC Review (Accreditation Body).....	16
9	Complaint Resolution Process	¡Error! Marcador no definido.
10	Records	¡Error! Marcador no definido.
	Annex A: Conflict of Interest Matrix	19
	Annex B: EN9104-002 Forms	20
	Annex C: Acronyms.....	21
	Annex D: OP Assessors list form	22

1 Purpose and Scope of Application

- 1.1 Establishes the requirements that apply to the ICOP Scheme Oversight Process, which apply to the TEDAE CBMC within the framework of the European Sector of the IAQG as per standard EN9104-002.
- 1.2 Outlines the Continuous Oversight Process that applies both to Certification Bodies (office audits and follow-up visit) and to the CBMC, AAB, AB, TP and TPAB within the framework of the ICOP Scheme within the Spanish CBMC.

2 Standards for Reference

- 2.1 In addition to the references specified in standard EN9104-002, the following standards are also considered to be references:
 - Series 9104 standards.
 - The resolutions contained in the “IAQG Resolutions Log”.
 - The “Supplemental Rules” edited by the IAQG.
 - EAQG OPMT Procedures.
 - The Procedures, Notifications and Resolutions of the TEDAE CBMC.

Note: the current edited edition of the aforementioned documentation or standards shall always apply.

3 Terms & Definitions

- 3.1 For the purposes of this procedure, the terms and definitions contained or referenced in the ISO 9000, ISO 17000, ISO 19011 and the series 9104 standards shall apply, as well as the following:
- 3.2 CBMC, CBMC Work Group and AAB.

Within the scope of this document, any reference to the CBMC, the CBMC Work Group and the AAB shall be understood as referring to TEDAE’s CBMC, CBMC Work Group and AAB.

4 General Information

- 4.1 Standard EN 9104-002 “Aerospace series - Quality management systems - Part 002: Requirements for Oversight of Aerospace Quality Management System Registration/ Certification Programs” of June 2016 has been used as the basis for establishing the requirements of this procedure, and therefore, the requirements are organized as per the chapters of this standard, and reference them.
- 4.2 However, these are not the only applicable requirements. In addition to the foregoing, the requirements outlined in the specific documents that are mentioned herein, and in other documentation applicable to the current edition of the ICOP Scheme as edited by the IAQG, the EAQG and TEDAE (Series 9104 Standards, IAQG Resolutions Log, Supplemental Rules, EAQG OPMT procedures and other TEDAE documents) shall also apply.

5 Requirements that Apply to Oversight and Auditing Personnel

5.1 General Information

- 5.1.1 The OP Assessors shall be responsible for ensuring that they have the training, experience and competence required by standard 9104-002 and that they are authorized to engage in oversight activities by the company where they work.
- 5.1.2 With the purpose of confirming the fulfillment of requirements and declaring any potential conflict of interest, OP Assessors must complete form A “Other Party (OP) Assessor Industry Controlled Other Party (ICOP) Declaration form” of standard 9104-002, which is available in IAQG’s website.
- 5.1.3 OP Assessors shall be approved as per standard 9104-002 by their corresponding employers or the person in charge of the scheme’s oversight, ensuring their continuous support and providing objective evidence every three years by submitting form A.
- 5.1.4 It is the responsibility of the CBMC to keep a record of the filled-out forms, also including any records that the EAQG OPMT requires to have completed to support the qualification of the OP Assessors.

5.2 OP Assessors

5.2.1 Scheme-Related Knowledge

The requirements set forth in section 5.2.1 of standard EN 9104-002 shall apply.

5.2.2 Training, Working Experience and Auditing Experience Requirements

The requirements set forth in section 5.2.2 of standard EN 9104-002 shall apply.

The OP Assessors shall initially, and every three-year period, fulfill the following requirements:

- a) Auditing experience: having performed at least three first, second or third-party AQMS or “Other Party” audits in the last three years with a minimum duration of 9 days.
- b) Working experience: four years of experience during the last ten years in the aerospace or defense industry (see EN 9104-002, 5.2.2).
- c) Training: during the last three years, a minimum of 15 hours of continuous training related to changes in the aerospace or defense industry and the ICOP Scheme.
- d) Successful completion of the OP Assessor training courses defined by the IAQG OPMT. **The initial OP Assessor course shall only be required for initial qualification. The update/refreshment training required and provided by the IAQG OPMT shall be considered as part of the recurrent training imparted to OP Assessors to maintain their qualification every 3 years.**

5.2.3 Contents of OP Assessor Training

The OP Assessor training shall include knowledge on the standards and documents referenced in standard 9104-002, including the following:

- Series 9104 standards.
- AQMS Standards (EN 9100, EN 9110, EN 9120).
- EN 9101;
- ISO 19011.
- ISO/IEC 17011.

- ISO/IEC 17021
- IAF Mandatory Documents:
- Requirements related to conflicts of interest and confidentiality.
- Complaint Resolution Process.
- Any other document (IAQG/EAQG documents, Resolutions Log, etc.) and TEDAE documents applicable to the corresponding scheme.

5.3 Confidentiality and Conflicts of Interest

- 5.3.1 The requirements set forth in section 5.3 of standard EN 9104-002 shall apply, as well as the following.
- 5.3.2 All persons and organizations that participate in the management, implementation and oversight of the ICOP scheme shall periodically review their participation and the interactions with their clients, and must disclose any known or potential conflict of interest as outlined in standard 9104-002.
- 5.3.3 Before performing the corresponding audits, the potential conflicts of interest for both the OP Assessors and ENAC's technical Expert are to be taken into account, and resolved by both parties, if any.
- 5.3.4 Regarding OP Assessors, and with the purpose of facilitating the identification of potential conflicts of interest, pursuant to the provisions set forth in standard EN9104-002, Annex A of this procedure contains a template of the matrix used to identify the organizations to which OP Assessors belong and the potential conflicts of interest that might exist in the oversight of the various organizations, as per the criteria outlined in section 5.3 of standard 9104-002. The person from TEDAE in charge of Oversight shall keep an updated record related to OP Assessors and the incompatibilities affecting each of them.
- 5.3.5 Whenever it were necessary to select an OP Assessor that has a potential conflict of interest for operational reasons, the express approval by the CBMC shall be required.
- 5.3.6 All participants must ensure that they have been duly authorized by their organization before taking part in the audit.
- 5.3.7 IAQG Member Companies shall ensure that their appointed OP Assessors are qualified as per the EN 9104-002 standard, providing proof of this fact by completing the Declaration Form (Form A) at least every three years (see EN 9104-002, 5.1.2).
- 5.3.8 The OP Assessor shall be responsible for having filled out and submitted the aforementioned declaration to the person in charge of Oversight within the Scheme before performing the audit.

6 Responsibilities

6.1 General Information

6.1.1 The requirements set forth in section 6.1 of standard EN 9104-002 shall apply.

6.2 Head of the Oversight Audit Team

6.2.1 The requirements set forth in section 6.2 of standard EN 9104-002 shall apply, as well as the following.

6.2.2 During the joint audits (AB and OP Assessor), the lead auditor of the ENAC shall lead the auditing team, and during non-joint audits (without an AB Assessor) this role shall be fulfilled by the OP Assessor (EN 9104-2, 6.2.1).

6.2.3 The responsibilities of the lead auditor are outlined in section 6.2.3 and 6.2.4 of standard EN9104-002.

6.2.5 The requirements for, and responsibilities of, the AB Assessor (ENAC expert) are outlined in document ENAC: PO-22 (Qualification of Technical Experts and Technical Auditors)

6.3 OP Assessors

6.3.1 The responsibilities of the OP Assessor are outlined in section 6.3 of standard EN 9104-002.

6.4 IAQG OPMT

6.4.1 The responsibilities of the IAQG OPMT are outlined in section 6.4 of standard EN 9104-002.

6.5 CBMC

6.5.1 The responsibilities of the CBMC are those outlined in section 6.5 of standard EN 9104-002 and hereinbelow.

6.5.2 The CBMC shall ensure the fulfillment of all requirements outlined in the series 9104 standards in relation to the oversight of the ICOP Scheme in Spain.

6.5.3 The CBMC shall appoint an Industry Member as its representative in the EAQG OPMT Oversight WG and to support the representative of the CBMC in the EAQG OPMT. These candidates may be the same person.

6.5.4 It is the responsibility of the CBMC to appoint a Head of the Oversight Process. This appointment shall be ratified in CBMC meetings and be recorded in the corresponding minutes.

6.5.5 As part of the Spanish Scheme Status Report, the CBMC Delegate shall inform the status of the Oversight Process to the various stakeholders as outlined in operating procedure TEDAE QC 9104-005. Furthermore, a follow-up of this process shall be included in the agenda of CBMC meetings.

6.6 Head of the Oversight Process

6.6.1 The requirements set forth in section 6.6 of standard EN 9104-002 shall apply, as well as the following.

6.6.2 The Head of the Oversight Process shall review, accept and authorize the documents provided by the OP Assessors as part of their qualification and approval process, using EAQG Form 560 provided by the EAQG OPMT.

6.6.3 The Head of the Oversight Process shall keep all corresponding records for OP Assessors in a single repository, whether in paper or in digital form, to facilitate their management.

6.7 IAQG Member Companies

6.7.1 The requirements set forth in section 6.7 of standard EN 9104-002 shall apply.

7 Requirements for Oversight Audits

7.1 Frequency of Oversight Audits

7.1.1 The requirements set forth in section 7.1 of standard EN9104-002 shall apply.

7.1.2 The table below contains a summary of the oversight audit frequencies to be performed by the CBMC

<i>Entity</i>	<i>Type of audit</i>		<i>Minimum Frequency</i>
	<i>Office</i>	<i>Witnessed</i>	
CBMC Self-Assessment	X	N/A	Annually
AAB	X	N/A	Annually
TPAB	X	N/A	Annually
AB (ENAC)	X	X	Annually
CBs	X	X	Annually

7.2 Risk-Based Oversight

7.2.1 The requirements set forth in section 7.2 of standard EN9104-002 shall apply.

7.2.2 TEDAE CBMC does not use any risk-based method in its oversight process.

7.3 Joint Oversight Program Management

7.3.1 The requirements set forth in section 7.3 of standard EN9104-002 shall apply.

7.4 Joint Oversight Program Scheduling

7.4.1 The requirements set forth in section 7.4 of standard EN9104-002 shall apply.

7.5 Planning of Joint Oversight Audits

7.5.1 The requirements set forth in section 7.5 of standard EN9104-002 shall apply.

7.6 OASIS Database Oversight

7.6.1 The requirements set forth in section 7.6 of standard EN9104-002 shall apply.

7.7 Oversight of the CBMC

7.7.1 The requirements set forth in section 7.7 of standard EN9104-002 shall apply, as well as the following.

7.7.2 When preparing the CBMC oversight audit performed by the IAQG OPMT, the TEDAE

CBMC shall perform a self-assessment using Form F “Certification Body Management Committee (CBMC) Assessment Check Sheet”. Any nonconformity found during the oversight must be registered in the Oversight Nonconformity Record (Form D).

7.7.3 The self-assessment shall be performed by **the CBMC Delegate or the Head of the Oversight Process of TEDAE**, and this person shall be responsible of arranging the audit date and performing the follow-up and closure of nonconformities identified during the audit, if any, while in contact with the CBMC.

7.7.4 See sections 7.14 and 7.15 for report requirements and Nonconformity response periods.

7.8 Oversight of the AAB

7.8.1 The requirements set forth in section 7.8 of standard EN9104-002 shall apply, as well as the following.

7.8.2 The AAB Oversight shall be performed and documented using **Form G** “Auditor Authentication Body (AAB) Office Assessment Check Sheet”. Any nonconformity found during the oversight shall be registered in the Oversight Nonconformity Record (**Form D**).

7.8.3 The TEDAE OP Assessor shall fulfill the role of lead auditor and be responsible for arranging the audit date and performing the follow-up and closure of Nonconformities identified during the audit, if any, while in contact with the AAB.

7.8.4 See sections 7.14 and 7.15 for report requirements and Nonconformity response periods.

7.9 Oversight of the TPAB

7.9.1 The requirements set forth in section 7.9 of standard EN9104-002 shall apply.

7.10 Oversight of the TP

7.10.1 The requirements set forth in section 7.10 of standard EN9104-002 shall apply.

7.11 ENAC Accreditation Body Oversight

7.11.1 The requirements set forth in section 7.11 of standard EN9104-002 shall apply, as well as the following.

7.11.2 ENAC’s oversight shall consist of an Office assessment and a Witness assessment.

7.11.3 ENAC’s Office assessment shall be performed and documented using Form J “Accreditation Body (AB) Office Assessment Check Sheet”. Any nonconformity identified during the oversight process shall be registered in the Oversight Nonconformity Record (Form D).

7.11.4 ENAC’s Witness assessment shall be performed and documented using Form K “Accreditation Body (AB) Witness Assessment Check Sheet”. Any nonconformity identified during the oversight process shall be registered in the Oversight Nonconformity Record (Form D).

7.11.5 TEDAE’s OP Assessor shall fulfill the role of the lead auditor, and be responsible for arranging the audit date and performing the follow-up and closure of Nonconformities identified during the audit, if any, while in contact with ENAC.

7.11.6 See sections 7.14 and 7.15 for report requirements and Nonconformity response periods.

7.12 Certification Body Oversight

- 7.12.1 The requirements set forth in section 7.12 of standard EN9104-002 shall apply, as well as the following.
- 7.12.2 The Certification Body Oversight shall consist of an office assessment and at least one annual follow-up assessment for each Certification Body.
- 7.12.2.1 Office Assessment
- Onsite assessment related to the requirements of the 9104 series standards to be performed at the main office of the Certification Body, using the tools and methods outlined in those standards. (EN 9104-002, 3.10).
- The office assessment shall be performed and documented using **Form L** "Certification Body (CB) Office Assessment Check Sheet".
- 7.12.2.2 Follow-up audit (witness assessment)
- Assessment of an auditing team in relation to its ability and competence to perform AQMS audits, as well as to the efficacy of the auditing plan, as per the applicable standard (EN 9104-002, 3.15)
- The follow-up audit/witness assessment shall be performed and documented using Form M "Certification Body (CB) Witness Assessment Check Sheet".
- The witness assessment process shall include a complete review of the Audit Report prepared by the CB. Form N "EN 9101 Audit Report Review Assessment Check Sheet" must be used for this purpose.
- 7.12.3 Nonconformities identified during both the office and the witness assessment must be registered in the Oversight Nonconformity Record (Form D), where the deadline for the submission of the Corrective Action Plan (no later than 30 days after the closure of the audit) and the deadline for the closure of Nonconformities (no later than 90 days after the closure of the audit) must be specified.
- 7.12.4 The oversight of the CBs shall be performed, whenever possible, jointly with the ENAC (joint audits), however, it may be performed independently from the ENAC (separate audits).
- 7.12.5 Joint audits with the ENAC:
- 7.12.5.1 The auditing team shall be composed of the auditing team appointed by the ENAC alongside an ENAC lead auditor, in the company of an ENAC expert (AB Assessor) and an OP Assessor.
- 7.12.5.2 The Head of the ENAC auditing team shall be responsible for arranging the audit date and performing the follow-up of the submission of the CAP (Corrective action plan) and the closure of NCs identified during the audit, while in contact with the CB.
- 7.5.12.3 When planning each audit, ENAC shall contact the Person in Charge of Oversight of the CBMC, at least three months in advance, to arrange a date and time for the audit, to ensure the participation of an OP Assessor to accompany ENAC's auditing team during the audit as per EN 9104.
- 7.12.5.4 After the performance of the audit, the deadlines (as per section 4.3 of ENAC Document NT-06) shall be as shown in Figures 1 and 2 below:

Deadlines - TEDAE Office Assessment

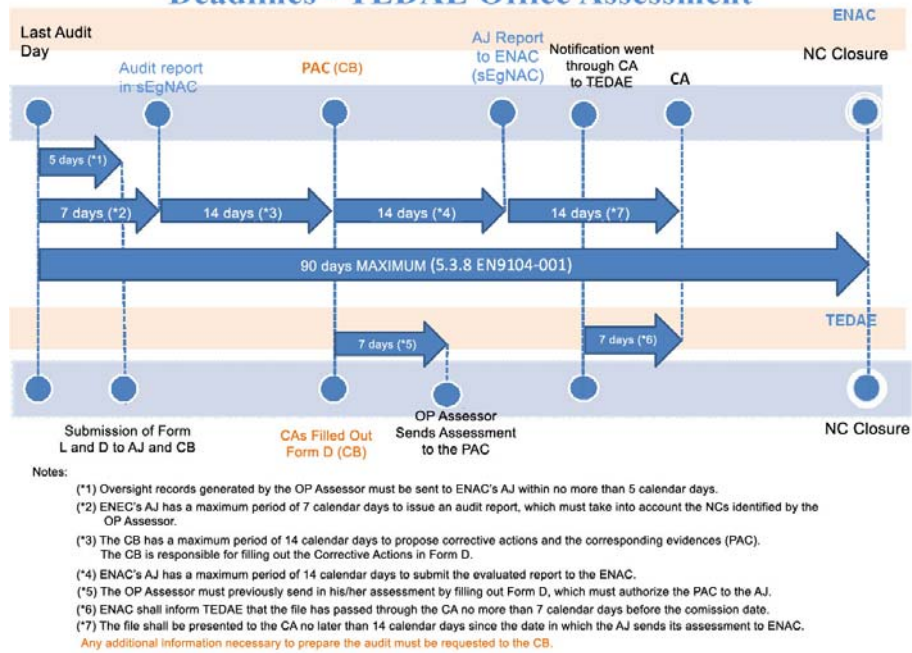


Figure 1. Office assessment deadlines with ENAC.

Deadlines - TEDAE Follow-Up Assessment (FA)

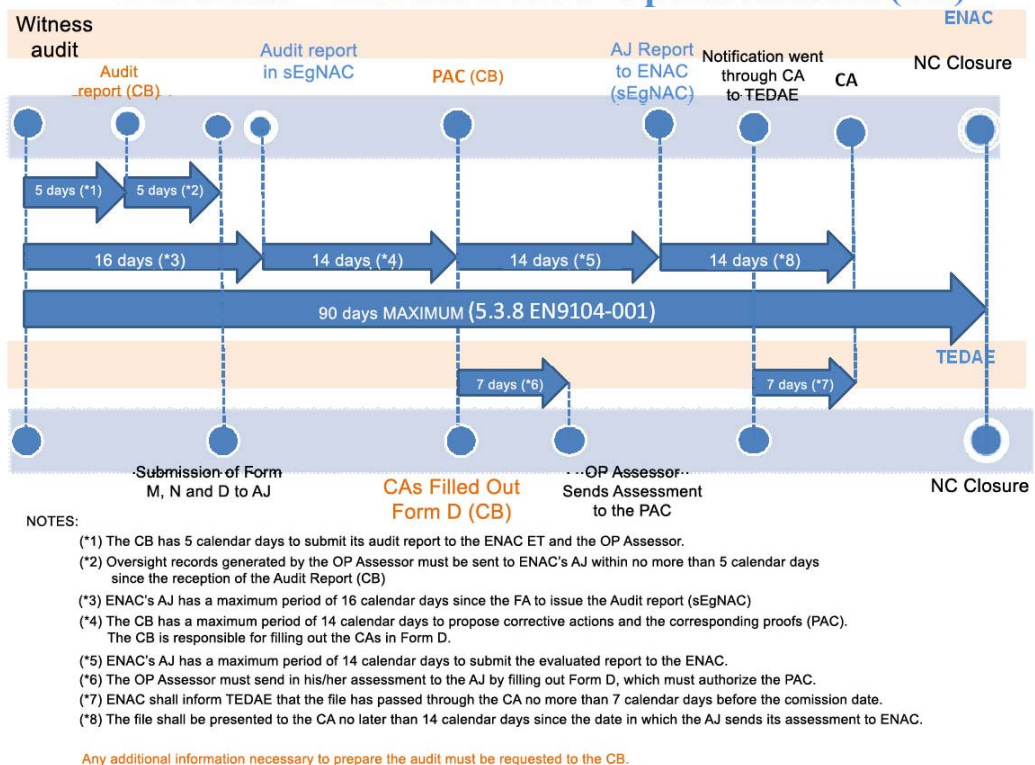


Figure 2. Follow-Up Assessment (FA) Deadlines with ENAC.

- 7.12.5.5 The Head of the ENAC auditing team shall be responsible for notifying the OP Assessor, either via e-mail or via sEgNAC, of each step of the processes: Audit Report available in sEgNAC, request for corrective measures and proofs, their submission once received from the CB, AJ report for review by the commission and date of accreditation commission for the closure of NCs.
- 7.12.5.6 Any and all Nonconformities identified during the audit shall be entered into Form D on Nonconformities, and all Forms shall be included in ENAC's file.
- 7.12.5.7 Types of Nonconformities
As defined in the series 9104 standards.
- 7.12.6 Audits performed independently from the ENAC:
- 7.12.6.1 Where justified that an audit cannot be performed jointly with the ENAC, the auditing team shall only be composed of a TEDAE OP Assessor.
- 7.12.6.2 While staying in contact with the Certification Body, the TEDAE OP Assessor shall be responsible for the following:
- Before the audit: arrange the date of the audit and request the necessary information for its performance.
 - After the audit: follow-up on the submission of the CAP (Corrective Action Plan, no later than 30 days after the closure of the audit) and the closure of the NCs identified during the audit (no later than 90 days after the closure of the audit), as per the deadlines outlined in 9104-002. **The NCs shall be managed using OASIS.**
- NOTE: In Form D the fulfillment of CAs corresponds to the CB.
- 7.12.6.3 The deadlines for the submission of the corresponding Forms to TEDAE/CB, depending on whether it is performed in relation to an Office Assessment or a follow-up, shall be as shown in figures 3 and 4:

Deadlines - TEDAE Office Assessment

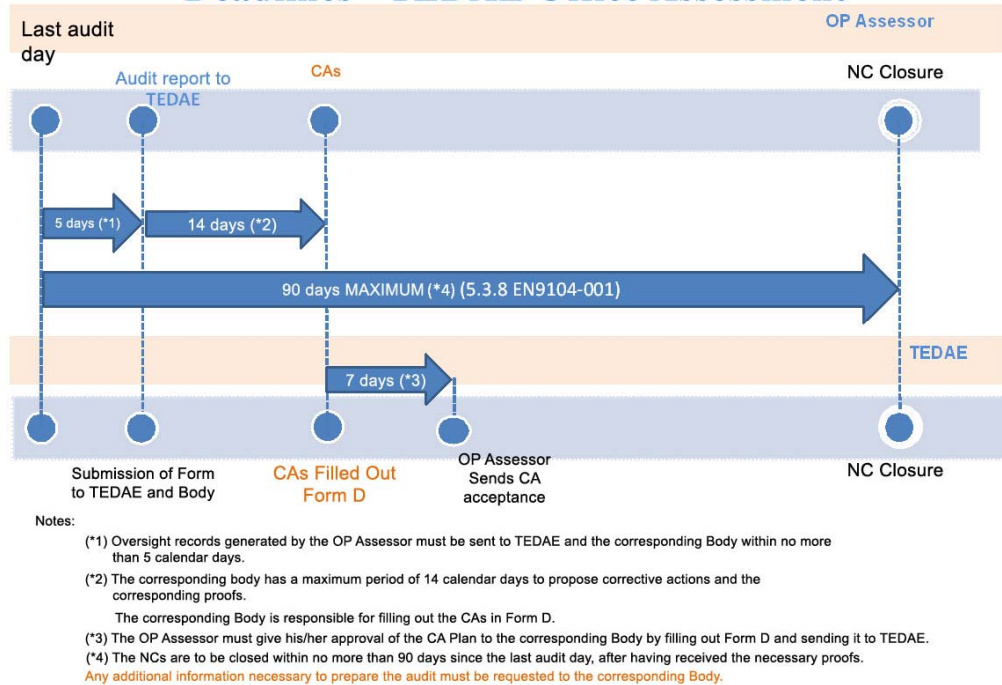


Figure 3. Office Assessment Deadlines without ENAC.

Deadlines - TEDAE Follow-Up Assessment (FA)

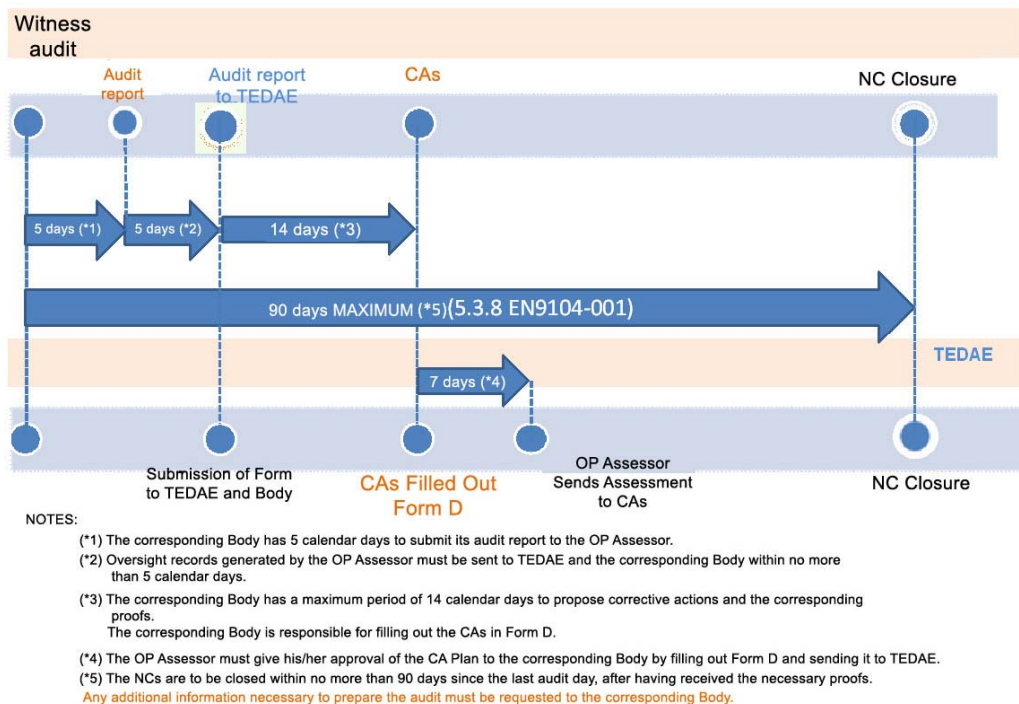


Figure 4. Follow-Up Assessment (FA) Deadlines without ENAC.

7.13 Additional Oversight by an IAQG Member Company

7.13.1 The requirements set forth in section 7.13 of standard EN9104-002 shall apply.

7.14 Oversight Audit Reports.

7.14.1 The requirements set forth in section 7.14 of standard EN9104-002 shall apply, as well as the following.

7.14.2 The auditing team shall complete the appropriate reports/forms as per standard EN9104-002, after having performed the oversight audit. All Nonconformity Reports (NCRs) shall be submitted to the audited organization at the end of the audit (closure meeting) and the filled-out audit reports shall be sent no later than 15 days after the closure meeting. (EN 9104-002, 7.14.1).

7.14.3 When performing joint audits with the ENAC, the OP Assessor shall provide the Lead Auditor of the ENAC with the corresponding reports, duly filled out to be added to ENAC's report. The latter shall consider it to be part of its oversight report. (EN 9104-002, 7.14.2).
The OP Assessor shall enter the audit report agreed-upon with the ENAC into OASIS.

7.14.4 When performing independent audits (without the ENAC), the OP Assessor shall provide the Person in Charge of Oversight of the CBMC with the corresponding reports, duly filled out for their corresponding analysis and recording. (EN 9104-002, 7.14.5).
Furthermore, the OP Assessor shall enter the audit report into OASIS and follow-up on the NCs (if any) through OASIS.

7.15 Oversight Audit Nonconformity

7.15.1 The requirements set forth in section 7.15 of standard EN9104-002 shall apply, as well as the following.

7.15.2 The head of the auditing team shall ensure that all Nonconformities identified during an oversight audit are managed as per the requirements of the EN9101-001 standard. This means that, in order for the Nonconformity to be closed, the response must contain: containment action, satisfactory root cause analysis, and for the proposed corrective measures to have been implemented, revised, accepted and verified within no longer than 90 days since the last day of the audit. (EN 9104-002, 7.15.1)

Note: The response with the Corrective Action Plan shall be provided no later than 30 days after the closure of the audit.

7.15.3 Management of Nonconformities, escalation process:

7.15.3.1 If a Nonconformity remains open for longer than 90 days since the last day of the audit, the following procedure must be followed:

- For audits performed jointly with the ENAC, the ENAC must initiate a suspension process as outlined in standard 9104-001.
- For audits performed independently from the ENAC, the open Nonconformity must be submitted to the appropriate body (ENAC, CBMC or SMS) to initiate the suspension process as outlined in standard 9104-001.

7.15.4 In cases where there is no explicit response in the corresponding evaluation form for a Nonconformity ("Question References" and "Standard and Clause Number" fields), the issues related to the identified nonconformity shall be added at the end of the questionnaire.

- 7.15.5 When Nonconformities are entered in the field “Corrective Action Required” on page one of the corresponding evaluation form, the “item” number for the identified Nonconformity shall be added to each Nonconformity.

8 Annual Review of Oversight Audit Results

8.1 General Information

- 8.1.1 The requirements set forth in section 8.1 of standard EN9104-002 shall apply.

8.2 CBMC Review

- 8.2.1 The requirements set forth in section 8.2 of standard EN9104-002 shall apply, as well as the following.
- 8.2.2 The CBMC periodically prepares a status report for the Scheme in Spain that includes an analysis and report of the following, among others:
- Claims and Complaints
 - Spanish scheme oversight auditing status (CBMC, AAB, TPAB, CBs and ENAC).
 - Status of the EAQG OPMT oversight auditing in Spain for the previous/current year.
 - Status of the oversight auditing performed by the Spanish CBMC Assessor/Advisor on other European schemes for the previous/current year.
 - Outcome of the additional oversight audit by an IAQG member company (where applicable)
- 8.2.3 In its TEDAE QC 9104-005 procedure, the TEDAE CBMC has developed, documented and implemented a Scheme status information process that, among other information, informs the annual oversight status for each entity subject to oversight. This information is distributed monthly among CBMC voting members and presented to all members in each CBMC meeting.

8.3 ENAC Review (Accreditation Body)

- 8.3.1 The requirements set forth in section 8.3 of standard EN9104-002 shall apply, as well as the following.
- 8.3.2 ENAC periodically informs in each CBMC meeting the information specified in section 8.3 of standard 9104-002.

9 Complaint Resolution Process

- 9.1 The requirements set forth in section 9 of standard EN9104-002 shall apply, as well as the following.
- 9.2 The CBMC complaint resolution process is outlined in section 4.18 of TEDAE Operating Procedure QC 9104-001.

10 Records

- 10.1 The requirements set forth in section 10 of standard EN9104-002 shall apply, as well as the following.
- 10.2 The TEDAE CBMC shall maintain records for no less than six years, which shall be treated as confidential and may be subject to auditing or review at any time by the CBMC, any applicable regulatory or government bodies and the EAQG OPMT.
- 10.3 The records generated by this process are the various filled-out forms mentioned

hereinbefore, applicable to the oversight of the organizations that participate in the ICOP Scheme.

10.4 The updated version of the forms available in the IAQG Website must always be used: <https://www.sae.org/iaqq/forms/index.htm> It shall be the responsibility of the OP Assessor to obtain it from this page before performing the oversight audit.

10.5 The forms used to support the oversight audits as described herein shall be the following:

- a) Form A, "Other Party (OP) Assessor Industry Controlled Other Party (ICOP) Declaration Form".

This form is used to record and document the qualification, confidentiality and potential conflicts of interest of the OP Assessors.

- b) Form B, "Confidentiality Agreement and Conflict of Interest Declaration for Committee Members and Observers".

This form is used to record and document the confidentiality and potential conflicts of interest of the members and observers of the CBMC.

- c) Form C, "Online Aerospace Supplier Information System (OASIS) Database Management Assessment Check Sheet".

This form is used to perform and record the oversight of the OASIS Database.

- d) Form D, "Oversight Nonconformity".

This form is used to document, classify and manage the corrective action process associated with identified Nonconformities in relation to the series EN9104 standards.

- e) Form E, "Sector Management Structure (SMS) Assessment Check Sheet".

This form is used to perform and record the oversight of the SMS.

- f) Form F, "Certification Body Management Committee (CBMC) Assessment Check Sheet".

This form is used to perform and record the oversight audit of the CBMC.

- g) Form G, "Auditor Authentication Body (AAB) Office Assessment Check Sheet".

This form is used to perform and record the oversight audit of the AAB.

- h) Form H, "Training Provider Approval Body (TPAB) Assessment Check Sheet".

This form is used to perform and record the oversight audit of the TPAB.

- i) Form I, "Training Class Witness Assessment Check Sheet".

This form is used to perform and record the training class oversight audit.

- j) Form J, "Accreditation Body (AB) Office Assessment Check Sheet".

This form is used to perform and record the office assessment of the Accreditation Body (ENAC).

- k) Form K, "Accreditation Body (AB) Witness Assessment Check Sheet".

This form is used to perform and record the witness assessment of the Accreditation Body (ENAC).

- l) Form L, "Certification Body (CB) Office Assessment Check Sheet".

This form is used to perform and record the office assessment of the Certification Bodies.

- m) Form M, "Certification Body (CB) Witness Assessment Check Sheet".

This form is used to perform and record the witness assessment of the Certification Bodies.

- n) Form N, "EN 9101 Audit Report Review Assessment Check Sheet".

This form is used to perform and record the review of the EN9101 audit report performed by the Certification Body.

Annex B: EN9104-002 Forms



The banner features the IAQG logo on the left and three images on the right: a helicopter labeled 'Quality', an airplane labeled 'Leadership', and a rocket labeled 'Communication'.

- Home
- Organization
- Membership
- IAQG Dictionary
- IAQG Forms
- Supply Chain Management Handbook SCMH
- Publications
- Deployment Support Materials
- Events
- Contact Us
- News

IAQG Forms Management

The IAQG has established this web page to support Stakeholder download and use of forms that are referenced within our approved standards.

These forms should not be considered all inclusive, and it is the obligation of the user to also purchase a copy of the associated standard from their sector's standards publication body.

Available Forms for download:

- 9101E/9101:2014 ▼
- 9102 Word Forms ▼
- 9102:2014 ▼
- 9104-002 Word files ▼
 - [9104-002 Form A - Other Party \(OP\) Assessor Industry Controlled Other Party \(ICOP\) Declaration Form](#)
 - [9104-002 Form B - Confidentiality Agreement and Conflict of Interest Declaration for Committee Members and Observers](#)
 - [9104-002 Form C - Online Aerospace Supplier Information System \(OASIS\) Database Management Assessment Check Sheet](#)
 - [9104-002 Form D - Oversight Nonconformity](#)
 - [9104-002 Form E - Sector Management Structure \(SMS\) Assessment Check Sheet](#)
 - [9104-002 Form F - Certification Body Management Committee \(CBMC\) Assessment Check Sheet](#)
 - [9104-002 Form G - Auditor Authentication Body \(AAB\) Office Assessment Check Sheet](#)
 - [9104-002 Form H - Training Provider Approval Body \(TPAB\) Assessment Check Sheet](#)
 - [9104-002 Form I - Training Class Witness Assessment Check Sheet](#)
 - [9104-002 Form J - Accreditation Body \(AB\) Office Assessment Check Sheet](#)
 - [9104-002 Form K - Accreditation Body \(AB\) Witness Assessment Check Sheet](#)
 - [9104-002 Form L - Certification Body \(CB\) Office Assessment Check Sheet](#)
 - [9104-002 Form M - Certification Body \(CB\) Witness Assessment Check Sheet](#)
 - [9104-002 Form N \(9101E/9101:2014\) Audit Report Review Assessment Check Sheet](#)
 - [9104-002 Form N \(9101E/9101:2012\) Audit Report Review Assessment](#)

Quick Links

- [OASIS Database](#)
- [IAQG Sanctioned Aerospace Auditor Transition Training Support Material](#)
- [Americas Aerospace Quality Group \(AAQG\)](#)
- [Asia-Pacific Aerospace Quality Group \(APAQG\)](#)
- [European Aerospace Quality Group \(EAQG\) Members Only](#)

Figure 5. Link to 9104-002 Forms (<http://www.sae.org/iaqq/forms/index.htm>).

Annex C: Acronyms

AAB	Auditor Authentication Body
AB	Accreditation Body
AQMS	Aerospace Quality Management System
ASD-STAN	Aerospace and Defence Industries Association - Standardization
CB	Certification Body
CBMC	Certification Body Management Committee
CEN	European Committee for Standardization
CSOC	Certification Structure Oversight Committee
EAR	Export Administration Regulations
ESA	European Space Agency
IAF	International Accreditation Forum
IAQG	International Aerospace Quality Group
ICOP	Industry Controlled Other Party
ITAR	International Traffic in Arms Regulations
MD	Mandatory Document
N/A	Not Applicable
NAA	National Aviation Authority
NAIA	National Aerospace Industry Association
NASA	National Aeronautics and Space Administration
NCR	Nonconformity Report
OASIS	Online Aerospace Supplier Information System
OP	Other Party
OPMT	Other Party Management Team
SMS	Sector Management Structure
TP	Training Provider
TPAB	Training Provider Approval Body

Annex D: OP Assessors list form

Name	9104-002 Form A	Initial Approval	Status	Date of Decision *	Expiry Date

** Date of Decision of Form 560. Further information and evidence available in the Form 560 records.*