



Annex 8.1 Record Sheet for Examination Bodies when Applying for QS Recognition

A. General Information

Examination Body (Laboratory):

Address:

Tel.:

Fax:

E-Mail:

B. Accreditation according to EN ISO/IEC 17025

(Please tick appropriate box)

granted

Please supply copy of certificate
and appendix at the testing procedure.

in process

Please attach proof that accreditation is expected to be
granted within the next 12 months.

C. Persons Responsible

Contact Person:

Alternative Contact Person:

D. Salmonella ELISA ring trial participation:

already participated (Date _____)

did not participate to date

E. Declaration of Commitment:

We commit ourselves to enter the laboratory results required by QS into the salmonella database as soon as possible after testing.

Signature / Stamp: _____

F. QS Recognition: **granted** **not granted**

Conditions:

Signature / Stamp: _____