



NOTIFICATION OF ESTABLISHMENT OF AN ANNEX FACILITY

All sections must be completed

1. FACILITY INFORMATION

Organisation Name	
NATA Accreditation No.	
Base Facility Name	
NATA Corporate Site No	
Annex Facility Name	
Annex Facility Physical Address	
Project Name	
Contact Details	
Name	
Address	
Telephone	
Fax	
Mobile	
Email	

2. TESTS TO BE CONDUCTED

Attach a copy of the Base Facility's scope of accreditation with the tests required at the annex facility marked on it OR list the tests below OR provide as an attachment in the same format:

Test Method No.	Test Description

Are the listed test methods already accredited at the base facility?

- Yes
- No the tests not accredited are marked with an asterisk (*) and I understand that a variation to the base facility's scope of accreditation will be required if endorsed test reports need to be issued.

3. COMPANY AUTHORISATIONS

Supervision and technical control must be provided by appropriate personnel as per the requirements listed in clauses 4.1.5 (g) and 5.2.1 of *Infrastructure and Asset Integrity ISO/IEC 17025 Annex - Geotechnical and Civil Construction Materials Testing*. Technical control over the annex facility must be provided by personnel holding qualifications at Level 4 or higher and, if these personnel are not stationed at the annex facility, they must undertake regular visits to the annex facility at an appropriate frequency.

Please list testing and supervisory staff relevant to this annex facility.

Name and Title	Level	Stationed on Site YES/NO	Frequency of visits if not on site	Tests for which approval is held for issuing reports

Are staffing levels sufficient to provide for the on-site presence of a staff member at qualification Level 2 or higher *at all times where testing is being performed*?

- Yes
- No

Is the number of staff at the facility expected to increase at any time during the project?

- Yes, the maximum number of staff is expected to reach up to (Specify number)
- No

4. PROJECT AND CONTRACT DETAILS

Please provide a description of the project for which the facility is being established.

Project title:

Description of the project scope:

Customer name and contact details:

Please provide contract details pertaining to the nominated project. Only testing contracts for a single project may be performed from an annex facility as part of the scope of accreditation.

Contract Name(s)	Contract Number(s)	Contract Company Name & Phone Number (see Note 1)	Start Date (see Note 1)	End Date (see Note 2)

Note 1: If the facility will be servicing more than one contract company associated with the construction project then the applicable form of accreditation is a Branch Site accreditation, except for situations not covered by the provisions of the criteria document *Accreditation of New Branch Sites*. Annex coverage covering involving more than one contract company may be considered where the overall project is expected to be completed earlier than twelve months (i.e., the nominal accreditation timeframe allowed within the criteria document *Accreditation of New Branch Sites*) but please provide full customer details as a separate attachment if such is being sought.

Note 2: The start date is the date the facility will begin operating for this contract.

Note 3: The end date is the date the contract is *expected* to finish.

If additional time is required, the base facility must notify NATA of the extension, otherwise accreditation of the annex facility will be withdrawn at the end date shown.

A copy of the contract(s) and/or records of contract reviews should be available at the annex facility for review.

NATA may also elect to contact the contract company to confirm or clarify contract details and signing this form is considered as consent to this. If there are any problems with this, such as concerns relating to confidentiality, please indicate this within the application.

5. DECLARATION OF COMPLIANCE

I, _____ as the Authorised Representative confirm that

1. the above particulars are true, correct and complete;
2. the annex facility will be operated as per our Quality System which includes the annex facility procedures previously forwarded;
3. the annex facility will operate to service the specified contract(s);
4. I have reviewed and approved the qualifications, experience and expertise of the staff to be on-site and providing technical control to the annex facility;
5. I have reviewed that all equipment is available and the status of the calibrations/checks meets the requirements of all relevant test methods;

6. I will advise NATA when this annex facility has relocated, the end date provided has changed or the contract/project work has been completed and the facility closed;
7. I have reviewed and approved all aspects of facility practice to be followed, including
 - the test methods to be used;
 - facility accommodation;
 - practices to be followed in respect to recording;
 - checking and reporting of test data and results;
 - verified that the above are all in accordance with the NATA accreditation criteria of the base facility and of annex facilities as detailed in Appendix D of *Infrastructure and Asset Integrity ISO/IEC 17025 Annex - Geotechnical and civil construction materials testing*.

SIGNATURE OF AUTHORISED REPRESENTATIVE

DATE