***ANNEXURE 01***

***Scope of Accreditation***

*(For Testing Laboratories)*

* *Please refer Applicable fields of testing & product groups (TL-LS(P)-01) available at* [*www.slab.lk*](http://www.slab.lk) *(Testing laboratories)*
* *Please attach all Test Methods / Standards against which tests are performed including sampling in the* ***Part A***
* *If applicable, please include In-house calibrations - Please refer Policy on in-house calibration (AC-RG (P)-05) available at* [*www.slab.lk*](http://www.slab.lk) *and provide details if applicable using* ***Part B****.*

**PART A**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Sl | **Product(s) / Material of test** | **Specific tests performed** | **Test Method / Standard against which tests are performed (eg: xxx: 2016)** | **Range of testing/ Limits of detection** | **Uncertainty**  **(±)** | **Location**  **(Laboratory / Site)** |
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| **Note:**  **\*** When referring to publications like NCCLS, IP, BP, USP, ASTM, AOAC,APHA etc. kindly mention the clause / chapter / page number, as appropriate.  \* Laboratories performing site testing shall clearly identify the Specific tests on products(s) / material performed at permanent laboratory and / or at site. | | | | | | |

**PART B**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **SI No** | **Type of instrument** | **Calibration performed** | **Calibration methods / Measurement procedure** | **Range of calibration** | **CMC values** |
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| **\*** Calibration measurement Capability (CMC) values to be expressed approximately at 95% Confidence Level.  \* When referring to International publications kindly mention the clause / chapter / page number, as appropriate. | | |
| \* Laboratories performing site calibration shall clearly identify the specific calibrations on artifacts/ material performed at permanent laboratory and / or at site. | | |
| **For internal use only** | | |
| **Specific remarks by the assessment team**: | | |
| **Agreement on the scope with laboratory and Recommendation by the assessment team** | | |
| Signature & Name of Lab Representative | Signature & Name of Technical Assessor(s)/ Technical Expert/ Assessor | Signature & Name of Team Leader |