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| ***ANNEXURE 08*** | Case file No. |  |
| ***Details on Vehicle Emission Centers*** | VET Center No. |  |
| *(For Inspection Bodies perform Vehicle Emission Testing only)* | Date applied |  |
|  | Verified by |  |

*Please attach one sheet for each Vehicle emission center*

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|  | **To be filled by the Inspection Body** | | | | | | | | | | | | | | | | | ***For SLAB use only***  *(Comments by the Technical Assessor / Technical Expert and Assessor at witnessing assessments)* | |
| **1** | **Details of the Center** | | | | | | | | | | | | | | | | | ***Comments on the VET Centre*** | |
| 1.1 | Vehicle Emission Centre Name | |  | | | | | | | | | | | | | | |  | |
| 1.2 | Vehicle Emission Centre Address | |  | | | | | | | | | | | | | | |  | |
| 1.3 | Legal registration details | |  | | | | | | | | | | | | | | |  | |
| 1.4 | Other registration details (EPL, etc) | |  | | | | | | | | | | | | | | |  | |
| 1.5 | Number of Inspection lines | | Diesel | | |  | | | Petrol | |  | | | Combined | | |  |  | |
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| **2** | **Details on recommended authorized signatories & Inspection staff** | | | | | | | | | | | | | | | | |  | |
| **Name and designation** | **Qualification and Relevant training** | | | | | **Relevant experience** | | | **Authorized for which area of inspection (Signatory / Inspector)** | | | | | **Specimen signature** | | | ***Compliance to SLAB minimum competency requirements (Yes/No)*** | |
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| **3** | **Details on the Equipment** | | | | | | | | | | | | | | | | |  | |
| **Name & Identification No. of the equipment** | **Range and accuracy** | | | **Calibration status**  *(Date of calibration/Metrological traceability/Calibration frequency / Calibrated by)* | | | | | | | **Intermediate checks**  *(Method of verification/Frequency/ Metrological traceability of Reference standard/s used)* | | | | | | ***Comments on the equipment*** | |
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| **4** | **Details on the Reference Material** | | | | | | | | | | | | | | | | |  | |
| **Name of reference material/ reference standard** | **Source (Supplier)** | | | | | | **Date of expiry/ validity** | | | | | **Metrological traceability** | | | | | **Comments on the Reference Material** | |
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| **Signature, Name and Designation of Head of Inspection Body & Date**  *(At submission of application)* | | | | | | | | | | | | | | | | | |  | |
| ………………………………………………………………………………………………………………………………………………………………………………………………………………  ***For SLAB use only***  *(Comments by the Technical Assessor / Technical Expert and Assessor at witnessing assessments)* | | | | | | | | | | | | | | | | | | | |
| **5.** | **Comments on the Inspection Performance** *(To be filled at the witnessing assessment by the SLAB assessment team)* | | | | | | | | | | | | | | | | | | |
| **Inspection Line** | **Comments** | | | | | | | | | | | | | | **Any deficiencies identified** | | | |
| Line 01  (Petrol / Diesel / Hybrid)  Inspection method: …………...  …………………………………. | Inspector/s: | | | | | | | | | | | | | |  | | | |
| Authorized signatory: | | | | | | | | | | | | | |  | | | |
| Availability of safety instructions and adherence:   * Instructions available / Not available * Staff adhere / not adhere to safety instructions | | | | | | | | | | | | | |  | | | |
| Handling of inspection item:   * Inspection item preparation: Satisfactory / Not satisfactory * Performing inspection: Satisfactory / Not satisfactory * Recording observations / data: Satisfactory / Not satisfactory * Inspection report: Satisfactory / Not satisfactory | | | | | | | | | | | | | |  | | | |
| Line 02  (Petrol / Diesel / Hybrid)  Inspection method: …………...  …………………………………. | Inspector/s: | | | | | | | | | | | | | |  | | | |
| Authorized signatory: | | | | | | | | | | | | | |  | | | |
| Availability of safety instructions and adherence:   * Instructions available / Not available * Staff adhere / not adhere to safety instructions | | | | | | | | | | | | | |  | | | |
| Handling of inspection item:   * Inspection item preparation: Satisfactory / Not satisfactory * Performing inspection: Satisfactory / Not satisfactory * Recording observations / data: Satisfactory / Not satisfactory * Inspection report: Satisfactory / Not satisfactory | | | | | | | | | | | | | |  | | | |
| Line 03  (Petrol / Diesel / Hybrid)  Inspection method: …………...  …………………………………. | Inspector/s: | | | | | | | | | | | | | |  | | | |
| Authorized signatory: | | | | | | | | | | | | | |  | | | |
| Availability of safety instructions and adherence:   * Instructions available / Not available * Staff adhere / not adhere to safety instructions | | | | | | | | | | | | | |  | | | |
| Handling of inspection item:   * Inspection item preparation: Satisfactory / Not satisfactory * Performing inspection: Satisfactory / Not satisfactory * Recording observations / data: Satisfactory / Not satisfactory * Inspection report: Satisfactory / Not satisfactory | | | | | | | | | | | | | |  | | | |
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| **6.** | **Additional Comments on the Inspection** *(To be filled at the witnessing assessment by the SLAB assessment team)* | | | | | | | | | | | | | | | | | | |
| 6.1 | Availability of instructions to customers | | | Available / Not available *(Please state any deviations)* | | | | | | | | | | | | | | | |
| 6.2 | Opportunity for log a complaint or appeal | | | Available / Not available *(Please state any deviations)* | | | | | | | | | | | | | | | |
| 6.3 | Availability of Environmental protection measures | | | Available / Not available *(Please state any deviations)* | | | | | | | | | | | | | | | |
| 6.4 | Use of SLAB logo in the certificates | | | Acceptable / Not acceptable *(Please state any deviations)* | | | | | | | | | | | | | | | |
| 6.5 | Any other uses of SLAB accreditation in the center | | |  | | | | | | | | | | | | | | | |
| 6.6. | Any other comments on the center | | |  | | | | | | | | | | | | | | | |
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| **Signature, Name and Designation of Head of Inspection Body & Date**  *(At Witnessing)* | Recommended / Not recommended for granting accreditation / renewal of accreditation.  Any other comments:  **Signature & Name of Technical Assessor(s)/ Technical Expert (s)/Assessor (s)/ Team leader:**  **Witnessing date:**  **Type of witnessing:** |