



AF 9100:2026

Aerospace Quality Management System

MANUAL

Assessment Scheme Operations Manual

AF-HB-9100-001

FIRST EDITION

30 September 2026 | English master text

Publication identity and application

Control	Publication value
Title	Assessment Scheme Operations Manual
Document code	AF-HB-9100-001
Edition / language	FIRST EDITION / English master text
Companion edition identity	30 September 2026
Controlling source	AF 9100:2026 — FIRST EDITION — 29 September 2026
Responsible owner function	Scheme operations manager
Primary source anchors	22, 28, AA, AB, AC, AD, AE, AF, AG, AH, AI, AJ, Y
Delivery status	Prepared implementation companion. Actual approval, adoption, effectivity and operational decisions are recorded separately.

Use and document-control boundary

This companion implements the supplied AF 9100 requirement basis without changing the original standard. Its process allocation, examples, checklists and record design are authored implementation material. Actual mission or product limits, specialist procedures, permissions and genuine observations must be completed before consequential use. Applicable source minima and independent decision conditions cannot be reduced by this companion.

The printed edition date identifies the companion series; it is not evidence that later preparation, review or operational decisions occurred on that date. New support codes in this set are proposed allocations for controlled registration. Established AF-IG-9100-001, AF-FAQ-9100-001 and AF-TR-9100-001 identities are retained; earlier files, the corporate master list and ASTRA codes are not overwritten.

Equivalent combined or digital records are permitted when all required fields, relationships, authority and history remain intact. A completed PDF field or typed name is not evidence of an authenticated approval. Blank records in this delivery contain no invented applicant, signature, event or result.

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Select actual scope → complete application criteria → use the applicable procedure and technical book → capture authentic evidence → evaluate every applicable condition → obtain the required independent decision. Document availability does not establish implementation or conformity.	

1 Scope, responsibility and source priority

Applies to the responsible function and exact evaluated object selected from the source. Use only the duties triggered by actual activity and retained responsibility.

Boundary	Required implementation decision
Object and route	Identify ORG, PRD, SVC, PRC, PER, SUB or CAB separately. Combined records do not merge outcomes.
Activity	Apply source technical modules by performed or retained responsibility, including relevant outsourced work.
Authority	Technical release, employer task permission, independent attestation and statutory authorization remain distinct.
Source priority	AF 9100:2026 and all compatible binding obligations control. This companion does not import ASTRA programme rules or external normative schemes.

2 Operating architecture and controlled outputs

Layer	Accountable result
Govern and scope	Named responsibility, correct object route, obligations, applicability and available resources.
Engineer and prepare	Approved requirements, qualified methods, competent people and controlled suppliers.
Execute and preserve	Attributable actual output and raw evidence linked to the evaluated configuration.
Review and decide	Independent technical review and all applicable acceptance gates, with precise scope.
Maintain and learn	Source clocks, changes, incidents, corrective effectiveness, true status and accepted record custody.

3 Separate routes and responsibilities

Route	Object boundary
ORG	The declared legal organization, its actual sites, functions and retained delivery responsibilities; not automatic conformity of all products or people.
PRD	Identified product, configuration, variant family, lot or serial and its actual technical criteria, qualification and acceptance; no statutory approval is created.
SVC	Specified service or event, time window, customer boundary, providers and validated delivery outcomes; not every service of the corporation.
PRC	Site-, equipment-, material- and condition-specific process capability and monitoring; not independent acceptance of every resulting output.
PER	Competence for a defined job profile and period; employer task authorization and required professional permissions remain separately granted.
SUB	The actual supplied work, performer, source location and sub-tier arrangements; not blanket corporate or broker approval.
CAB	Actual testing, calibration, inspection or certification activity, method/range/location and independence; no self-accreditation or automatic equivalence.

4 Detailed operating modules

AF-PR-9100-030 — Scheme Admission, Participation Terms and Operator Authority

Owner: Scheme operations manager. Trigger: Formal application, new route request, agreement or request to represent AF.

- 1. Separate enquiry from live scope.** Identify the requested route, object, profile and real operator authorization. A development enquiry for an unavailable capability must not be sold as a live conformity assessment.
- 2. Review eligibility and feasibility.** Verify legal identity, actual performers, scope, competent evaluation and independent decision resources, impartiality and lawful evidence access before contracting.
- 3. Complete the profile and terms.** Agree technical criteria, evaluation, sampling and limitations, fees independently of outcome, responsibilities, access, confidentiality, remedies, surveillance and exit. Actual local legal and fee values need competent completion.
- 4. Confirm ORG prerequisites.** For initial ORG assess actual internal audit, management review and sufficient implemented records. Do not impose a corporate audit on an individual PER candidate or request fabricated operating history.
- 5. Authorize only the stated work.** Record admissions, refusals or holds and communicate their basis. Keep actual written scheme-operation and mark permissions separate from applicant eligibility and technical capability.
- 6. Transfer a controlled case.** Hand the approved scope, profile, terms, conflicts and unresolved limitations to the evaluation owner. Receipt or payment cannot be recorded as a positive decision.

Completion boundary: Unreleased or unauthorized scope, unresolved method or unavailable independent competence holds admission.

Record handover: AF-FR-9100-001, AF-FR-9100-002, AF-FR-9100-003, AF-FR-9100-004, AF-FR-9100-032.

AF-PR-9100-031 — Assessment Planning, Audit Time, Site Coverage and Remote Work

Owner: Lead evaluator. Trigger: Initial, renewal, surveillance, special or extension assessment planning.

- 1. Build the actual coverage plan.** Identify route, scope, sites, shifts, processes, criticality, methods, languages, adverse history and necessary witnesses. Assign technical specialists to the tasks they will actually perform.
- 2. Calculate ORG floors correctly.** Use Annex AC effective personnel bands, highest criticality and distinct complexity triggers. Apply site and stage floors, then add resources necessary for genuine coverage; other routes use their technical work breakdown.
- 3. Apply site rules.** Evaluate every initial and renewal ORG site. Restrict reduced surveillance to eligible homogeneous C0/C1 pools, with central and mandatory locations added, controlled rotation and the required random portion.
- 4. Qualify remote methods.** Document identity, live evidence, confidentiality, configuration, access, recording permission and representation. Add physical witnessing where remote review cannot establish the required capability.
- 5. Record productive execution.** Count eight-hour evaluator-days only for actual necessary work. Exclude travel, administration, final reporting, translation delays and independent review; avoid double-counting passive observers or the same task.
- 6. Close actual coverage and report.** Preserve plan changes, incomplete observations, adverse results and sampling limits. Add work or restrict the conclusion when necessary; issue the report under the source timetable without resetting notified findings.

Completion boundary: Insufficient task, site or method coverage prevents a complete evaluation recommendation.

Record handover: AF-FR-9100-004, AF-FR-9100-003, AF-FR-9100-005, AF-FR-9100-028.

AF-PR-9100-032 — Assessor Qualification, Impartiality and Continuing Authorization

Owner: Assessment competence manager. Trigger: Initial role qualification, equivalence review, assignment, continuing practice review or reactivation.

- 1. Define role and technical limits.** Separate auditor, lead, expert, application reviewer, technical reviewer, decider and appeal reviewer. Record route, sector, method, criticality, language and access limits.
- 2. Verify the source minima.** Use Annex AB entry, training, examination, mentoring and demonstrated-task requirements. Check actual scope, days, roles and evidence in any equivalence claim; titles do not satisfy missing competence.
- 3. Assess knowledge and practice.** For third-party auditors keep 80% knowledge, 85% practical and all essential steps as distinct conditions. Secure assessment materials and record observed actions, assistance, failures and limitations.
- 4. Decide through independent competence.** Use the source bootstrap arrangement where necessary and retain reviewer qualifications and conflicts. Authorize only the demonstrated role; expert knowledge does not automatically grant audit leadership or decision authority.
- 5. Check each case assignment.** Apply the 24-month relevant employment/consultancy exclusion for third-party roles and assess other material interests. An authorization is not a standing declaration of independence for every client.
- 6. Maintain and reactivate.** Review CPD, actual practice, lead assignments, reviews/decisions and periodic witnessed performance. Suspend independent use after unmet minima and verify supervised reactivation without retroactively validating unauthorized work.

Completion boundary: An unmet entry, current-practice, essential-step or conflict condition prevents the affected independent role.

Record handover: AF-FR-9100-003, AF-FR-9100-031, AF-FR-9100-010.

AF-PR-9100-033 — Personnel Examination, Remediation and Credential Control

Owner: Personnel scheme manager and independent decider. Trigger: PER candidate admission, examination, reassessment, renewal or credential concern.

- 1. Approve the job profile.** Define actual tasks, prerequisites, practical skills, hazards, equipment, methods, essential steps and lawful scope. Publish candidate information and fair access arrangements without lowering essential competence.
- 2. Secure eligibility and assessment.** Verify identity and prior evidence. Use at least 40 scored written items or an independently approved equivalent constructed-response assessment; protect item content and attributable scoring.
- 3. Observe representative practical work.** Use safe realistic equipment, conditions and anomalies with preset rubrics. Preserve coaching, assistance, interruptions, failed steps and simulation limitations.
- 4. Apply distinct pass conditions.** Require knowledge at least 80%, practical at least 85% and every essential step passed. A trainer cannot be the sole examiner, reviewer and decider; the final decider is not the examiner.
- 5. Remediate and decide exact scope.** Explain outcome without disclosing secured answers, verify targeted learning and equivalent reassessment, and retain all attempts. Issue a bounded credential only after genuine independent approval.
- 6. Separate employer and continuing control.** Employer authorization specifies actual task and equipment and is separately reviewed. Monitor CPD, practice, inactivity, essential-skill renewal evidence and source surveillance; preserve expiry and restrictions.

Completion boundary: A failed essential practical control prevents credential grant regardless of aggregate score.

Record handover: AF-FR-9100-010, AF-FR-9100-003, AF-FR-9100-008, AF-FR-9100-011.

AF-PR-9100-034 — Independent Decisions, Attestations, Claims and Registry

Owner: Independent conformity decision function. Trigger: Grant, refusal, renewal, extension, maintained status or correction of an attestation.

- 1. Freeze the decision dossier.** Identify exact object, profile, scope, period, criteria, evidence, findings, configuration and proposed public statement. Verify the evaluated scope is technically and administratively complete.
- 2. Verify authority and independence.** Check actual role competence, case conflicts, lawful access and written operator/mark permissions. The evaluator or relevant consultant cannot decide their own third-party case.
- 3. Reperform critical evidence checks.** Review method validity, representation, uncertainty and mandatory conclusions. Retain dissent and return incomplete evidence rather than filling missing results from reputation or precedent.
- 4. Apply the conjunction.** For initial grant, renewal and extension require every applicable mandatory condition, adequate evidence and all in-scope nonconformities closed. Votes, payment and a high maturity score cannot supply a missing condition.
- 5. Record the bounded outcome.** State grant or other permitted outcome, reasons, restrictions, actual decision and issue times, expiry or instance, issuer and accountable approval. Technical concessions and conditional development remain separate.
- 6. Publish exact scope and history.** Reconcile the registry and certificate to the actual decision, protect confidential detail, communicate remedies and preserve corrections. Record status changes within source intervals; no reprint revives a suspended claim.

Completion boundary: Missing independent authority, unsupported mandatory evidence or open in-scope nonconformity prevents a positive new attestation.

Record handover: AF-FR-9100-007, AF-FR-9100-005, AF-FR-9100-006, AF-FR-9100-008, AF-FR-9100-032.

AF-PR-9100-035 — Surveillance, Renewal, Status, Transfer and Closure

Owner: Scheme continuing-assurance owner. Trigger: Approaching due date, material change, adverse evidence, missed requirement, transfer or operator exit.

- 1. Establish the real time baseline.** Record decision, issue, expiry, completed surveillance and profile-specific conditions separately. Use actual time zone, calendar rules and the shortest interval for inseparable mixed criticality.
- 2. Plan current technical coverage.** Use 12-month C0/C1 or six-month C2/C3 surveillance with actual route-appropriate evidence. Apply ORG resource/site floors separately and PER practical/current-competence conditions where relevant.
- 3. Act on adverse and overdue conditions.** Protect critical concerns immediately, apply the 24-hour critical notices/status controls and verify major/minor closure within source clocks. Booking or payment is not completed surveillance.
- 4. Control suspension and restoration.** State scope, prohibited use, actions and the 90-day final resolution limit. Restore only on evidence, restrict independently unaffected scope or withdraw; preserve original expiry unless full renewal occurs.
- 5. Complete renewal truthfully.** Evaluate current performance, changes, complaints, competence and all in-scope findings before actual renewal. A decision after expiry retains a gap; do not backdate a certificate.
- 6. Transfer duties and preserve closure.** The receiving operator reviews authenticity, scope, history, findings, competence and needed new evaluation. Accept custody of usable records, outstanding remedies and status duties; file transfer does not transfer authority.

Completion boundary: Missed required surveillance or unsupported continuing conformity triggers the applicable affected status action.

Record handover: AF-FR-9100-008, AF-FR-9100-006, AF-FR-9100-009, AF-FR-9100-010, AF-FR-9100-032.

AF-PR-9100-036 — Complaints, Appeals and Protected Concern Handling

Owner: Independent complaints and appeals function. Trigger: Dissatisfaction, contested decision, anonymous technical concern or protected integrity report.

- 1. Register and separate issues.** Record receipt, reporter channel, object, decision and grounds. Distinguish complaint, appeal and urgent safety or integrity concern; accept material good-faith information without membership or application-fee barriers.
- 2. Triage and preserve.** Assess immediate protection, reporting, status and evidence preservation before ordinary acknowledgement. Protect identity and prevent conflicted persons controlling the investigation.
- 3. Determine admissibility and appointments.** Acknowledge within five calendar days; apply the normal 30-day appeal submission and documented good-cause late route. Appoint competent reviewers independent of original evaluation, review and decision.
- 4. Evaluate fairly.** Examine controlling requirements, original evidence, method and reasoning as well as contrary and new information. Give parties a fair response opportunity through lawful confidentiality arrangements.
- 5. Determine and communicate.** Complete ordinary determination within 60 days, or document necessary extension and progress at least every 30 days. State uphold, correct, replace, return or withdraw with exact scope and actual effects.
- 6. Preserve protection and systemic learning.** Appeal receipt does not reinstate or extend status. Trace substantiated issues to affected reports and other holders, correct misleading public claims and verify corrective effectiveness while preserving original history.

Completion boundary: Missing independent review or essential evidence holds a supported appeal conclusion; necessary protection remains active.

Record handover: AF-FR-9100-011, AF-FR-9100-006, AF-FR-9100-007, AF-FR-9100-008.

5 Continuing controls and critical timing

Control	Trigger / maximum interval	Evidence and consequence
Ongoing attestation	Independent decision / maximum 24 months	Separate evaluated instance from ongoing validity; a shorter profile or permission can control. AG.1.
C0/C1 surveillance	Decision or last completed surveillance / 12 months	Actual completed route-appropriate work, not booking. AG.2.
C2/C3 surveillance	Decision or last completed surveillance / 6 months	Shortest applicable interval for inseparable mixed scopes. AG.2.
Internal audit programme	Applicable programme / no more than 12 months	C2/C3 critical-control implementation additionally examined within six months. 9.3(d).
Complete management review	Previous full review / no more than 12 months	Serious concerns escalated immediately; focused reviews when warranted. 9.4(c).
Corrective-action plan	Original finding notification / 30 calendar days	Immediate containment remains separate. AG.4.
Major / minor closure	Original finding notification / 60 / 90 calendar days	Verified effectiveness; no reset by reissuing a report or changing owner. AG.4.
Critical holder notice	Awareness / within 24 hours	Earlier binding obligations remain; immediate protective action. AG.4.
Critical operator status action	Substantiated critical concern / within 24 hours	Suspend affected scope or impose a justified effective restriction. AG.4.
Public status update	Status decision / within 2 calendar days	Urgent holder notice is not deferred until registry processing. AG.5.
Suspension resolution	Suspension decision / maximum 90 calendar days	Restore on evidence, restrict independently unaffected scope or withdraw; no administrative restart. AG.5.
Evaluation report	Evaluation close / within 14 calendar days	Record necessary exceptional delay; original finding clocks remain unchanged. AC.7.
Complaint/appeal acknowledgement	Receipt / within 5 calendar days	Urgent safety/integrity triage is immediate. AI.2.
Ordinary appeal submission	Decision notice / normally within 30 calendar days	Reasoned good-cause late admission remains possible. AI.3.
Ordinary determination	Receipt / normally within 60 calendar days	Necessary extension has reasons and progress at least every 30 days. AI.5.
Assessment/decision retention	Last relevant decision / at least 7 years	Longer applicable obligation, life or preservation hold prevails; lawful personal-data handling remains separate. AG.7.
Publication suitability review	Issue / previous review / at least every 3 years	Earlier review after material evidence or inconsistency. Y.6.
Substantive technical amendment	Public consultation / at least 60 calendar days	Actual comments, dispositions, technical checks, adoption and effectivity. Y.3.

These intervals originate in the supplied AF 9100 provisions; application remains route-, role- and event-specific. They are not instructions to delay an earlier protective or binding duty.

6 Independent closure and launch readiness

Review question	Evidence to retain
Authority and responsibility	Actual legal operator, owner, competent technical authority, independent reviewer and permitted result class are recorded.
Scope and criteria	Object, configuration, site, period, trigger, every technical value or observable attribute, units and prospective approval are complete.
Evidence and methods	Original accessible evidence, representative observations, valid methods, uncertainty, adverse cases and limitations support the intended conclusion.
People and independence	Competence is current for each task; genuine conflicts, relevant prior work and needed separation have been checked.
Records and tools	Field meanings, unique IDs, original history, access, retention, recovery and actual deployed workflows have passed local validation.
Decision and public use	All relevant blockers are resolved; required independent decision and written permissions precede the exact public claim.
Continuity and handover	Receiving custody, unresolved duties, corrections and historical decisions survive transfer, retirement or provider closure.

Appendix A — Controlling source and evidence

Source: AF 9100:2026, Aerospace Quality Management System, FIRST EDITION, 29 September 2026; supplied 131-page PDF. Source page references below locate the original publication. These excerpts are read with the complete applicable standard; local implementation sequences do not replace it.

22.1 Conformity evidence dossier

SOURCE p. 40 | Normative when applicable

22.1(a) The applicant shall maintain an indexed dossier linking the defined object, approved scope, applicability decisions, application profile, technical modules, implementation evidence, internal evaluations and corrective actions. Evidence shall permit a competent reviewer to follow a requirement to the relevant activity, result and decision.

22.1(b) The dossier shall identify missing, inaccessible, obsolete or unrepresentative evidence. Procedures and questionnaires alone shall not establish implementation. Confidentiality shall be protected through authorized access; a secrecy claim shall not convert unsupported assertions into verified evidence.

Required evidence: Object-specific dossier; applicable requirement set; evidence index; configuration and population coverage; limitations.

22.2 Evaluation, review and decision separation

SOURCE p. 40 | Normative when applicable

22.2(a) The scheme operator shall appoint evaluators competent for the object, sector, criticality and methods involved. Technical expertise shall be added where an auditor's competence does not cover the evaluated activity. Assignment, competence and conflicts shall be checked before work begins.

22.2(b) For third-party attestation, the decision maker shall not have performed that evaluation or supplied the relevant consultancy. A competent independent person may combine evidence review and the decision, but shall not certify their own evaluation. Internal release and internal audit independence shall follow their applicable role and criticality rules, not an inappropriate assumption that every employee is independent.

Required evidence: Assignment matrix; competence and conflict checks; evaluation record; independent review and decision identities.

22.3 Criteria, sampling and findings

SOURCE p. 41 | Normative when applicable

22.3(a) The evaluation plan shall identify criteria, locations, periods, methods and sampling limitations. Audits shall examine process implementation and actual outputs; product, service, process and personnel evaluations shall additionally apply the relevant object criteria.

22.3(b) Each nonconformity shall identify a requirement, objective evidence and the gap. Classification and decision consequences shall follow Annex AD. Audit-time planning shall follow Annex AC; personnel examinations shall follow Annex AE. A sampled review shall not be claimed to verify every item or person.

Required evidence: Evaluation plan; sample rationale; objective evidence; requirement-linked findings; assessed limitations.

22.4 Decision conditions and release blockers

SOURCE p. 41 | Normative when applicable

22.4(a) Initial grant, renewal and scope extension shall require closure of all nonconformities in the proposed scope and satisfactory independent review. Missing critical evidence, unresolved major breakdowns, falsified evidence and unfulfilled mandatory criteria shall prevent a positive decision. A percentage score shall not offset such a blocker.

22.4(b) For an existing attestation, a localized minor finding may be handled through a bounded continuation decision only under Annexes AD and AG. That decision is not a new certificate with open findings. Technical product holds, personnel restrictions and legal reporting shall be applied independently of certificate administration.

Required evidence: Requirement-by-requirement conclusion; finding closure; blocker check; reasoned and dated decision.

22.5 Statements, certificates and mark use

SOURCE p. 41 | Normative when applicable

22.5(a) A conformity statement shall identify AF 9100:2026, First Edition, the route, evaluated object, applicable profile, scope, sites or configurations, issuer, decision date, status and limitations. Self-declaration, customer assessment and independent third-party attestation shall be clearly distinguished.

22.5(b) AF marks shall require written permission for the exact use. An organizational mark shall not be placed so that it implies unevaluated product approval. No claim of official recognition, legal equivalence, accreditation or global acceptance shall be made without an actual supporting authorization or arrangement.

Required evidence: Approved claim text; certificate data; mark permission; actual recognition scope where claimed.

22.6 Continuing validity and changes

SOURCE p. 41 | Normative when applicable

22.6(a) The attestation holder shall report changes that can affect conformity, including new sites, ownership or legal identity, product configuration, service architecture, essential process variables, competence, critical subcontractors and serious incidents. Changes shall be evaluated before the affected extended claim is used.

22.6(b) Surveillance, renewal, suspension, restoration, expiry and withdrawal shall follow Annex AG. Status records shall preserve dates and scope history. Reissue of a document, payment of a fee or filing an appeal shall not extend an expired or suspended authorization.

Required evidence: Change notifications; surveillance findings; renewal evidence; current and historical status records.

22.7 Complaints, appeals and corrective communication

SOURCE p. 41 | Normative when applicable

22.7(a) A transparent complaint and appeal process shall be available under Annex AI. Persons deciding an appeal shall be independent of the contested decision and its evaluation. Good-faith complaints shall not result in retaliation or reduced access to fair assessment.

22.7(b) A substantiated concern shall trigger correction of affected outputs, evidence or public claims. Confidential information shall remain protected, while necessary safety communication shall not be suppressed to avoid reputational harm.

Required evidence: Case records; independent reviewer appointment; reasoned outcomes; affected-population action and communication.

22.8 Scheme operation and competence attestations

SOURCE p. 41 | Normative when applicable

22.8(a) Bodies operating AF assessment routes shall fulfill Clause 28 and Annex AH, in addition to the route-specific rules. A laboratory, inspection body or certification body seeking a CAB competence attestation shall undergo evaluation of its actual technical activities, not merely an organizational audit.

22.8(b) Accreditation and AF authorization shall not be self-awarded by a body using this publication. They require the separately identified authorized decision described in Annex AH. Organizations without that authorization may use the standard internally or contractually but shall describe the basis accurately.

Required evidence: Operator authority; body competence evaluation; written scope; independent decision; accurate accreditation and authorization claims.

28.1 Legal responsibility, resources and impartiality

SOURCE p. 48 | Normative when applicable

28.1(a) The provider shall identify the legal entity responsible for its work, governance, authorized signatories, resources and arrangements for financial and professional liabilities. Its commercial model shall not condition a favorable result on purchasing consultancy, training, membership or other services.

28.1(b) Impartiality risks from ownership, employment, shared staff, referrals, finance, close relationships and previous work shall be identified, reviewed and controlled. Where a conflict cannot be reduced to an acceptable level, the assignment shall be refused or reassigned. A signed declaration alone shall not neutralize an actual conflict.

Required evidence: Legal and governance records; resource and liability arrangements; impartiality analysis; conflict decisions.

28.2 Competence by function and technical scope

SOURCE p. 48 | Normative when applicable

28.2(a) Competence shall be defined separately for application review, evaluation, audit leadership, technical expertise, method approval, evidence review, decision and appeal. Authorization shall be based on verified ability for the object, sector, criticality and methods, not a generic job description.

28.2(b) The provider shall maintain an authorization matrix and monitor performance through witnessed work, record review and continuing development. A technical expert may supplement an auditor but shall not compensate for absence of a competent decision maker. Annexes AB and AH apply.

Required evidence: Competence criteria; witnessed assessments; role and technical-scope authorizations; performance monitoring.

28.3 Valid methods, equipment and technical evidence

SOURCE p. 48 | Normative when applicable

28.3(a) The provider shall demonstrate that selected methods, equipment, personnel and environments are suitable for the intended conclusion. Testing and calibration shall address metrological traceability, uncertainty, method validation or verification and continuing validity of results. Inspection shall address detection capability and access limitations.

28.3(b) Technical records shall retain the actual subject, configuration, method, data, corrections, uncertainty where relevant and authorized conclusion. Subcontracted results shall be evaluated for relevance and credibility; a report from another body is not automatically sufficient evidence.

Required evidence: Method and equipment records; validity checks; raw and processed results; subcontracted-evidence evaluation.

28.4 Independent review and final decision

SOURCE p. 48 | Normative when applicable

28.4(a) Before attestation, an independent competent reviewer shall confirm the adequacy of scope, methods, evidence, findings and closure. The decision maker shall have authority to refuse or restrict a claim despite commercial pressure and shall record the reasons for the actual decision.

28.4(b) For third-party certification, the provider shall retain final decision responsibility and shall not outsource it to the applicant, its consultant or the evaluator. An independent reviewer may also make the decision if authorized and free of those conflicts. The decision shall follow Annex AD.

Required evidence: Independent review; conflict-free decision authorization; recorded rationale; actual decision date.

28.5 Outsourced evaluators and supporting services

SOURCE p. 49 | Normative when applicable

28.5(a) Use of external personnel or technical resources shall be controlled by competence verification, confidentiality, impartiality, methods, supervision and records obligations. The provider shall verify their work before relying on it and retain responsibility for the issued conclusion.

28.5(b) An applicant-selected laboratory or expert may supply evidence only after scope, method, independence and result validity are reviewed. The applicant shall not control the provider's finding classification, sample selection or final decision.

Required evidence: External-personnel agreements; verified competence; technical review of external evidence; retained responsibility.

28.6 Information, complaints and continuity

SOURCE p. 49 | Normative when applicable

28.6(a) The provider shall protect confidential and personal information, preserve decision records and maintain accurate status information. Complaints and appeals shall be resolved through independent arrangements under Annex AI. Necessary corrections shall reach affected users of reports and attestations.

28.6(b) Continuity arrangements shall preserve records, outstanding cases, surveillance obligations and status verification if the provider ceases operation. Technical records shall remain available to appropriately authorized parties for required retention periods without unauthorized disclosure.

Required evidence: Protected records; status controls; complaint and appeal outcomes; provider continuity and closure arrangements.

28.7 CAB competence route and limits of accreditation

SOURCE p. 49 | Normative when applicable

28.7(a) A provider seeking an AF CAB competence attestation shall undergo the scope-specific evaluation, witnessing, independent review and authorized decision in Annex AH. Organizational certification shall not substitute for this evaluation.

28.7(b) Use of “accredited”, “AF authorized” or equivalent claims shall require the corresponding actual written decision and scope. The provider shall not self-accredit or infer recognition in another jurisdiction from this standard. An AF body evaluating a related operation shall preserve independent competence assessment and decision governance.

Required evidence: CAB evaluation and witnessing; independent decision; exact authorized scope; accurate accreditation and recognition claims.

Y.1 Publication identity and controlled edition

SOURCE p. 99 | Normative when applicable

Y.1(a) The publication identifier shall be AF 9100:2026 and the edition label First Edition. The publication date is 29 September 2026. The publisher designation shall be Aerospace Federation. The full identifier shall be used in conformity statements so that the AF publication cannot be confused with an unrelated document.

Y.1(b) AF is an AF publication-series designation. It shall not be interpreted as adoption by a regional standards system or a claim of regulatory endorsement. Any separate recognition arrangement shall identify its actual parties, scope, date and conditions without altering the meaning of this publication.

Y.1(c) Controlled distribution shall preserve the approved text, tables, equations, figures, annex status and edition metadata. Uncontrolled extracts shall be identified as extracts and shall not be presented as the complete requirement set.

Required evidence: Publication master; edition metadata; controlled copies; accurate extracts and recognition statements.

Y.2 Interpretation requests and technical resolution

SOURCE p. 99 | Normative when applicable

Y.2(a) A request for interpretation shall identify the exact provision, application context, ambiguity, conflicting readings, proposed consequence and relevant evidence. AF shall assign competent reviewers and check conflicts before issuing a controlled response.

Y.2(b) An interpretation may explain an existing requirement but shall not silently create a new obligation, relax a minimum or validate previously missing technical evidence. A material requirement change shall use the amendment process. Where a safe interpretation cannot be established, the affected dependent decision shall remain held or bounded by a lawful technical restriction.

Y.2(c) Issued interpretations shall have unique identifiers, dates, applicable clauses, rationale and approval records. Parties using the standard shall assess their effect on current profiles, procedures and claims and preserve the resulting decisions.

Required evidence: Interpretation request; technical review; controlled response; implementation-impact record.

Y.3 Corrections and amendments

SOURCE p. 99 | Normative when applicable

Y.3(a) An editorial correction shall identify its exact location and show that it does not change technical intent. Changes to requirements, decision rules, thresholds, scope, validity or essential competence shall be treated as technical amendments, not hidden editorial corrections.

Y.3(b) A technical amendment shall include a change rationale, affected clauses and annexes, cross-clause consistency review, relevant technical and mathematical checks, implementation impact and defined effectivity. Substantive changes shall undergo at least 60 calendar days of public comment before final adoption. Comments

and dissent shall receive recorded dispositions.

Y.3(c) Urgent safety information may communicate a protective concern and necessary interim measures, but shall be identified separately and shall not silently rewrite this edition. The subsequent amendment shall follow the controlled technical process.

Required evidence: Correction/amendment record; technical and consistency reviews; comment log and dispositions; actual adoption and effectivity.

Y.4 Numbering, translations and technical fidelity

SOURCE p. 99 | Normative when applicable

Y.4(a) AF shall maintain unique clause, table, figure, equation and form identifiers. Renumbering shall preserve a traceable correspondence and shall not invalidate historical evidence references. Cross-references shall resolve to actual provisions and shall identify whether the cited content is normative or informative.

Y.4(b) An authorized translation shall preserve technical meaning, normative verbs, mathematical notation, units, definitions and decision logic. Ambiguities shall be escalated rather than resolved through unrecorded local interpretation. The English text is the reference edition for this publication; any authorized translation shall state its relationship and issue identity.

Y.4(c) Reformatted accessible copies may be issued where the complete content and relationships are preserved. Layout changes shall not alter tables, mathematical signs, figure labels or the association between a requirement and its exceptions.

Required evidence: Numbering and correspondence register; translation review; technical layout verification; controlled accessible copies.

Y.5 Rights, marks and honest publication claims

SOURCE p. 99 | Normative when applicable

Y.5(a) Rights and permissions for reproduction, licensed use and AF marks shall be administered by the responsible rights holder through explicit terms. A copy of the standard shall not itself confer authority to certify, accredit, represent AF or use its marks.

Y.5(b) Publication status shall be distinguished from independent technical validation, regulatory approval and recognition by another party. Claims about completed evaluation or recognition shall require actual supporting records. Adoption of the document by an organization shall not be described as adoption by the whole sector.

Y.5(c) The publisher and scheme operators shall correct misleading publication or recognition statements when identified and shall preserve the record of the correction. No external endorsement shall be inferred from the similarity of a publication number, a technical term or the use of familiar assurance methods.

Required evidence: Actual permissions; mark controls; evidenced recognition claims; corrected misleading statements.

Y.6 Periodic review and maintenance record

SOURCE p. 100 | Normative when applicable

Y.6(a) AF shall review the continued suitability of the edition at least every three years and sooner where significant safety evidence, technology, feedback or implementation inconsistency warrants. A review shall consider technical coverage, decision consistency, proportionality and effectiveness of the scheme.

Y.6(b) The maintenance record shall distinguish proposals, approved changes, editorial corrections, interpretations and superseded content. A future proposal does not modify the current edition before its actual approved effectivity. Holders shall retain the basis used for each historical decision.

Required evidence: Review program; technical feedback; controlled maintenance log; actual effective versions.

AA.1 Object selection and the scope tuple

SOURCE p. 103 | Normative when applicable

AA.1(a) Before accepting an application, the scheme operator shall select one or more routes from Table AA-1. Each route shall have a separate evaluation boundary and conclusion. A combined assessment may share relevant evidence, but shall not merge different conformity objects into an ambiguous certificate.

AA.1(b) The scope tuple shall identify object type; applicant and responsible legal entity; product, service, process, person or provider identity; sites and remote functions; configuration or role version; lifecycle responsibilities;

criticality; technical modules; application profile; evaluated period; and exclusions or restrictions. Empty fields shall be justified rather than omitted silently.

Required evidence: Application review; selected routes; completed scope tuple; responsibility and applicability matrix.

AA.2 Application profile requirements

SOURCE p. 103 | Normative when applicable

AA.2(a) The profile shall define the evaluated object, version, intended use, operating or task domain, characteristics or competences, acceptance criteria, methods, samples, uncertainty or scoring rules, required evidence, critical failures, surveillance and change triggers. The technical profile owner shall be identified and competent to approve those criteria.

AA.2(b) A PRD profile shall state relevant performance, environmental, safety, interface and life criteria. A SVC profile shall state delivery outcomes and observation windows. A PRC profile shall state essential variables and qualified ranges. A PER profile shall state tasks, prerequisites, knowledge and practical demonstration. SUB and CAB profiles shall state the actual work or assessment capability.

AA.2(c) The profile shall be approved before evaluation. It may add requirements but shall not waive AF minima or mandatory obligations. Where methods or limits are missing, the application shall be held until competent technical definition is available; broad references to “good quality” or “all aerospace uses” are not adequate criteria.

Required evidence: Approved profile with technical criteria; method and decision matrix; critical-failure list; profile change history.

AA.3 Evaluation sequence and admission controls

SOURCE p. 104 | Normative when applicable

AA.3(a) The operator shall review eligibility, scope, competence resources, impartiality, evidence access and evaluation feasibility before contracting. It shall agree the profile and explain fees independently of outcome. An application shall not be accepted for a scope the operator cannot competently assess.

AA.3(b) The evaluation shall establish readiness, verify implementation or technical performance, record findings, verify correction and submit the complete evidence for independent review. ORG evaluation shall include readiness and implementation stages. Other routes shall use object-appropriate stages without imposing an organizational audit on an individual candidate.

AA.3(c) For an initial ORG assessment, the applicant shall have completed an internal audit covering the applicable scope and a management review, with sufficient implemented records to show operation. A new organization may be assessed when adequate actual evidence exists; artificial backdated records or a fixed unsubstantiated history shall not be requested or accepted.

Required evidence: Admission decision; contract; approved evaluation plan; readiness evidence; evaluation results and independent review.

AA.4 Evaluation evidence by route

SOURCE p. 104 | Normative when applicable

AA.4(a) For PRD, evaluation shall verify product identity, representative qualification and applicable unit or lot evidence. For an ongoing family claim it shall also verify that manufacturing and change controls maintain the evaluated properties. A one-time sample test shall not support indefinite production claims.

AA.4(b) For SVC and PRC, evaluation shall include actual delivery or witnessed execution under representative conditions. For PER, it shall include verified identity, prerequisites and the required knowledge and practical assessments. For SUB, it shall examine the actual performer and supplied scope, not merely a purchasing intermediary.

AA.4(c) For CAB, evaluation shall cover the technical methods and decisions the body intends to perform, including representative witnessed activities. A general quality audit without technical witnessing and competence evidence shall not be treated as a completed CAB route.

Required evidence: Route-specific results; representative work; witnessed evidence; limits of reused or sample evidence.

AA.5 Independent review, decision and permitted outcomes

SOURCE p. 104 | Normative when applicable

AA.5(a) The independent reviewer shall confirm scope completeness, criteria validity, evaluator competence, method suitability, adequate evidence, findings and closure. A reviewer shall return an incomplete dossier rather than infer missing results. Technical disagreements shall be recorded and resolved through competent authority.

AA.5(b) The authorized decision shall grant, refuse, maintain, restrict, suspend, restore, renew or withdraw a defined attestation. Initial grant, renewal and extension require closure of all nonconformities in the granted scope under Annex AD. A refusal shall identify the relevant unmet conditions without implying that unrelated scopes were evaluated.

AA.5(c) An applicant may correct deficiencies and reapply with actual evidence. The operator shall control repeat evaluations and configuration changes so that rejected results are not discarded. Payment, membership or seniority shall not determine the outcome.

Required evidence: Independent review checklist; reasoned decision; finding closure; precise scope and actual decision date.

AA.6 Attestation content and separate claims

SOURCE p. 104 | Normative when applicable

AA.6(a) An attestation shall contain a unique identifier, issuer, applicant or holder identity, full publication identifier, First Edition, route, application-profile ID and revision, evaluated scope and sites, configuration or role, decision and issue dates, applicable expiry or instance boundary, restrictions, status-verification method and authorized signatory.

AA.6(b) Multiple routes may be presented in one document only where the separate route, criteria, evaluation, decision and status are clear for each object. Suspension of one route shall not be concealed by the continued validity of another. Product markings shall be controlled separately from organizational publicity.

AA.6(c) A supplier's own declaration shall be labeled as a self-declaration. A customer's assessment shall be labeled as such. Neither shall be represented as an independent AF-authorized attestation unless that independent process and authorization actually exist.

Required evidence: Issued statement; separate route conclusions; mark permission; status record; accurate self-declaration labeling.

AA.7 Scheme ownership, authorization and changes

SOURCE p. 105 | Normative when applicable

AA.7(a) AF shall control the published AF rule set and written permissions to operate its scheme or use its marks. The operator shall retain responsibility for its evaluations and decisions within the granted scope. The applicant shall retain responsibility for its products, services and representations.

AA.7(b) A scheme operator shall not expand its authorized sector, object or technical scope without the required competence evaluation and written approval. Scheme changes shall follow Annex Y; changes to individual attestations shall follow Annex AG. An AF designation does not establish governmental delegation or recognition in another scheme.

Required evidence: Scheme governance; actual written operator authorization; authorized scope; controlled changes.

AA.8 Illustrative combined-scope example

SOURCE p. 105 | Definition, explanation or informative example; no new universal limit

AA.8(a) Illustrative example: an organization manufactures ground-support carts, provides maintenance and employs inspectors. ORG evaluates its management and assurance system. PRD evaluates a stated cart configuration and technical profile. SVC evaluates the maintenance service. PER evaluates an inspector's defined competence. Employer task authorization permits that inspector to work on the specified cart family.

AA.8(b) A positive ORG decision cannot close missing cart braking evidence, failed service recovery tests or a failed practical inspector assessment. Each route retains its own evidence, decision, status and limitations. The example describes scheme logic, not an actual AF approval.

AB.1 Role definition and competence domains

SOURCE p. 106 | Normative when applicable

AB.1(a) The provider shall define competence separately for auditor, lead auditor, technical expert, application reviewer, technical reviewer, decision maker and appeal reviewer. Authorization shall state the routes, sectors, methods, criticality limits, languages and any supervision requirements. One role shall not automatically confer the

others.

AB.1(b) Required competence shall include interpreting AF requirements and application profiles; process and lifecycle understanding; evidence integrity; sampling; measurement and statistical limitations; configuration and traceability; risk and criticality; human factors; ethics; interview and observation; reporting; finding classification; and recognition of work beyond personal competence.

AB.1(c) Domain-specific competence shall cover the hazards, materials, technologies, operational conditions and approval interfaces relevant to the assignment. For C2 or C3 work, the team shall include a verified technical specialist with relevant recent practice or demonstrated equivalent current competence. Merely adding a specialist's name to the plan shall not satisfy actual participation.

Required evidence: Role competence profiles; sector and method criteria; authorization limits; assigned technical coverage.

AB.2 Knowledge examination and practical evaluation

SOURCE p. 106 | Normative when applicable

AB.2(a) A third-party auditor shall achieve at least 80% in a controlled written examination covering AF interpretation, evidence, scope, findings and decisions, and at least 85% in the practical assessment. Every predefined essential safety, integrity and independence step shall be passed. A high total shall not compensate for falsified evidence, unsupported critical acceptance or failure to escalate an essential hold.

AB.2(b) The practical assessment shall include planning, interviews, observation, sampling, tracing actual or controlled simulated evidence, writing findings and presenting a reasoned conclusion. Competence evaluators shall record observed strengths, deficiencies and authorization limits. Assessment shall be independently reviewed before authorization.

AB.2(c) Assessment questions and case criteria shall be mapped to the competence profile, technically reviewed, secured and periodically evaluated for validity. Reassessment following failure shall use corrected competence and an equivalent controlled assessment, not memorized answers to an unchanged disclosed case.

Required evidence: Examination blueprint; secured questions; scores; essential-step results; practical observations; authorization decision.

AB.3 Experience equivalence and initial assessor development

SOURCE p. 107 | Normative when applicable

AB.3(a) An experience-equivalence route may recognize comparable prior professional audit or technical practice where identity, scope, dates, duration, role and performance are verified. It shall not waive the AF knowledge assessment, witnessed practical demonstration, impartiality or essential competence requirements.

AB.3(b) For the initial development of an AF assessor population, a panel of at least two independent competent professionals shall evaluate each candidate against this annex. Their own relevant technical and assessment competence shall be documented. Reciprocal self-approval, honorary appointments and automatic recognition based on membership shall not be accepted.

AB.3(c) The equivalence record shall identify each criterion satisfied by prior evidence, each remaining gap, the evaluated scope and the reason for the final decision. Unknown or unverifiable audit logs shall not be counted toward the required mentored experience.

Required evidence: Verified experience log; equivalence matrix; independent panel competence; witnessed demonstration; remaining restrictions.

AB.4 Assignment and technical coverage

SOURCE p. 107 | Normative when applicable

AB.4(a) Before each assignment, the provider shall verify role authorization, current competence, sector and criticality coverage, language, methods, physical or remote access and independence. The team shall be able to evaluate each relevant critical process and technical interface; no individual is presumed competent in all sectors covered by this standard.

AB.4(b) A technical expert shall work within a defined assignment and communicate evidence and limitations to the auditor and reviewer. The lead auditor shall integrate the result without overruling a specialist on a technical matter outside the lead auditor's competence. Unresolved disagreement shall be escalated and recorded.

AB.4(c) Classified or otherwise controlled work shall be assigned only to appropriately authorized personnel. Lack of permitted access or competence shall lead to resourcing changes, scope restriction or refusal, not acceptance

on the strength of an unsupported management statement.

Required evidence: Assignment review; team coverage matrix; specialist work record; access and conflict checks; disagreement resolution.

AB.5 Impartiality and incompatible activities

SOURCE p. 107 | Normative when applicable

AB.5(a) For third-party evaluation, review and decision, personnel shall not be assigned to a client for which they provided relevant consultancy or held employment within the preceding 24 months. The provider shall also evaluate ownership, financial dependence, family or close relationships and other conflicts that may remain after that period.

AB.5(b) The 24-month rule is not an internal-audit ban on employees. Internal auditors shall instead be independent of the work they evaluate, with suitable reassignment or external support where separation is not feasible. A product release reviewer may be internal, subject to the technical independence required by Annex B.

AB.5(c) An evaluator shall not promise a favorable decision, design the corrective action they will independently certify, accept outcome-linked compensation or suppress evidence at the applicant's request. General explanation of a requirement is permitted; client-specific system design that undermines independence is not.

Required evidence: Conflict declarations; prior-work screening; compensation controls; reassignment decisions; internal independence arrangements.

AB.6 Continuing authorization and observed performance

SOURCE p. 107 | Normative when applicable

AB.6(a) All authorized assessment-role personnel shall complete at least 16 hours of relevant continuing professional development in each 12-month period. Independent auditors shall additionally perform at least four auditor-days across at least two assignments in that period. A lead auditor shall lead at least two complete assignments in each 24-month period.

AB.6(b) Reviewers and decision makers shall complete at least three substantive file reviews or decisions in each 12-month period. Technical experts shall demonstrate current relevant practice and review changes affecting their technical scope. Providers shall assess performance using witnessed work, report quality, decisions, complaints and recurrence of errors.

AB.6(c) An independent auditor shall undergo a witnessed performance review at least once every 24 months. More frequent observation shall be required for a new sector, C2/C3 expansion, significant adverse evidence or deficient performance. Training hours shall not substitute for the required observed competence.

Required evidence: Development and activity logs; witnessed reviews; report-quality checks; ongoing role authorizations.

AB.7 Inactivity, restriction and reactivation

SOURCE p. 107 | Normative when applicable

AB.7(a) When the applicable activity minimum is not met, independent authorization for that role shall be suspended until a competence review and supervised reactivation demonstrate current capability. After more than 12 months without relevant audit practice, an auditor shall complete updated AF learning and a satisfactory witnessed assignment before independent work resumes.

AB.7(b) A serious competence or integrity concern shall trigger immediate assessment of the authorization and earlier affected work. Reinstatement shall require evidence proportionate to the cause, including reassessment where necessary. The original authorization expiry shall not be extended merely by restoration.

AB.7(c) Changes to the standard, sector technology, methods or legal access shall trigger targeted updates. An assessor shall decline tasks outside their authorization and request appropriate technical support. Automated tools may support work but shall not replace the accountable human evaluator or decision maker.

Required evidence: Restriction and inactivity records; reactivation plan; witnessed results; prior-work assessment; restored scope.

AB.8 Competence dossier and approval record

SOURCE p. 108 | Normative when applicable

AB.8(a) The provider shall retain the role profile, verified experience, training, examination and practical results, mentored assignments, competence decisions, technical scope, witnessed performance, development, conflicts

and status history. The record shall identify who evaluated, reviewed and authorized each role.

AB.8(b) Certificates or authorization letters shall disclose limitations and shall not imply that a person can audit every AF sector. Evidence of technical competence may be confidential, but the provider shall retain sufficient authorized access to substantiate assignments and respond to complaints.

Required evidence: Complete competence dossier; role and scope register; approval identity; current and historical restrictions.

AC.1 Planning inputs and effective personnel

SOURCE p. 109 | Normative when applicable

AC.1(a) The plan shall identify sites, shifts, functions, product and service families, technical modules, criticality, languages, external work, past performance, changes and access conditions. The provider shall review scope before determining time, rather than deriving scope from a fee quotation.

AC.1(b) Effective personnel N shall include employees and externally provided people whose work falls within the assessed organizational scope, including relevant temporary and seasonal staff. Part-time work may be converted using documented full-time-equivalent hours; each unique critical role shall nevertheless count as at least one person. Peak relevant staffing and actual shift diversity shall be considered. After the FTE calculation, N shall be rounded upward to the next whole person, with a minimum of one, before selecting the Table AC-1 band.

AC.1(c) Personnel shall not be excluded solely because they work remotely, are employed by an agency or support production indirectly. The provider shall document any consolidation of equivalent roles and shall avoid counting the same shared-service staff more than once.

Required evidence: Scope and staffing basis; FTE calculation; sites and shifts; critical-role coverage; planning rationale.

AC.2 Criticality, complexity and site modifiers

SOURCE p. 109 | Normative when applicable

AC.2(a) The multiplier K shall use the highest relevant criticality in the assessed scope: C0 = 1.00; C1 = 1.15; C2 = 1.35; C3 = 1.60. Where genuinely separate technical scopes are evaluated independently, their separate time allocations shall be recorded; a critical function shall not be diluted by averaging personnel across lower- criticality work.

AC.2(b) The additive complexity factor f shall include 0.15 for special-process qualification in scope, 0.15 for assured software/AI or digitally controlled acceptance, and 0.15 for materially novel technology without representative operating history. These are distinct triggers; a trigger shall be counted once. Other complexity requiring more time shall be added through a documented plan adjustment.

AC.2(c) Let S_v be the number of physical sites to be visited, with a minimum value of one for calculation. Let H be the number of additional materially different operating shifts requiring separate observation beyond the primary shift. The site/shift addition is $0.5(S_v - 1) + 0.5H$ auditor-days. This addition does not remove the coverage floor in AC.3.

Required evidence: Criticality selection; triggered complexity factors; site and shift additions; additional-resource decisions.

Source calculation note: (AC-1) $T_{calc} = \text{ceil}(2 \times [B(N) \times K \times (1 + f) + 0.5(S_v - 1) + 0.5H]) / 2$ ceil means rounding upward to the next integer. T_{calc} is rounded upward to a half auditor-day. One auditor-day is eight hours of actual evaluation; time is additive across competent evaluators, not merely elapsed calendar days.

AC.3 Total time, stages and exclusions

SOURCE p. 109 | Normative when applicable

AC.3(a) Initial evaluation time T shall be at least T_{calc} and at least one auditor-day per visited physical site, with additional time for the central function and remote activities where needed. For a wholly digital single-location organization, the physical-site floor shall be treated as one evaluation location, not an obligation to invent a physical visit.

AC.3(b) Readiness-stage time T1 shall be at least 0.5 auditor-day and the upward half-day rounding of 25% of T. Implementation-stage time T2 shall be the remainder and at least 1.5 auditor-days. If these minima cannot both be met, total time shall be increased. Readiness shall verify scope, documents, internal evaluation, implemented evidence and readiness for technical examination.

AC.3(c) Travel, meal breaks, commercial administration, final report production, interpretation delays, independent review and decision time shall not count as evaluation time. Trainees and observers shall not be counted as fully

productive auditors. Separate technical expert time shall be counted only for the actual evaluation task and not double-counted against simultaneous auditor activity on the same task.

Required evidence: Time calculation; stage allocation; site/shift schedule; productive-time records; separate review and decision resources.

Source calculation note: (AC-2) $T1 = \max[0.5, \text{ceil}(2 \times 0.25T)/2]$; $T2 = T - T1 \geq 1.5$ The equation gives the minimum readiness allocation. Increase total time where the readiness or implementation evidence requires more time.

AC.4 Surveillance and renewal time

SOURCE p. 110 | Normative when applicable

AC.4(a) For the current scope, the operator shall recalculate the initial time T when material scope or risk changes. Each surveillance evaluation shall use at least half of T, rounded upward to a half-day, and at least one auditor-day. Renewal shall use at least three quarters of T, rounded upward to a half-day, and at least two auditor-days.

AC.4(b) The site coverage and critical-control requirements remain additional floors. The provider shall increase time where these percentages cannot cover required sites, shifts, technical processes or unresolved concerns. No reduction shall be granted merely for AF membership, another certificate, a low fee or long customer history.

AC.4(c) Frequency is governed by Annex AG. Time allocated to one surveillance visit shall not be borrowed from a future visit to cover a missed required activity. Extra follow-up to verify nonconformity closure shall be planned according to the nature of the issue.

Required evidence: Current T calculation; surveillance and renewal schedules; required-site coverage; added follow-up time.

AC.5 Multisite coverage and controlled sampling

SOURCE p. 110 | Normative when applicable

AC.5(a) Every physical site included in an initial or renewal ORG scope shall be evaluated. The central management function, shared critical activities and remote functions shall also be covered. Site selection shall consider actual processes rather than addresses alone; a legal address with no operational activity shall not be represented as a production site.

AC.5(b) For surveillance only, homogeneous C0/C1 sites under one centrally controlled system may be sampled when equivalent activities, methods and controls are demonstrated. From S eligible sites, at least $m = \max(\text{ceil}(\sqrt{S}), \text{ceil}(S/2))$ shall be evaluated at each annual surveillance. Selection shall rotate to cover all eligible sites within 24 months. At least one quarter of selected sites, rounded upward, shall be chosen randomly; the remainder shall be risk-selected.

AC.5(c) C2/C3 sites, unique activities, materially different processes, sites with significant unresolved issues and newly added sites shall not enter that reduced homogeneous pool. Relevant C2/C3 critical-control sites shall be evaluated at each required surveillance interval. The central function shall be evaluated at every surveillance. These selections are coverage rules, not statistical confidence claims.

AC.5(d) A systemic finding at one site shall trigger review of all potentially affected sites and expansion of the sample. Removing the failing site from the certificate shall not be accepted as correction where the central system or remaining sites share the deficiency.

Required evidence: Eligibility analysis; site pool; random and risk selection; rotation history; expanded sampling and systemic review.

Source calculation note: (AC-3) $m = \max[\text{ceil}(\sqrt{S}), \text{ceil}(S/2)]$ Applies only to the eligible homogeneous C0/C1 surveillance pool. Mandatory central, critical and otherwise ineligible sites are added separately.

AC.6 Remote evaluation and access limitations

SOURCE p. 110 | Normative when applicable

AC.6(a) Remote methods may be used when identity, confidentiality, live observation, configuration, provenance and access provide evidence equivalent for the stated purpose. The provider shall document the suitability decision and limitations. Remote record review alone shall not replace necessary observation of a physical special process or safety-critical activity.

AC.6(b) Where reliable physical evidence cannot be obtained remotely, on-site evaluation or an appropriately controlled witnessed method shall be used. Restricted access shall be resolved through authorized arrangements. If necessary evidence remains unavailable, the corresponding conformity conclusion shall not be granted.

AC.6(c) Recording, screen capture and transfer of sensitive data shall be authorized. Live feeds shall be protected against selective or prerecorded presentation. Network failure or incomplete observation shall be recorded and the affected activity repeated or supplemented rather than marked complete.

Required evidence: Remote-method suitability review; authorized access; witnessed records; limitations and completed supplementary work.

AC.7 Audit execution, sample expansion and reporting

SOURCE p. 110 | Normative when applicable

AC.7(a) The audit shall include an opening review of scope and access, examination of actual process interactions, vertical traceability through selected outputs, observation of critical controls and a closing review of evidence-based findings. The sample shall include unfavorable results, changes, rework, complaints and unsuccessful tests where relevant.

AC.7(b) Samples shall identify populations, selections and limitations. Judgmental sampling shall not be described as a statistical assurance level. An inconsistency or suspected systemic issue shall trigger an expanded trail proportionate to consequence. The final report shall be issued within 14 calendar days after the evaluation closes, unless a documented exceptional delay is communicated without postponing protective action.

AC.7(c) The report shall identify actual evaluation time, participants, scope, criteria, methods, locations, sample, findings, unresolved limitations and the evaluator's recommendation. The independent decision shall remain distinct from that recommendation.

Required evidence: Audit plan; time log; evidence and sample trails; expanded checks; final report and separate decision.

AC.8 Worked time and sampling examples — illustrative

SOURCE p. 111 | Definition, explanation or informative example; no new universal limit

AC.8(a) For $N = 80$, one physical site, one observed shift, C2 criticality and two complexity triggers, $B = 5$, $K = 1.35$ and $f = 0.30$. The calculation gives $5 \times 1.35 \times 1.30 = 8.775$ auditor-days, rounded upward to $T = 9.0$. The minimum readiness stage is 2.5 days and implementation is 6.5 days. Surveillance is at least 4.5 days; renewal is at least 7.0 days. Independent review and decision require additional time.

AC.8(b) For nine eligible homogeneous C0/C1 sites, $m = \max(3, 5) = 5$ sites at annual surveillance, plus the central function and any separately mandatory locations. The selection rotates to cover every eligible site within 24 months. At least two of the five selected sites are random. This does not mean the unvisited sites are known to conform.

AC.8(c) For an optional statistical detection study, independent random observations with a true issue rate $p = 0.10$ need $n = \text{ceil}(\ln(0.05)/\ln(0.90)) = 29$ to have at least 95% probability of observing one or more issues. This model does not validate judgmental audit sampling, dependent records or a claim that the whole system is 95% conforming.

Source calculation note: $(AC-4) n_{\text{detect}} = \text{ceil}[\ln(1 - C)/\ln(1 - p)]$ C is the desired probability of detecting at least one issue when independent observations each have issue probability p. This is a detection-planning model, not a universal audit sample requirement.

AD.1 Decision basis and non-compensable conditions

SOURCE p. 112 | Normative when applicable

AD.1(a) Before evaluation, the responsible authority shall define the object, applicable requirements, criterion for each characteristic or competence, evidence needed, uncertainty treatment, required independence and permitted outcomes. Criteria shall not be selected retrospectively to obtain a favorable result.

AD.1(b) Every applicable mandatory criterion shall be fulfilled for a positive initial conformity attestation. No aggregate score, favorable delivery performance, commercial benefit or passing result in an unrelated area shall compensate for an unmet mandatory requirement, missing critical evidence or unresolved unacceptable risk.

AD.1(c) A technical release may include a lawful, explicitly approved concession for a bounded departure where the underlying technical and contractual framework permits it. The record shall identify that departure; it shall not falsely state that the original requirement was fulfilled. A concession cannot waive a mandatory legal approval or alter the AF requirements for an attestation.

Required evidence: Pre-agreed decision basis; complete criterion register; blocker review; concession and release distinctions.

AD.2 Measurement decision preparation

SOURCE p. 112 | Normative when applicable

AD.2(a) The measurement decision shall use the corrected result, applicable specification, validated method, justified uncertainty model and pre-agreed rule. Known significant systematic effects shall be corrected or otherwise treated through an approved model; an uncertainty allowance shall not conceal an ignored known bias.

AD.2(b) The record shall distinguish specification limits, control limits, resolution, uncertainty and acceptance limits. Units, significant figures, confidence or coverage interpretation and treatment of correlation shall be stated. The uncertainty shall be appropriate to the actual result and conditions, not copied from an unrelated calibration capability.

AD.2(c) Decisions shall use sufficient unrounded precision. Rounding is applied to reported values after the decision and shall not turn a failing or indeterminate result into a pass. When both lower and upper limits apply, both shall be evaluated; one favorable characteristic shall not substitute for another.

Required evidence: Measurement model; corrections; uncertainty budget; specification and acceptance limits; recorded rule and precision.

AD.3 DR-A — Full-interval decision rule

SOURCE p. 112 | Normative when applicable

AD.3(a) For a two-sided numerical specification [L, H], DR-A shall conclude “conformity demonstrated” only when the entire stated uncertainty interval lies within the inclusive specification limits. It shall conclude “nonconformity demonstrated under DR-A” when the entire interval lies outside one specification limit. All other results are indeterminate and shall be held from acceptance pending valid disposition.

AD.3(b) For C2 or C3 acceptance characteristics whose uncertainty can materially change the decision, DR-A shall be the default unless a documented alternative is approved under AD.5 by the metrology and relevant independent technical authorities. Applicable binding rules take precedence where they mandate another lawful rule.

AD.3(c) A one-sided specification shall use the corresponding single bound. For asymmetric uncertainty, the actual lower and upper coverage endpoints shall replace $y - U$ and $y + U$. The interpretation remains conditional on the stated measurement model and coverage; it is not an absolute guarantee of physical truth.

Required evidence: Declared DR-A application; actual result and coverage endpoints; criterion-by-criterion disposition; independent alternative approval where used.

Source calculation note: (AD-1) Conform: $y - U \geq L$ and $y + U \leq H$. Nonconform: $y + U < L$ or $y - U > H$. Otherwise: indeterminate. y is the corrected result and U the justified expanded uncertainty for the symmetric case. Equality at a specification boundary is inside the limit. An interval overlapping a limit is not automatically a proven physical defect, but conformity has not been demonstrated by this rule.

AD.4 DR-B — Simple acceptance with disclosed decision risk

SOURCE p. 112 | Normative when applicable

AD.4(a) Simple acceptance compares the corrected result directly with the specification limits. It may be used for C0 or C1 characteristics only where the rule is agreed before evaluation, the method is suitable, uncertainty and decision risk have been reviewed, and no binding obligation requires a more protective rule.

AD.4(b) The report shall disclose that acceptance does not use a guard band and that uncertainty can create false acceptance or false rejection near a limit. The operator shall not describe simple acceptance as zero risk. C2 or C3 use requires the independent alternative-rule approval in AD.5; it shall not be selected solely to accept a result that failed DR-A.

Required evidence: Prior agreement; uncertainty and risk review; scope and criticality; clearly disclosed acceptance rule.

AD.5 DR-C — Risk-targeted or other justified alternative

SOURCE p. 113 | Normative when applicable

AD.5(a) An alternative rule shall define the decision objective, allowable risks, statistical or physical model, prior information where used, distribution, dependence, measurement uncertainty, acceptance region and validation. Consumer and producer risks shall be distinguished. Approval shall occur before results are evaluated.

AD.5(b) A posterior probability of nonconformity conditional on a result shall be reported only when the underlying prior and likelihood are specified and justified. A coverage interval shall not automatically be reinterpreted as that

posterior probability. Likewise, a sampling plan's operating characteristic shall not be interpreted as the probability that an accepted particular lot is conforming.

AD.5(c) For a C2/C3 alternative, the independent technical reviewer shall evaluate consequences, model limitations, sensitivity and whether the rule provides the required protection. The metrology authority, relevant safety or mission authority and contractual authority where required shall approve its exact scope. The rule shall be reviewed after a material model or process change.

Required evidence: Alternative-rule model; risk constraints; validation and sensitivity; independent approvals; application limits.

AD.6 Indeterminate results, repeat testing and multiple criteria

SOURCE p. 113 | Normative when applicable

AD.6(a) An indeterminate result shall remain held until a validated improved measurement, relevant additional evidence or a lawful technical disposition resolves it. Repeating observations until a favorable reading appears is prohibited. A repeat or pooled-result method shall be specified in advance or independently justified with the original results retained.

AD.6(b) Where a guard band leaves an empty acceptance region, the method cannot demonstrate conformity under that rule. The response shall improve the method or obtain an approved technically justified alternative, not quietly widen the product specification. Known nonconforming material shall remain controlled under Clause 8.7.

AD.6(c) For many characteristics or repeated decisions, the plan shall consider cumulative false-decision risk, dependence and the consequences of multiple comparisons. A nominal interval for each characteristic shall not be represented as the same confidence for all characteristics jointly without a justified analysis.

Required evidence: Hold and disposition record; repeat-test plan; retained original results; cumulative-risk review.

AD.7 Finding classification and immediate action

SOURCE p. 113 | Normative when applicable

AD.7(a) A finding shall identify the exact requirement, objective evidence, affected scope and gap. The evaluator shall classify the finding using Table AD-2 and separately decide whether an immediate technical hold or protective action is necessary. Administrative classification shall never delay protection.

AD.7(b) Related localized findings shall be reviewed together for evidence of systemic breakdown. An opportunity for improvement shall not replace a nonconformity where a requirement is unmet. A mere preference for a different method, where the actual requirement is fulfilled, shall not be raised as a nonconformity.

Required evidence: Requirement-evidence-gap statement; classification rationale; systemic extent; immediate technical action.

AD.8 Attestation decisions and open findings

SOURCE p. 114 | Normative when applicable

AD.8(a) Initial grant, renewal and extension shall require all nonconformities in the granted scope to be closed, adequate evidence for all mandatory criteria and independent review. A restricted scope may be granted only where its boundary is real, independently evaluated and unaffected by unresolved systemic deficiencies; it shall not conceal the failed scope.

AD.8(b) An existing attestation may be maintained with a localized minor finding only when immediate correction or containment is adequate, cause and extent are reviewed, a corrective plan is accepted within the Annex AG time limit, and no essential control or mandatory output criterion is compromised. The decision maker shall record why continued status is justified and verify closure within the required period.

AD.8(c) An existing major finding shall trigger an immediate assessment of continuing conformity. Where the underlying ability to meet requirements is not demonstrated, the affected status shall be suspended. Limited continuation is permitted only for a specifically evidenced unaffected scope, through a documented restriction decision. A planned future correction alone is not evidence of current conformity.

AD.8(d) A conditional lifecycle gate or conditional supplier-development approval may permit bounded non-dependent work. Neither is a conditional conformity certificate. Annex AG controls closure, suspension and restoration deadlines; an expired deadline shall not be reset by reissuing the same finding.

Required evidence: Independent grant or continuation decision; closed findings; real scope boundaries; verified corrections and corrective action.

Source calculation note: (AD-2) Grant = scope valid AND all applicable criteria fulfilled AND evidence adequate AND findings closed AND independent decision authorized This is a logical conjunction, not a weighted score. "Findings closed" refers to nonconformities in the scope being granted; observations do not create a mandatory failure.

AD.9 Decision record and challenge

SOURCE p. 114 | Normative when applicable

AD.9(a) The record shall identify the applicant and object, route, profile, evidence package, evaluator and reviewer, findings and closure, independence, limitations, decision, reasons, actual date and signatory. Automated workflow may enforce checks, but an accountable authorized person shall approve the conformity decision.

AD.9(b) Technical dissent shall remain in the record with its resolution. An appeal shall follow Annex AI. A revised decision shall preserve the earlier decision and explain the new evidence or corrected interpretation. No record shall be backdated or altered to make the earlier basis appear stronger than it was.

Required evidence: Complete decision record; documented dissent; accountable signatory; preserved history and appeal disposition.

AE.1 Job and task profile

SOURCE p. 115 | Normative when applicable

AE.1(a) The scheme operator shall approve a job/task profile defining role purpose, tasks, decisions, hazards, technical knowledge, practical skills, ethical behavior, communication, relevant prerequisites, equipment and permitted scope. The analysis shall involve persons competent in the actual work and be reviewed when technology or responsibility changes.

AE.1(b) Profiles may cover engineers, technicians, inspectors, test personnel, special-process operators, maintainers, digital specialists and assurance professionals. A profile shall not certify a protected or licensed professional activity beyond the operator's lawful authority. Auditors and assessment-role personnel shall additionally meet Annex AB.

AE.1(c) The profile shall identify essential practical steps whose failure would compromise safety, evidence integrity or the validity of the technical conclusion. These steps shall be designated before examination and shall not be removed after a candidate fails them.

Required evidence: Approved job/task analysis; competence profile; technical and legal boundaries; essential-step list.

AE.2 Eligibility, identity and candidate information

SOURCE p. 115 | Normative when applicable

AE.2(a) The operator shall verify identity, prerequisites and relevant experience through traceable evidence. The candidate shall receive the profile, methods, passing rules, fees, expected conduct, renewal duties, permitted claims and appeal process before enrollment.

AE.2(b) Eligibility requirements shall be related to competence. Reasonable accommodations shall preserve the competence being assessed and any essential task conditions. Medical or physical criteria shall be required only where law or a justified task need makes them necessary, with confidential handling of the relevant information.

AE.2(c) A supplier of training shall not guarantee certification. The candidate shall not be required to buy a particular course where equivalent verified preparation meets the profile, unless a specific training element is itself technically necessary and transparently justified.

Required evidence: Identity and eligibility verification; candidate information; fair-access review; justified prerequisites.

AE.3 Assessment blueprint and validity

SOURCE p. 115 | Normative when applicable

AE.3(a) The blueprint shall map every required competence to a suitable examination, interview, practical task or verified experience method. Critical practical skills shall be demonstrated, not assessed solely through multiple-choice answers. Technical reviewers shall confirm content validity and representative task coverage.

AE.3(b) Written examinations shall contain at least 40 scored items or an equivalently rigorous, independently approved constructed-response assessment. Item difficulty, scoring consistency, security and relevance shall be reviewed using performance evidence. An examination shall not be considered valid solely because its total scores are statistically consistent.

AE.3(c) The practical assessment shall use representative equipment, conditions and anomalies within a safe controlled environment. Simulation may be used where it validly demonstrates the skill; the profile shall state limitations and any supervised workplace demonstration still required.

Required evidence: Blueprint; controlled examination; item and scoring review; practical task design; simulation validity.

AE.4 Passing rules and essential practical controls

SOURCE p. 116 | Normative when applicable

AE.4(a) A PER candidate shall achieve at least 80% in the knowledge assessment and at least 85% in the practical assessment, and shall pass every essential practical step. The profile may set more demanding requirements where justified. Scores for separate mandatory components shall not be averaged to offset a failed component.

AE.4(b) A candidate who falsifies material evidence, bypasses an essential safety control or approves a result known to lack required evidence shall fail the affected assessment and undergo an integrity or competence review. The assessment shall be stopped where continuation creates an unacceptable hazard.

AE.4(c) Scoring rubrics shall define observable behavior and tolerances before examination. Borderline cases shall receive an independent review of the actual evidence, not a discretionary pass based on fees, reputation, seniority or workforce shortage.

Required evidence: Component scores; all essential-step results; independent borderline review; reasoned pass or fail.

AE.5 Examiner competence, independence and security

SOURCE p. 116 | Normative when applicable

AE.5(a) Examiners shall demonstrate the technical competence and assessment skill required by the profile. They shall use controlled criteria and record actual observations. A trainer may contribute technical evidence but shall not be the sole practical examiner, reviewer and decision maker for their own candidate or cohort.

AE.5(b) Independent personnel decisions shall be made by a competent person who did not perform the candidate's examination. Conflicts, coaching during assessment, answer disclosure and unauthorized assistance shall be controlled. Identity checks, secure question handling and attributable scoring shall apply to remote and on-site examinations.

AE.5(c) Automated scoring shall be validated for the stated questions and rules. AI-generated assessments, translations or scoring recommendations shall receive competent review. No automated model shall be the sole authority for a competence decision involving an essential practical skill.

Required evidence: Examiner competence; independent decision; secure examination records; conflict and scoring validation.

AE.6 Failure, remediation and reassessment

SOURCE p. 116 | Normative when applicable

AE.6(a) The candidate shall receive an understandable outcome and the competence areas needing improvement, without compromising secured examination content. A remediation plan shall address the demonstrated deficiency before reassessment. Repeat assessment shall use equivalent difficulty and representative tasks.

AE.6(b) A failed essential practical step shall be reassessed through direct demonstration; passing an unrelated written test shall not close that deficiency. All earlier attempts shall remain traceable. Administrative re-registration shall not erase an integrity investigation or an existing protective restriction.

AE.6(c) The operator shall define fair reassessment access and controls against repeated guessing. A fixed waiting period is not substituted for evidence of improved competence. Where additional supervised experience is necessary, the required activities and completion evidence shall be specified.

Required evidence: Candidate feedback; remediation evidence; equivalent reassessment; preserved attempt history.

AE.7 Credential scope and employer authorization

SOURCE p. 116 | Normative when applicable

AE.7(a) A personnel credential shall state identity, unique ID, profile and revision, assessed role and technical scope, limitations, decision date, expiry, issuer and verification method. Its maximum ongoing validity shall be 24 months under Annex AG, subject to continued competence and truthful use.

AE.7(b) Employer task authorization shall separately identify the actual task, product or process, site or equipment, competence basis, supervision and validity. Its review interval shall not exceed 12 months and shall be shortened

where risk warrants. A credential alone shall not confer employer release authority or required statutory privileges.

AE.7(c) Where the employer changes, the credential may remain valid within its assessed scope, but the new employer shall verify task suitability and issue its own authorization. Significant changes to tools, technical data or task hazards shall trigger review before independent work.

Required evidence: Credential; employer task authorization; role and scope limits; change and transfer verification.

AE.8 Continued practice, inactivity and renewal

SOURCE p. 116 | Normative when applicable

AE.8(a) The credential holder shall complete at least 16 hours of relevant continuing development in each 12-month period and maintain evidence of relevant practice. The profile shall define the minimum practical frequency or supervised demonstration necessary for that role. The operator shall assess actual competence, not training hours alone.

AE.8(b) For C2/C3 tasks, more than six months without relevant practice shall require an observed competence demonstration before independent task authorization resumes. For C0/C1 tasks, the corresponding trigger is more than 12 months. Earlier reassessment shall follow significant change or adverse evidence. Auditor activity rules in Annex AB also apply; the stricter triggered requirement controls.

AE.8(c) Renewal shall review current scope, practice, development, conduct, complaints, changes and performance. It shall include a practical demonstration of essential skills within the preceding six months and a knowledge update covering material changes. New or expanded scope shall receive the necessary initial assessment rather than automatic renewal.

AE.8(d) The operator shall complete PER continuing-scope surveillance at the interval in Annex AG applicable to the assessed role criticality. Surveillance may use verified practice, development and observed performance as specified in the profile; renewal still requires the practical and knowledge evidence stated above.

Required evidence: Practice and development log; inactivity decision; observed essential-skill demonstration; knowledge update; renewal decision.

AE.9 Restriction, records and public verification

SOURCE p. 117 | Normative when applicable

AE.9(a) A competence or integrity concern shall trigger protection of affected work, investigation and a reasoned restriction, suspension or withdrawal decision. Restoration shall require correction and reassessment proportionate to the cause. Employer authorizations and personnel credential status shall be reviewed separately and communicated to authorized recipients.

AE.9(b) Records shall preserve eligibility, examination and practical evidence, scores, attempts, decisions, development and status history. Personal data shall be minimized and protected. Public verification shall disclose only credential identity, scope, issuer, validity and relevant status, not examination answers or sensitive personal records.

Required evidence: Protected dossier; restriction and restoration evidence; current status; permitted verification information.

AE.10 Completed illustrative personnel case

SOURCE p. 117 | Definition, explanation or informative example; no new universal limit

AE.10(a) Candidate PER-EX-017 is assessed for a defined dimensional-inspection role. The knowledge score is 86%, the practical score is 92%, but the candidate releases a C2 item after a result is indeterminate under the pre-agreed rule. "Hold an unresolved critical acceptance result" was an essential practical step. The decision is refusal of the requested credential despite the high aggregate scores.

AE.10(b) After supervised remediation, an equivalent practical assessment demonstrates correct holding, escalation, uncertainty interpretation and traceable reporting. An independent reviewer verifies all required components and the decision maker grants only the assessed inspection scope. The employer must still issue the actual task authorization. These are fictional case records, not credentials issued to a real person.

AF.1 Work-package and responsibility definition

SOURCE p. 118 | Normative when applicable

AF.1(a) The commissioning organization shall define the outsourced work package, outputs, technical baseline, acceptance criteria, interfaces, criticality, actual performer and retained decisions. A scope shall identify whether

the source performs the work itself or uses further providers.

AF.1(b) The responsible buyer and technical authority shall verify completeness before order placement. Commercial terms shall not silently contradict technical quality requirements. Where the performer cannot access necessary controlled data, an authorized information arrangement shall be established before work starts.

Required evidence: Approved work package; performer identity; technical baseline; retained decision authority; resolved commercial/technical conflicts.

AF.2 Approval status and release restrictions

SOURCE p. 118 | Normative when applicable

AF.2(a) Supplier status shall identify the precise approved scope. Conditional development or trial use shall specify the work permitted, technical conditions, output segregation, approver and closure evidence. It shall not permit unrestricted delivery or be represented as a conformity certificate.

AF.2(b) When a source's certificate or approval is used as supporting evidence, the organization shall verify its authenticity, scope, actual site and current status. The organization shall retain responsibility for its assigned acceptance decision and any required independent verification.

Required evidence: Source status; conditional-work restrictions; verified certificates; completed technical approval.

AF.3 Sub-tier visibility and change control

SOURCE p. 119 | Normative when applicable

AF.3(a) Critical sub-tier sources shall be identified to the degree needed for traceability, capability and risk control. The organization shall verify that essential instructions and change restrictions reach the performer. An intermediary's assurance that requirements were passed on shall be tested through representative evidence.

AF.3(b) A change affecting qualification, technical characteristics, capacity, security or evidence validity shall be reviewed before implementation. Planned changes shall be notified early enough for the required evaluation; where timing is inadequate, work shall remain restricted. Further subcontracting shall not be used to avoid a disapproved source.

Required evidence: Critical sub-tier map; flow-down acknowledgement; representative checks; prior change decisions.

AF.4 External personnel and knowledge services

SOURCE p. 119 | Normative when applicable

AF.4(a) Personnel agencies and professional service providers shall supply verified competence, relevant experience, authorization and supervision information. The commissioning organization shall verify suitability for the actual task and communicate current instructions, hazards, confidentiality and reporting duties.

AF.4(b) Outsourced engineering, inspection conclusions, AI-generated analyses and advisory reports shall be reviewed by competent personnel before they become controlled evidence. Contractual allocation shall identify the technical reviewer, approval authority, data rights and responsibility to correct errors.

Required evidence: Personnel suitability; task induction and authorization; reviewed technical service outputs; correction obligations.

AF.5 External laboratories, inspection and digital providers

SOURCE p. 119 | Normative when applicable

AF.5(a) Technical providers shall be evaluated for the actual method, range, uncertainty where relevant, personnel, equipment, sample integrity and reporting scope. Accreditation or another competence statement may support selection only for its verified actual scope; it shall not replace assessment of fitness for the requested work.

AF.5(b) Digital and cloud providers shall have defined data location and access arrangements where relevant, configuration and update control, recovery, incident communication and exit support. A service subscription shall not remove the need to preserve long-life engineering evidence or maintain an approved deployed configuration.

Required evidence: Technical provider review; method and range suitability; sample/data chain; digital continuity and exit agreements.

AF.6 Incident, escape and corrective-action integration

SOURCE p. 119 | Normative when applicable

AF.6(a) A supplier shall report a known or credible issue affecting supplied output through agreed channels, preserving data and identifying the affected population. AF-attestation-related notifications shall meet Annex AG; earlier legal or contractual duties shall prevail. The commissioning organization shall promptly assess downstream consequences.

AF.6(b) Corrective action shall address both occurrence at the source and escape through the commissioning organization's controls. Closing the supplier's action request shall not automatically close the receiving organization's affected-product disposition or its own oversight deficiency.

Required evidence: Notification and acknowledgement; downstream trace; joint cause analysis; separate product and system closure.

AF.7 Continuity, source exit and completed trace example

SOURCE p. 119 | Normative when applicable

AF.7(a) Exit plans shall identify records, tools, intellectual property, outstanding orders, service-life support and unresolved findings. The receiving source shall demonstrate capability before transfer. Confidentiality and data rights shall be respected while preserving necessary evidence for existing users.

AF.7(b) Illustrative chain: a prime contracts a bonded bracket to supplier S-10, which uses approved surface-treatment source S-10A and test laboratory L-07. The lot record connects input material M-31, treatment record ST-88, bonding run BR-116, laboratory result TR-41 and bracket serials B-001 to B-040. A treatment excursion shall trace through all 40 serials, including delivered assemblies; a valid laboratory report for another lot cannot close the issue.

Required evidence: Exit and transfer plan; complete source-to-output trace; verified receiving capability; controlled unresolved issues.

AG.1 Time interpretation and recorded dates

SOURCE p. 120 | Normative when applicable

AG.1(a) Unless explicitly stated otherwise, "days" means calendar days. A period starts when the holder or responsible operator is first formally informed of the relevant finding, decision or event; final report production shall not postpone an already communicated finding. A deadline measured in months falls on the corresponding calendar date, or the last day of that month if no corresponding date exists.

AG.1(b) A validity record shall specify its time basis and exact expiry date. Certificate issue date and conformity decision date shall be recorded separately when they differ. No document shall be backdated to conceal an expired, suspended or unassessed period. A later correction shall preserve the actual history.

Required evidence: Time basis; notification timestamps; decision, issue and expiry dates; preserved amendments.

AG.2 Ongoing versus instance attestations

SOURCE p. 121 | Normative when applicable

AG.2(a) An ongoing attestation remains valid only while required surveillance, criteria and conditions are fulfilled. A holder with mixed criticality shall follow the shortest interval triggered by the attested scope unless genuinely separate scopes and records justify different surveillance arrangements.

AG.2(b) A lot, serial, one-time test, service-event or other instance attestation shall identify the exact evaluated instance and conditions. It does not authorize future production or continuing services. Its historical result does not acquire a universal 24-month technical validity; later evidence that invalidates the result shall nevertheless trigger correction or withdrawal of the claim.

AG.2(c) A process qualification or personnel task authorization may lose validity before its scheduled review because conditions or competence have changed. A certificate period shall not extend an equipment life limit, calibration validity, operator license or qualified process window.

Required evidence: Ongoing/instance classification; appropriate expiry or event boundary; monitored conditions; linked technical limits.

AG.3 Surveillance planning and completed coverage

SOURCE p. 121 | Normative when applicable

AG.3(a) The operator shall plan surveillance using current scope, criticality, changes, performance, complaints, prior findings and technical dependencies. Annex AC sets organizational time and site-coverage minima. Other

routes shall use the profile's appropriate tests, observation or competence checks within the intervals in Table AG-1.

AG.3(b) Completed surveillance shall verify that the attestation basis remains valid, not merely that documents have not changed. Missed surveillance by the applicable deadline shall trigger suspension of the affected ongoing attestation. Scheduling an audit, paying an invoice or issuing a reminder shall not count as completion.

AG.3(c) A serious event or material change shall trigger special evaluation before the routine due date where necessary. Recovery from an interruption shall verify actual competence, configuration and controls before the affected status is restored.

Required evidence: Risk-based surveillance plan; completed evidence; missed-deadline decisions; special evaluations and restoration checks.

AG.4 Finding closure and overdue action

SOURCE p. 121 | Normative when applicable

AG.4(a) The finding owner shall implement immediate correction or containment, determine extent and cause, implement corrective action and provide evidence of effectiveness. The operator shall verify closure by a method appropriate to the finding; a revised procedure alone is insufficient for an implementation failure.

AG.4(b) If a major or minor closure deadline is missed, the operator shall suspend or further restrict the affected ongoing scope unless it is already suspended or withdrawn. A new finding number or revised action plan shall not restart the original deadline. The deadline for a critical finding shall be set by the necessary protective action and relevant technical basis, not by the minor or major timetable.

AG.4(c) For initial grant, renewal and extension, no open nonconformity may remain within the requested scope at the decision. Corrective-action periods are time allowed to remedy deficiencies, not a permission to issue a certificate before those deficiencies are closed.

Required evidence: Correction and cause evidence; verified effectiveness; original due dates; overdue status decisions.

AG.5 Suspension, restriction, restoration and withdrawal

SOURCE p. 121 | Normative when applicable

AG.5(a) Suspension shall state the affected object, scope, reason, prohibited claims, required action and final resolution deadline. The holder shall cease the affected claim and mark use immediately. Product or service containment obligations remain separate and shall be implemented where the technical issue requires them.

AG.5(b) Restoration shall require verification that the cause is resolved, affected outputs have been addressed and the attestation basis is again valid. The original expiry shall remain unchanged unless a complete renewal decision is also made. Restoration shall not retrospectively validate the suspended interval.

AG.5(c) Restriction shall be allowed only where the remaining scope is independently demonstrated to be unaffected and adequately controlled. At the end of 90 days of suspension, the operator shall restore, formally restrict to such a scope or withdraw. Suspension shall not be prolonged by repeated administrative resets.

Required evidence: Reasoned status decisions; required action; verified restoration; unaffected-scope analysis; complete history.

AG.6 Renewal and continuity of claims

SOURCE p. 121 | Normative when applicable

AG.6(a) The operator and holder shall plan renewal sufficiently before expiry to complete evaluation, corrective action, independent review and decision. Initiating the process at least 90 days before expiry is recommended; it does not guarantee completion or extend validity.

AG.6(b) Renewal shall evaluate the complete current basis, performance over the preceding period, changes, complaints, competence and surveillance effectiveness. The operator shall not rely solely on the prior certificate. All nonconformities in the renewed scope shall be closed before the new decision.

AG.6(c) If the decision is completed after expiry, the new attestation shall begin no earlier than its actual decision date. The gap shall remain visible. The holder shall not use the expired claim while waiting for a decision.

Required evidence: Renewal plan; complete evaluation; closed findings; actual decision dates; disclosed gaps.

AG.7 Scope change, transfer and provider closure

SOURCE p. 122 | Normative when applicable

AG.7(a) Expansion to new products, services, roles, technical methods, critical processes or sites shall require competence, profile and evidence review before the expanded claim is used. Legal identity, ownership and key resource changes shall be assessed for their effect on responsibility and continuing control.

AG.7(b) Transfer to another operator shall not be automatic. The receiving operator shall verify authenticity, actual scope, decision history, open findings, surveillance and competence evidence and perform additional evaluation where necessary. A suspended or unsupported claim shall not be made valid by transfer.

AG.7(c) If an operator ceases operation, the owner and authorized parties shall preserve records, status and outstanding cases, and arrange any lawful transfer. Holders shall be informed of effects on surveillance and claims. Record transfer alone does not transfer accreditation or AF operating authority.

Required evidence: Scope-change evaluation; transfer review; unresolved findings; provider closure and holder notification.

AG.8 Status register, records and historical integrity

SOURCE p. 122 | Normative when applicable

AG.8(a) The scheme operator shall maintain a current register identifying attestation ID, holder, route, scope, profile, issue and decision dates, expiry or instance boundary, status and restrictions. Public verification shall disclose sufficient information to prevent misleading use while protecting personal and controlled technical data.

AG.8(b) Assessment and decision records shall be retained for at least seven years after the last relevant decision, or longer where applicable obligations, product life or investigations require. Sensitive personnel information shall be minimized, access controlled and lawfully disposed of when retention is no longer justified. Legal constraints requiring a different handling arrangement shall be documented without falsifying or concealing the decision basis.

AG.8(c) Corrections, restrictions, suspension, expiry and withdrawal shall preserve historical dates. A record may be archived but shall not be deleted to imply that an adverse status never existed. The operator shall test retrieval and continuity of status information.

Required evidence: Current and historical register; privacy controls; justified retention; tested retrieval and continuity.

AH.1 Provider identity, governance and responsible operation

SOURCE p. 123 | Normative when applicable

AH.1(a) The provider shall identify its legal responsibility, owners, governing authority, authorized activities, organization, decision authority, resources and arrangements for liabilities. Its scope shall distinguish testing, calibration, inspection, organizational certification, product/service/process certification, personnel assessment and competence assessment of other bodies.

AH.1(b) The provider shall maintain sufficient qualified personnel, technical resources and financial continuity to perform contracted work, corrective follow-up and required surveillance. Liability, insurance or equivalent arrangements shall be appropriate to the work and applicable obligations. Funding shall not purchase a favorable technical conclusion.

AH.1(c) Terms of service shall state the object, criteria, confidentiality, access, responsibilities, fees, complaints, appeals and restrictions on claims. The provider shall not imply authorization beyond its actual written scope or guarantee that a public authority will accept its reports.

Required evidence: Legal and governance records; declared activity scope; resources; liability arrangements; accurate service terms.

AH.2 Impartiality oversight and structural separation

SOURCE p. 123 | Normative when applicable

AH.2(a) The provider shall maintain a live analysis of impartiality risks, including common ownership, consultancy, product design, manufacture, financial dependence, shared staff, referral fees and outcome-linked compensation. Interested-party input shall be obtained through a balanced oversight mechanism whose members can challenge management without commercial retaliation.

AH.2(b) A body shall not independently certify work it designed or provide consultancy that compromises its subsequent independent decision. Related activities shall be identified and controlled through adequate structural and functional separation. Where effective independence cannot be demonstrated, the affected evaluation shall be

refused or performed through a genuinely independent authorized arrangement.

AH.2(c) An internal inspection or test function may generate technical evidence if its relationship is declared and its competence is valid. It shall not falsely present that evidence as independent third-party certification. The required independence level shall reflect the stated claim and technical consequence.

Required evidence: Impartiality-risk register; oversight decisions; related-activity controls; declared relationships and assignment refusals.

AH.3 Technical scope and competence authorization

SOURCE p. 123 | Normative when applicable

AH.3(a) Each authorized technical scope shall identify object families, methods, ranges or conditions, equipment, personnel and relevant limitations. Calibration scopes shall additionally identify quantities, ranges and demonstrated uncertainty capability. A broad sector label shall not substitute for this technical definition.

AH.3(b) Competence shall be evaluated for application review, method approval, sampling, evaluation, technical sign-off, independent review and final decision. Annex AB applies to audit and decision personnel; Annex AE applies where personnel credentials are issued. The provider shall verify external personnel to the same applicable requirements.

AH.3(c) Changes to methods, equipment, key personnel, sites or decision activities shall undergo a competence and authorization review before use. A flexible internal method scope may permit controlled changes only within demonstrated competence and documented authorization boundaries.

Required evidence: Detailed scope schedule; function-specific competence; technical authorizations; change evaluation.

AH.4 Test and calibration method validity

SOURCE p. 123 | Normative when applicable

AH.4(a) The laboratory shall select methods suitable for the actual measurand, item, range, environment and decision. A new or materially modified method shall be validated; an established method shall be verified for the laboratory's actual implementation. Performance characteristics shall address bias, precision, selectivity, range, detection capability and robustness where relevant.

AH.4(b) Measurement traceability shall use an appropriate documented chain of calibrations, reference materials or other justified references with their uncertainty contributions. Equipment shall be identified, maintained and verified after relevant change. An expired calibration or unsuitable range shall trigger assessment of affected previous results, not only a new calibration.

AH.4(c) Uncertainty shall be evaluated to the extent needed for the report and intended decision. Sampling contributions shall be addressed when sampling belongs to the laboratory's responsibility. Tests reporting qualitative outcomes shall still evaluate the relevant capability to distinguish conditions and avoid false conclusions.

Required evidence: Method validation/verification; measurement traceability; equipment status; uncertainty and detection capability; previous-result impact reviews.

AH.5 Samples, execution and continuing validity of results

SOURCE p. 124 | Normative when applicable

AH.5(a) The provider shall control sample receipt, unique identity, condition, requested work, storage, preparation, chain of custody, consumption and disposal. Deviations from requested conditions shall be resolved before using results for a claim. Raw data shall identify the item, method, equipment, personnel and actual conditions.

AH.5(b) Continuing validity shall be monitored using suitable reference checks, control samples, repeated or blind tests, interlaboratory comparison, proficiency activities or technically justified alternatives. The program shall cover significant technical scopes at justified intervals and respond to adverse results. Participation alone shall not establish competence when performance is unsatisfactory.

AH.5(c) Data-processing software and calculation tools shall be verified. Manual transcription, unit conversion, automated interfaces and electronic signatures shall be controlled. A report shall be amended when a material error is identified, preserving the earlier version and notifying affected users.

Required evidence: Sample and custody records; raw data; validity-monitoring program; comparison results; verified data processing; corrected reports.

AH.6 Inspection and certification method controls

SOURCE p. 124 | Normative when applicable

AH.6(a) Inspection shall use qualified procedures and personnel appropriate to the material, configuration, access and defect mechanisms. Limitations of visual access, non-destructive examination or remote evidence shall be recorded. A report shall not imply that inaccessible characteristics were directly verified.

AH.6(b) Certification shall evaluate the actual object against its approved profile, apply independent review and decision, and maintain surveillance where the claim is ongoing. Product inspection, a laboratory test report, personnel examination and management-system audit shall not be substituted for one another without a justified route-specific evidence decision.

AH.6(c) Outsourced evaluations shall have verified scope, methods, competence and confidentiality. The certification provider shall retain its final decision responsibility. An applicant shall not be permitted to choose favorable results while concealing relevant failures from the evaluator or reviewer.

Required evidence: Inspection and certification methods; stated limitations; outsourced-work review; independent decisions; complete result population.

AH.7 CAB application and competence evaluation

SOURCE p. 124 | Normative when applicable

AH.7(a) A CAB applicant shall submit its legal and governance information, impartiality analysis, requested detailed technical scope, methods, facilities, competence records, sample reports, internal evaluation, management review, complaints and corrective-action evidence. Requested activities not yet demonstrated shall be identified rather than described as established capability.

AH.7(b) The authorized competence-assessment team shall review documentation and evaluate the relevant operating sites, technical resources, methods, personnel, records and decisions. It shall witness representative activities for every distinct method family or assessment route, including the highest consequence and material scope limitations. Grouping shall be justified by actual technical similarity.

AH.7(c) The evaluation shall include at least one complete trace from application and contract review through technical execution, reporting, independent decision where applicable and subsequent control. It shall challenge unsuccessful work, amended reports, complaints and changes. Outstanding nonconformities in the requested scope shall be closed before grant.

Required evidence: CAB application dossier; detailed scope; on-site and witnessed evaluation; complete case trails; verified closure.

AH.8 Independent competence decision and accreditation boundaries

SOURCE p. 125 | Normative when applicable

AH.8(a) The competence-assessment decision shall be made by authorized personnel independent of the applicant and the evaluation they are deciding. AF shall identify the responsible scheme authority and preserve documented technical independence where related AF activities have a commercial or operational interest.

AH.8(b) A body shall not accredit itself or issue an accreditation claim from its own ORG conformity statement. Use of the AF accreditation or CAB competence claim shall require an actual written authorization, a completed scope-specific competence evaluation and a controlled independent decision. The decision shall state exactly which activities are covered.

AH.8(c) Acceptance by another authority, customer or recognition arrangement shall be described only to its actual evidenced scope. This annex creates no governmental delegation or automatic cross-border recognition. A competence attestation shall not be used to imply that every report produced by the body is correct.

Required evidence: Independent decision authority; completed evaluation; exact written CAB scope; accurate accreditation and recognition statements.

AH.9 Surveillance, corrective learning and operational closure

SOURCE p. 125 | Normative when applicable

AH.9(a) CAB surveillance and renewal shall follow Annex AG and address technical witnessing, competence, method validity, impartiality, decisions, complaints and significant changes. Adverse proficiency or comparison results shall trigger technical action and review of affected earlier reports.

AH.9(b) The provider shall correct inaccurate reports and claims, notify appropriate recipients and assess systemic extent. Closure or loss of authorization shall preserve technical records, outstanding cases and accurate status information. Any transfer shall maintain confidentiality and the actual history of competence decisions.

Required evidence: Technical surveillance; witnessed competence; adverse-result action; report corrections; closure and record-transfer arrangements.

AI.1 Accessible intake and case separation

SOURCE p. 126 | Normative when applicable

AI.1(a) The operator shall provide an accessible route for complaints and appeals, with clear instructions, confidentiality arrangements and responsible contacts. A complaint expresses dissatisfaction requiring investigation; an appeal requests reconsideration of a specified decision. A case may contain both, and each issue shall receive appropriate handling.

AI.1(b) Good-faith safety, integrity or competence concerns shall be accepted without an application fee or retaliation. Anonymous concerns shall be evaluated on available evidence. The operator shall not reject a material allegation solely because the reporter is not a paying customer or certificate holder.

Required evidence: Published intake procedure; case identity; issue classification; confidentiality and non-retaliation controls.

AI.2 Acknowledgement, triage and protection

SOURCE p. 126 | Normative when applicable

AI.2(a) The operator shall acknowledge receipt within five calendar days and identify the case owner, scope and expected process. Triage shall determine whether immediate protection, report correction, status action or notification is needed. Time-critical protection shall not wait for acknowledgement or a full investigation.

AI.2(b) The operator shall preserve relevant original records and prevent inappropriate modification or destruction. A conflict check shall be performed before appointing investigators or reviewers. The reporter's identity shall be disclosed only as necessary and lawful for fair handling and protection.

Required evidence: Acknowledgement; triage; protective actions; evidence preservation; conflict and privacy review.

AI.3 Appeal admissibility and independent reviewers

SOURCE p. 126 | Normative when applicable

AI.3(a) An appeal should identify the contested decision, grounds and relevant evidence and shall normally be submitted within 30 calendar days after decision notification. The operator may admit a later appeal where justified by new material evidence, access barriers or other documented good cause, applying the policy consistently.

AI.3(b) The appeal decision shall be made by competent persons who did not perform the original evaluation, review or decision and have no material conflict. At least one reviewer shall understand the relevant technical or competence scope; specialist advice shall be obtained where needed.

AI.3(c) An internal review may resolve a clear administrative error promptly, but a substantive contested decision shall still receive independent consideration. The original decision maker may explain the record, but shall not vote on the appeal outcome.

Required evidence: Admissibility decision; independent appointment; technical competence; conflicts; participation boundaries.

AI.4 Evidence, fairness and technical investigation

SOURCE p. 126 | Normative when applicable

AI.4(a) The case review shall examine the applicable requirements, profile, actual evidence, method, scoring or decision rule, independence, original reasoning and new material information. Both supporting and contrary evidence shall be evaluated. Missing records shall be identified as a limitation, not reconstructed as if they had existed.

AI.4(b) Affected parties shall have a fair opportunity to present relevant information and respond to material issues, subject to lawful confidentiality and safety limits. The review may request repeat testing, re-examination, additional audit or specialist analysis where necessary and technically justified.

AI.4(c) The investigation shall distinguish a valid original decision from new circumstances arising later. Where the scope or configuration has changed, the operator may require a new application rather than falsely treating later

evidence as proof of conformity at the original date.

Required evidence: Investigation plan; complete evidence record; party submissions; independent technical analysis; distinction of original and later facts.

AI.5 Determination, communication and exceptional delay

SOURCE p. 126 | Normative when applicable

AI.5(a) An ordinary case shall be determined within 60 calendar days after receipt. Where complexity, authorized evidence access or necessary technical testing requires longer, the operator shall document the reason, inform the parties and provide progress at least every 30 days. An extension shall not postpone necessary protective action or revive an expired claim.

AI.5(b) The decision shall state whether the original conclusion is upheld, corrected, replaced, returned for further evaluation or withdrawn. Reasons shall identify the applicable requirements and material evidence. The authorized scope and effective date of any status change shall be explicit.

AI.5(c) The outcome shall be communicated to the relevant parties with available further review routes. A successful appeal shall not be conditioned on purchasing consultancy or additional membership. Costs for genuinely necessary new technical evaluation shall be transparent and not punitive.

Required evidence: Reasoned determination; documented extensions; timely progress; communicated status and review route.

AI.6 Status during appeal and corrective effects

SOURCE p. 127 | Normative when applicable

AI.6(a) Filing an appeal shall not automatically suspend a protective measure, reinstate a credential or extend validity. The independent authority may revise an interim measure only where actual evidence supports equivalent protection and the decision is lawful.

AI.6(b) A substantiated complaint shall trigger review of affected reports, attestations, applicants or earlier outputs, not only the individual case. Corrective actions shall address method, competence, impartiality or system deficiencies and their demonstrated effectiveness.

AI.6(c) Where public correction is necessary to prevent misleading use or harm, the operator shall issue a proportionate authorized notice. Confidentiality shall not be used as a blanket reason to leave a materially false public conformity claim uncorrected.

Required evidence: Interim status decisions; affected-population analysis; systemic corrective action; accurate public correction.

AI.7 Case records, oversight and completed example

SOURCE p. 127 | Normative when applicable

AI.7(a) The case record shall include identity, dates, issue, contested object and decision, submissions, evidence, conflicts, reviewers, technical analysis, interim measures, outcome, communication and corrective action. Records shall follow Annex AG retention and appropriate privacy controls. Trend review shall identify repeated bias, method failure or delayed handling.

AI.7(b) Illustrative case: an applicant appeals rejection of a dimensional result because the nominal value is within specification. The independent reviewer confirms that DR-A was agreed before testing and that the uncertainty interval overlapped the limit. The original indeterminate decision is upheld. The applicant may submit a validated improved measurement; such later evidence supports a new acceptance decision and does not make the original record incorrect.

Required evidence: Complete case dossier; trend and impartiality oversight; preserved original and revised decision history.

AJ.1 Form control and common data fields

SOURCE p. 128 | Normative when applicable

AJ.1(a) Each operational record shall have a unique ID, form type and revision, object or applicant identity, applicable scope and profile, creation and decision dates as relevant, authors, reviewers, approvers, status, evidence references, access class and retention basis. Corrections shall preserve the previous record and the reason for change.

AJ.1(b) An electronic signature shall identify the responsible individual and the approved action. Shared credentials shall not mask accountability. A form's completion status shall not itself establish technical conformity. Required relationships shall remain resolvable after document export or database migration.

Required evidence: Controlled form register; attributable approvals; version and status history; accessible evidence relationships.

AJ.2 Requirement and evidence-status dictionary

SOURCE p. 129 | Normative when applicable

AJ.2(a) Evidence status shall distinguish planned, collected, technically reviewed, accepted for the stated purpose, rejected, superseded and unavailable. "Accepted evidence" means adequate for the identified decision use, not unconditional truth or indefinite validity. A planned test shall not appear as completed evidence.

AJ.2(b) Requirement status shall distinguish conforming, nonconforming, not applicable with approved rationale and not yet demonstrated. An indeterminate measurement shall remain not demonstrated for acceptance until valid disposition; it shall not be silently converted into "not applicable". The status record shall identify the person and basis of change.

Required evidence: Controlled status dictionary; evidence-purpose linkage; approved applicability; attributable state changes.

AJ.3 Completed illustrative profile record

SOURCE p. 129 | Definition, explanation or informative example; no new universal limit

AJ.3(a) The example below concerns a fictional ground-support dimensional inspection service. Its numerical limits demonstrate record structure; they are not prescribed design criteria. The actual technical owner must establish the real application profile before use.

AJ.4 Completed illustrative assessment and decision record

SOURCE p. 129 | Definition, explanation or informative example; no new universal limit

AJ.4(a) This example combines F04-F08 fields to show a traceable decision. The object is an ongoing ORG scope; it is not the same conformity object as the SVC example above. Shared identifiers identify related business activity without merging conclusions.

AJ.5 Completed illustrative personnel and supplier records

SOURCE p. 130 | Definition, explanation or informative example; no new universal limit

AJ.5(a) The examples retain the distinction between demonstrated competence, employer task permission and supplier work approval. They deliberately contain no real personal data, signature or purported live certificate number.

AJ.6 Cross-clause consistency and interpretation controls

SOURCE p. 130 | Normative when applicable

AJ.6(a) The organization and scheme operator shall check that profiles, contracts, internal procedures, calculations, electronic states and public statements agree with the controlling clauses in Table AJ-6. A locally invented workflow shall not change a requirement simply because it is convenient to automate.

AJ.6(b) Detected contradictions shall be recorded with affected objects and versions, evaluated for technical and status impact, and corrected through authorized change. Where a safe resolution is not yet available, dependent acceptance or attestation shall be held. Historical records shall remain truthful.

Required evidence: Consistency review; identified conflicts; impact assessment; approved corrections; preserved historical decisions.

AJ.7 Digital implementation and record export

SOURCE p. 131 | Normative when applicable

AJ.7(a) A digital workflow shall implement required state transitions, approvals and access controls and shall be tested against permitted and prohibited cases. Tests shall include open critical findings, expired competence, unavailable evidence, mismatched configurations, suspended status and an attempted unauthorized approval.

AJ.7(b) An export shall preserve readable decisions, identities, configurations, requirements, actual results and relationships to supporting evidence. A summary PDF without the necessary source evidence shall not be described as a complete transferable dossier. Migration and restoration shall verify records and relationships, not merely file counts.

Required evidence: Workflow validation; prohibited-case tests; attributable approvals; complete exports; relationship and recovery verification.

Source tables — complete field and decision payloads

Table AA-1 — AF conformity objects and decision boundaries

Source p. 103 | Required structure when applicable

Route / object	Applicable evaluation basis	Permitted conclusion and boundary
ORG — Organization	Clauses 1-10 and 22; triggered 11-21 and 23-28; organizational implementation and outcomes.	Defined management and assurance system. Does not approve every product or certify every employee.
PRD — Product / system	Clause 23; product profile; relevant technical, qualification and acceptance requirements; controlled production where ongoing.	Identified product, configuration, family, lot or serial against stated criteria. No implied statutory approval.
SVC — Service	Clause 24; defined outcomes, delivery boundary, period, interfaces, competence and continuity.	Specified service or service event, not an unrestricted approval of the provider's other services.
PRC — Process	Clause 25; relevant Annex L; essential variables, qualification, scope, monitoring and output relationship.	Process capability within the qualified conditions. Not automatic acceptance of all output.
PER — Person	Clause 26 and Annex AE; approved job profile; Annex AB for assessment-role credentials.	Demonstrated competence for a defined role. Employer task authorization and required licenses remain separate.
SUB — External provider	Clause 27; Annexes J and AF; actual site, supplied work and sub-tier controls.	Qualification for a defined supply scope. Conditional development status is not a conformity certificate.
CAB — Assessment provider	Clause 28 and Annex AH; role-specific competence, methods, witnessing, impartiality and independent decisions.	Defined assessment capability under actual AF authorization. ORG certification is not accreditation.

Table AA-2 — Minimum profile fields

Source p. 103, 104 | Required structure when applicable

Field group	Required information
Identity and ownership	Profile ID, revision, route, owner, technical approver, issue date and affected claims.
Object and domain	Exact object/configuration, sites, relevant users, operating or task conditions and exclusions.
Obligations and criteria	Requirement IDs, quantitative limits or defined attributes, legal and customer constraints, essential controls.
Evaluation design	Methods, test conditions, samples, representativeness, uncertainty, validity checks, required independence.
Decision	Pre-agreed passing rules, critical failures, treatment of unavailable evidence and nonconformities, decision authority.

Field group	Required information
Continuing basis	Surveillance, expiry or instance boundary, change triggers, renewal and retained support obligations.
Records and claims	Required reports, retention, authorized public statement, privacy and mark restrictions.

Table AB-1 — Minimum entry evidence for assessment roles

Source p. 106 | Required structure when applicable

Role	AF entry and demonstration requirements	Authorization limitation
Internal auditor	Task-relevant experience; at least 16 hours of AF/process-audit learning; one complete witnessed internal audit; satisfactory evidence-based reporting.	May audit internally within demonstrated competence; shall not independently audit their own work.
Third-party auditor	At least three years of relevant professional experience, including two years in quality, assurance or the intended technical domain; at least 40 hours of AF audit training; knowledge and practical assessment under AB.2; four mentored complete audits totaling at least 20 auditor-days.	Independent assignments only after witnessed approval and defined route/sector authorization.
Lead auditor	Qualified third-party auditor; additionally three complete audits led under supervision totaling at least 10 auditor-days; demonstrated planning, team direction, conflict handling and integrated reporting.	May lead only within authorized scope; technical gaps require participating specialists.
Technical expert	At least three years of relevant technical practice, normally including two years within the preceding five; verified task demonstration and sufficient AF scheme orientation.	Provides technical conclusions; not automatically an auditor or independent decision maker.
Technical reviewer	Demonstrated AF interpretation and evidence-review competence; technical coverage for the assigned scope; five satisfactorily mentored complete file reviews.	Shall not independently review an evaluation they performed. May combine review and decision if separately authorized.
Decision maker	Verified knowledge of routes, scope, decision rules, impartiality, status and appeals; five satisfactorily mentored complete conformity decisions; access to required technical expertise.	Shall not have performed the evaluation being decided or supplied the relevant consultancy.
Application / appeal reviewer	Demonstrated competence for scope determination and resource review / fair case analysis, AF requirements and independence; observed satisfactory performance.	Appeal reviewer shall be independent of the original evaluation and decision.

Table AC-1 — Base initial organizational evaluation time

Source p. 109 | Required structure when applicable

Effective personnel N	Base B(N), auditor-days	Application
1-10	2.0	Readiness and implementation evaluation combined, before modifiers.
11-25	3.0	Same scope and time definition.

Effective personnel N	Base B(N), auditor-days	Application
26–75	4.0	Same scope and time definition.
76–150	5.0	Same scope and time definition.
151–300	7.0	Same scope and time definition.
301–600	9.0	Same scope and time definition.
Above 600	$9 + \text{ceil}((N - 600)/300)$	Add one base auditor-day for each additional block of up to 300 effective personnel.

Table AD-1 — Illustrative DR-A outcomes for the Annex H example

Source p. 113 | Illustrative or explanatory source table

Corrected result y, mm	Expanded uncertainty U, mm	Outcome under the stated example rule
50.0240	0.00444522	Conformity demonstrated: the full interval is inside [49.970, 50.030] mm.
50.0280	0.00444522	Indeterminate: nominal result is inside the specification, but the interval overlaps the upper limit. Hold acceptance.
50.0360	0.00444522	Nonconformity demonstrated under DR-A: the full interval is above the upper limit.
50.02555478	0.00444522	Upper interval endpoint equals 50.03000000 mm: inside the inclusive limit using these stated numbers. Actual decisions use unrounded inputs.

Table AD-2 — Finding categories and minimum consequences

Source p. 113, 114 | Required structure when applicable

Class	Decision definition	Required consequence
Critical	Evidence of an uncontrolled unacceptable safety/mission risk, deliberate material falsification, serious compromise of essential evidence, or another condition requiring immediate protection.	Stop or contain the affected activity immediately. Block grant/renewal. For an existing affected attestation, suspend or impose an effective evaluated restriction without delay; apply Annex AG notifications.
Major	Absence or breakdown of a required control, or a group of deficiencies, materially undermining the ability to fulfill requirements; not necessarily an immediate hazard.	Block initial grant/renewal/extension until verified closure. Assess existing scope promptly; suspend when continuing conformity cannot be demonstrated.

Class	Decision definition	Required consequence
Minor	Localized failure to fulfill a requirement where evidence does not show a material system breakdown or loss of essential control.	Correct and address cause. No open minor at initial grant, renewal or extension. Existing status may continue only under the bounded AD.8 decision.
Observation / improvement	No demonstrated failure of an applicable requirement; a documented possibility to improve effectiveness.	May support improvement. Shall not be used to conceal nonconformity or require uncontracted consultancy.

Table AE-1 — Illustrative profile blueprint — weights are not universal technical criteria

Source p. 115 | Illustrative or explanatory source table

Competence group	Illustrative knowledge weight	Practical evidence to define in the actual profile
AF scope and work controls	20%	Identify the applicable instruction, current revision, task boundary and authorization.
Role-specific technical competence	30%	Perform the actual task and interpret representative results within the role.
Safety and critical limits	20%	Recognize a critical condition, protect the work and escalate appropriately.
Evidence and configuration	15%	Preserve identity, record actual results and trace the configuration.
Ethics and impartial conduct	10%	Refuse falsification or an unsupported approval; disclose conflicts.
Learning and corrective response	5%	Analyze an error, apply correction and recognize the need for reassessment.

Table AF-1 — Contractual flow-down review — apply each relevant topic

Source p. 118 | Required structure when applicable

Topic	Required contractual or controlled work-package content
1. Identity and location	Legal and actual performer, approved site, contact, supplied product/service/process and permitted further subcontracting.
2. Technical baseline	Drawing/model/data identity, edition, configuration, quantities, units and effectivity.
3. Intended use and criticality	Relevant operational environment, critical characteristics and consequences that affect the supplied work.
4. Required management controls	Applicable organizational, configuration, evidence-integrity and corrective-action requirements.
5. Design responsibility	Design authority, inputs, derived requirements, review and approval boundaries.

Topic	Required contractual or controlled work-package content
6. Process qualification	Required process scope, essential variables, equipment, source, validation and requalification triggers.
7. People	Required competence, task authorization, supervision, continuity and reassessment.
8. Materials and components	Approved sources, material condition, lot/serial identity, authenticity and substitution restrictions.
9. Digital configuration	Software/build/model versions, dependencies, data provenance and secure update responsibilities.
10. Acceptance	Characteristics, methods, uncertainty and decision rules, sampling where permitted, hold points and actual-result records.
11. Source witnessing	Planned source inspection or witnessed testing, notification, safe access and protection of controlled information.
12. Delegated verification	Named roles, scope, methods, records, oversight and withdrawal of delegation.
13. Nonconformity	Containment, prompt reporting, population trace, disposition authority and prohibition of unauthorized repair or use-as-is.
14. Change	Prior notification and approval for relevant changes to design, material, process, software, site, source or critical sub-tier.
15. Traceability	Genealogy through splitting, merging, packaging, rework, installation and release.
16. Records	Required content, raw data where necessary, retention basis, integrity, retrieval and transfer after closure.
17. Information security	Access, confidentiality, personal or controlled data, authorized transfer and incident response.
18. Capacity and continuity	Verified capacity, critical dependencies, alternate sources, recovery and controlled restart.
19. Packaging and delivery	Preservation, environment, life status, markings, configuration and accompanying evidence.
20. Further tiers	Applicable requirements reaching the point of performance, critical-source visibility and acknowledgement.
21. Ethics	Truthful records, counterfeit prevention, conflict disclosure and good-faith reporting without retaliation.
22. Exit and responsibility	Tooling and data return, support continuity, remaining obligations and preservation of unresolved issues.

Table AG-1 — Controlling AF scheme intervals and deadlines

Source p. 120 | Required structure when applicable

Activity / status	Maximum interval or deadline	Decision condition
Ongoing ORG, PRD-family, SVC, PRC, SUB or CAB attestation	24 months from the conformity decision	Renewal decision completed before expiry; no automatic extension. Route-specific instance limits remain separate.
PER credential	24 months from the conformity decision	Continued competence and renewal under Annex AE.

Activity / status	Maximum interval or deadline	Decision condition
Employer task authorization review	12 months	Earlier reassessment after change, inactivity or adverse evidence; not a statutory license period.
C0/C1 ongoing surveillance	12 months between decision/last surveillance and next completed surveillance	First surveillance completed no later than 12 months after initial decision.
C2/C3 ongoing surveillance	6 months between decision/last surveillance and next completed surveillance	First surveillance completed no later than six months after initial decision; relevant critical-control sites included.
Corrective-action plan for a nonconformity	30 days after finding notification	Immediate protection is separate; initial grant and renewal still require actual closure.
Major nonconformity verified closure	60 days after finding notification	No presumption of continued status during correction; AD.8 controls suspension or evaluated restriction.
Minor nonconformity verified closure	90 days after finding notification	Bounded continuation only for an existing attestation under AD.8.
Critical concern: protective action	Immediately upon recognition	Stop/contain the affected work; do not wait for an administrative deadline.
Holder notification to its scheme operator of a critical attestation-related concern	Within 24 hours after awareness	Earlier legal/customer notification duties still apply; continue updates as scope becomes known.
Operator action on a substantiated critical concern	Suspend or impose an effective evaluated restriction within 24 hours	The decision cannot wait for root-cause completion. Notify AF where AF authorization is involved.
Registry update after a status decision	Within two days	Holder informed immediately; public record accurately identifies affected scope.
Suspension duration	90 days from suspension decision	Restore on verified evidence, formally restrict to a demonstrably unaffected scope, or withdraw; no rolling reset.
Final evaluation report	14 days after evaluation close	Exceptional delay communicated under AC.7; protection and finding clocks unaffected.
Complaint/appeal acknowledgement	Five days after receipt	Assign case and provide process information.
Appeal submission	30 days after notification of the contested decision	A justified exceptional late submission may be admitted under AI.3.

Activity / status	Maximum interval or deadline	Decision condition
Ordinary complaint/appeal determination	60 days after receipt	Necessary exceptional extensions require reasons and progress communication at least every 30 days.

Table AH-1 — Minimum CAB witnessing coverage

Source p. 124 | Required structure when applicable

Provider activity	Witnessed evidence	Competence conclusion shall identify
Testing / calibration	Actual representative method, sample preparation, equipment, data, uncertainty where relevant and authorized report.	Methods, quantities or properties, ranges/conditions, sites and demonstrated limitations.
Inspection	Actual inspection or a controlled representative task with the relevant configuration, access and acceptance criteria.	Inspection object, method, required independence and detection/access limitations.
ORG certification	Complete representative audit trail, team competence, scope, time, findings, review and decision.	Authorized organizational scopes, technical sectors and criticality coverage.
PRD / SVC / PRC certification	Actual profile review, technical evaluation, representative witnessing, independent decision and continuing controls.	Object families, profiles, technical evaluation methods and restrictions.
PER certification	Eligibility, examination security, practical evaluation, scoring, independent decision and credential control.	Role profiles, technical scope, examination methods and continued competence controls.

Table AJ-1 — Operational form set and mandatory payload

Source p. 128 | Required structure when applicable

Form ID / purpose	Required form-specific fields beyond AJ.1	Approval and control
F01 — Application and scope	Route; legal/holder identity; sites and remote functions; product/service/process/role identity; lifecycle responsibility; criticality; exclusions; actual operator authorization; evaluation access.	Applicant acknowledgement and independent application review before evaluation.
F02 — Application profile	Intended use/domain; requirements and limits; essential controls; methods; conditions; samples; uncertainty/scoring; acceptance rule; failure criteria; surveillance; changes; technical owners.	Competent technical approval before evaluating results.
F03 — Competence and assignment	Role; verified prerequisites; experience; training; examination/practical results; essential steps; witnessed work; authorized scope; conflicts; development; expiry and restrictions.	Competence approval separate from mere training delivery; assignment check before each job.
F04 — Audit or evaluation plan	Objectives; route; scope; criteria; sites/shifts; methods; team coverage; time calculation; sample design; access/security; meetings; reporting; technical witnessing.	Authorized plan review; actual departures and resulting coverage recorded.
F05 — Technical result and decision rule	Object/configuration; characteristic; specification; method; equipment; corrections; raw result; uncertainty/coverage; selected rule; result; limitations; technical disposition.	Competent technical sign-off; independent review for triggered criticality.

Form ID / purpose	Required form-specific fields beyond AJ.1	Approval and control
F06 — Nonconformity and corrective action	Exact requirement; evidence and gap; grade; affected population; protection; notification; occurrence/escape causes; actions; owners; original due dates; effectiveness; verified closure.	Finding classification, technical disposition and final closure separately attributable.
F07 — Review and attestation decision	Complete scope/profile; evaluation package; competence and independence; findings/closure; evidence limitations; decision and rationale; dates; issuer; required scope restrictions.	Independent reviewer/decision maker; no evaluator deciding own third-party evaluation.
F08 — Surveillance and status	Attestation ID; current scope; criticality; due dates; completed activities; findings; change triggers; status; restrictions; restoration/withdrawal; registry update.	Actual decision dates; no hidden gaps or deadline resets.
F09 — Supplier flow-down and transfer	Actual performer and sub-tiers; work package; essential instructions; acknowledgements; source approval; change notice; verification; custody; escape response; records and exit.	Commissioning organization retains acceptance and oversight accountability.
F10 — Personnel credential and task authority	Person; profile; knowledge/practical/essential results; independent decision; credential limits; employer task; site/equipment; supervision; practice; reassessment; expiry.	Separate credential and employer authorization decisions and status.
F11 — Complaint or appeal	Reporter/party; object; issue/grounds; dates; admissibility; conflicts; independent reviewer; submissions; evidence; interim measures; outcome; communication; corrective effects.	Independent outcome; protective action remains effective during review.
F12 — CAB competence scope	Legal provider; activity; method families; ranges/conditions; uncertainty capability where relevant; sites; competence; witnessing; findings; independent authority; exact authorized claim.	Actual competence decision; no self- accreditation or automatic equivalence.

Table AJ-2 — Cross-object record relationships

Source p. 129 | Required structure when applicable

Relationship	Required consistency check
F01 scope → F02 profile	Every claimed object and site is covered by a valid profile and applicable requirements; excluded responsibility is justified.
F03 competence → F04 plan	Assigned evaluators cover routes, sector, criticality, methods and language; conflicts are cleared.
F04 plan → F05 results	Actual objects, sites, methods, samples and configurations match the plan or an approved recorded deviation.
F05 result → F06 finding	Failed or indeterminate criteria are correctly reflected; no favorable score suppresses a critical gap.
F06 closure → F07 decision	Initial/renewal/extension decisions contain no open nonconformity in their scope; effectiveness is verified.
F07 decision → F08 status	The exact scope, dates, restrictions and ongoing/instance basis agree; no claim is broader than its decision.
F09 outsourced work → product/service dossier	Actual performer, source changes, lot identity and evidence reach the final delivered object.
F10 credential → employer task	Credential competence supports, but does not replace, the specific employer authorization.

Relationship	Required consistency check
F11 case → F07/F08 revisions	Appeal or complaint effects change only supported decisions/status and preserve their original history.
F12 body scope → issued reports	Each claimed accredited/authorized activity remains within the actual assessed technical scope.

Table AJ-3 — F02 profile example — AP-GSI-01, revision 1

Source p. 129 | Illustrative or explanatory source table

Field	Filled illustrative record
Route and object	SVC; dimensional inspection service for identified support-equipment parts; one evaluated site and controlled measuring station.
Domain and responsibility	Room-temperature dimensional inspection; no claim for destructive tests, complete vehicle safety or statutory approval.
Criterion	Characteristic EX-D01: 50.000 ± 0.030 mm for the fictional demonstration part; traceable actual-result report required.
Method and evidence	Approved procedure MP-01; corrected result; instrument identity; valid calibration; environmental record; uncertainty budget; actual raw observations.
Criticality and rule	C2 for this demonstration use; DR-A full-interval rule; uncertainty factor and basis recorded.
Release and failure	A competent authorized person signs the result. Missing configuration or an indeterminate critical result holds acceptance.
Continuing controls	C2 ongoing service surveillance no later than six months; method/site/critical equipment changes trigger review.
Claim limit	Only the described inspection service and method; no automatic product approval or laboratory accreditation.

Table AJ-4 — F04-F08 combined example — EVAL-EX-026

Source p. 130 | Illustrative or explanatory source table

Record stage	Filled illustrative record
Application	ORG; fictional support-equipment manufacturer; 80 effective personnel; one site; C2; special processes and assured digital acceptance.
Plan	B = 5; K = 1.35; f = 0.30; T = 9.0 auditor-days; readiness 2.5 and implementation 6.5; qualified specialists assigned; independent review separate.
Observed finding	NCR-EX-11: post-maintenance reference verification not enforced. Requirement 7.6/7.7; actual affected work and evidence recorded. Major classification based on control breakdown.
Protection	Affected measurements held; relevant earlier output traced; safe disposition and required notifications completed.
Correction and cause	Reference verified; occurrence and escape causes demonstrated; workflow amended and challenged under representative conditions.
Closure	Competent reviewer verifies implementation and effectiveness. No open nonconformity remains in the proposed ORG scope.
Decision	Independent decision maker grants only the evaluated ORG scope on the actual recorded decision date. Product and personnel routes not included.

Record stage	Filled illustrative record
Continuing status	Maximum ongoing validity 24 months; first C2 surveillance no later than six months; exact dates calculated from actual decision and recorded.

Table AJ-5 — F09-F10 bounded records

Source p. 130 | Illustrative or explanatory source table

Record	Filled illustrative content and decision
PER-EX-017 competence	Knowledge 86%; practical 92%; failed essential hold step. Initial decision refused. After successful documented remediation and equivalent practical reassessment, independent decision limited to the assessed dimensional-inspection role.
Employer task authorization TA-EX-17	Applies only after competence is demonstrated; approved measuring station and stated part family; current method and supervision limits; review no later than 12 months; C2 inactivity over six months requires observed demonstration.
Supplier approval SUP-EX-042	New bonded-assembly site proposed; existing corporate documentation does not prove site capability. Conditional development status permits controlled qualification trials only; production release held.
Source closure	Site-specific process qualification, operator authorization, environmental controls and representative first article verified. Approval record updated only for the demonstrated site and process window.
Sub-tier trace	Surface source S-10A and test laboratory L-07 approved for actual work; their evidence connects material M-31 and run BR-116 to the delivered bracket serial population.

Table AJ-6 — Controlling rules and common misinterpretations

Source p. 130, 131 | Required structure when applicable

Subject	Controlling provisions	Required interpretation
Scope and object	1.3; 2.2; Annexes A and AA	Activity triggers and retained responsibility determine requirements. PER applicants do not inherit corporate QMS obligations.
Criticality and independence	Annex B; 5.3; 9.6; Annex AB	Criticality drives technical assurance. Third-party decision independence is additional, not replaced by low criticality.
Measurement decisions	7.7; Annex AD; informative Annex H	The pre-agreed normative decision rule controls; example numbers are not universal limits.
Product / service / process release	8.6; 23–25; Annexes C, K– M and AD	Qualification, routine release and independent certification are separate. Conditional progression is not conditional certification.
Auditor and personnel competence	7.2; 26; Annexes AB and AE	Knowledge scores, practical scores and all essential steps are separate pass conditions. Employer authorization remains distinct.

Subject	Controlling provisions	Required interpretation
Subcontracted work	8.4; 27; Annexes J and AF	Requirements reach the actual performer; outsourcing does not remove retained accountability.
Audit time and frequency	Annexes AC and AG	AC controls resource floors and coverage; AG controls intervals. A smaller fee does not justify less evidence.
Findings and status	22; Annexes AD and AG	No open nonconformity at initial grant/renewal/extension. Existing minor continuation is bounded and documented.
Provider competence / accreditation	28; Annex AH	Organizational conformity is not accreditation; actual independent technical competence and authorization are required.
Appeals and protection	22.7; Annex AI	Fair independent review does not automatically suspend protective action or extend validity.
Edition and amendment	2.5; Annex Y	First Edition identifies the document. Amendments and recognition arrangements require their own actual controlled decisions.
Examples and calculations	0.5; Annexes E-I, U and Z	Synthetic values support methods; they do not establish the performance of an actual product or operation.

Appendix B — Local implementation and release

Readiness condition	Evidence before consequential use
Authority and responsibility	Actual legal operator, owner, competent technical authority, independent reviewer and permitted result class are recorded.
Scope and criteria	Object, configuration, site, period, trigger, every technical value or observable attribute, units and prospective approval are complete.
Evidence and methods	Original accessible evidence, representative observations, valid methods, uncertainty, adverse cases and limitations support the intended conclusion.
People and independence	Competence is current for each task; genuine conflicts, relevant prior work and needed separation have been checked.
Records and tools	Field meanings, unique IDs, original history, access, retention, recovery and actual deployed workflows have passed local validation.
Decision and public use	All relevant blockers are resolved; required independent decision and written permissions precede the exact public claim.
Continuity and handover	Receiving custody, unresolved duties, corrections and historical decisions survive transfer, retirement or provider closure.

Record the completed local readiness and actual authorization in AF-FR-9100-032 or an equivalent controlled record. Preserve the unchanged source standard and each earlier decision basis. A blocked activity may continue only within a genuinely permitted development boundary, not as a provisional conformity certificate.