



AF 9100:2026

Aerospace Quality Management System

TECHNICAL PROFILE BOOK

Personnel Competence and Task Boundaries — PER Profile Book

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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

Competence for a defined job profile and period; employer task authorization and required professional permissions remain separately granted.

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 Technical profile and prospective parameter completion

Exact object and responsibility; intended use and operating domain; applicable activity modules; configuration and sites; criteria and methods; uncertainty or rubric; sampling and witnessed coverage; role independence; duration/instance; changes and claims

Parameter record	Content required before evaluating results
Identity and trigger	Stable criterion ID, source anchor, owner, actual object, phase, mode and reason it applies.
Limit or attribute	Value/range with compatible units and boundary convention, or an observable state with every essential step.
Technical basis	Actual environment, duty, consequence, derivation, qualified evidence and relevant approval.
Method and representation	Inspection, analysis, demonstration or test; method version, article/population, configuration and validity limits.
Uncertainty and decision	Corrections, model, covariance, coverage, pre-agreed rule, sample/scoring logic and hold conditions.
Authority and change	Technical and independent approvals, actual effectivity, preserved earlier basis and reopening triggers.

The fields above are completed for the actual application. A blank limit, undefined domain or unvalidated method prevents the dependent claim; the book deliberately does not invent one severity, tolerance or task threshold for unrelated applications.

3 Subject-by-subject implementation

26.1 — Role analysis and competence criteria

Source p. 46; complete conditions reproduced in Appendix A.

Implementation record: Job/task analysis; role profile; required competences; relevant prerequisites and assessment methods.

Application check: Plan instruction and supervised work. Record the work actually performed and assistance received. Attendance and years of service are inputs, not automatic proof of current performance.

Review boundary: Unverified competence, a failed essential step or lack of actual task authority prevents independent task performance. Record each source condition separately in the linked checklist and preserve approved exclusions.

26.2 — Development and verified competence

Source p. 46; complete conditions reproduced in Appendix A.

Implementation record: Gap assessment; development activities; observed demonstration; competent assessor conclusion.

Application check: Plan instruction and supervised work. Record the work actually performed and assistance received. Attendance and years of service are inputs, not automatic proof of current performance.

Review boundary: Unverified competence, a failed essential step or lack of actual task authority prevents independent task performance. Record each source condition separately in the linked checklist and preserve approved exclusions.

26.3 — Personnel certification and fair assessment

Source p. 46; complete conditions reproduced in Appendix A.

Implementation record: Published role profile; candidate information; validated assessment; fair-access arrangements; decision rationale.

Application check: Plan instruction and supervised work. Record the work actually performed and assistance received. Attendance and years of service are inputs, not automatic proof of current performance.

Review boundary: Unverified competence, a failed essential step or lack of actual task authority prevents independent task performance. Record each source condition separately in the linked checklist and preserve approved exclusions.

26.4 — Employer task authorization and supervision

Source p. 46; complete conditions reproduced in Appendix A.

Implementation record: Task-authorization register; scope and limitations; competence and license checks; supervision arrangements.

Application check: Plan instruction and supervised work. Record the work actually performed and assistance received. Attendance and years of service are inputs, not automatic proof of current performance.

Review boundary: Unverified competence, a failed essential step or lack of actual task authority prevents independent task performance. Record each source condition separately in the linked checklist and preserve approved exclusions.

26.5 — Continued competence and reassessment

Source p. 46; complete conditions reproduced in Appendix A.

Implementation record: Practice and development record; performance review; reassessment; renewal and inactivity decisions.

Application check: Plan instruction and supervised work. Record the work actually performed and assistance received. Attendance and years of service are inputs, not automatic proof of current performance.

Review boundary: Unverified competence, a failed essential step or lack of actual task authority prevents independent task performance. Record each source condition separately in the linked checklist and preserve approved exclusions.

26.6 — Restriction, suspension and restoration

Source p. 46; complete conditions reproduced in Appendix A.

Implementation record: Protective action; affected-work review; reassessment; reasoned restoration or withdrawal; status updates.

Application check: Plan instruction and supervised work. Record the work actually performed and assistance received. Attendance and years of service are inputs, not automatic proof of current performance.

Review boundary: Unverified competence, a failed essential step or lack of actual task authority prevents independent task performance. Record each source condition separately in the linked checklist and preserve approved exclusions.

26.7 — Personnel records and responsible use of credentials

Source p. 47; complete conditions reproduced in Appendix A.

Implementation record: Protected competence dossier; current credential status; accurate claims; controlled access and retention.

Application check: Plan instruction and supervised work. Record the work actually performed and assistance received. Attendance and years of service are inputs, not automatic proof of current performance.

Review boundary: Unverified competence, a failed essential step or lack of actual task authority prevents independent task performance. Record each source condition separately in the linked checklist and preserve approved exclusions.

4 Representative evaluation and adverse evidence

Workforce Competence, Awareness and Task Authorization

Witness or trace: Use preset criteria, representative tasks and anomalies. Retain independent results for mandatory components and every essential practical step; add AB/AE controls when those routes apply.

Synthetic challenge: A candidate scores 86% knowledge and 92% practical but releases an indeterminate C2 result. The essential hold step fails. Preserve the refusal and obtain remediation plus equivalent direct demonstration; do not average the two scores into authorization.

Assessor Qualification, Impartiality and Continuing Authorization

Witness or trace: 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.

Synthetic challenge: A technical specialist is asked to make the final decision on an evaluation they performed. Use their technical output as evaluation evidence and appoint a separate competent authorized independent decision function. A specialist title does not create case independence.

Personnel Examination, Remediation and Credential Control

Witness or trace: 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.

Synthetic challenge: A candidate changes employer while a credential remains within its period. The credential may still be relevant, but the new employer must verify local task suitability and issue its own authorization before independent work.

Independent Decisions, Attestations, Claims and Registry

Witness or trace: 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.

Synthetic challenge: All checks pass except one minor finding that has a promised future correction. Hold initial, renewed or extended attestation until verified closure. The bounded rule for an already existing minor does not permit a new certificate with open findings.

Surveillance, Renewal, Status, Transfer and Closure

Witness or trace: 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.

Synthetic challenge: A suspended holder requests a new certificate number to restart the clock. Retain the original suspension and expiry history. A new number is not evidence of correction, renewal or restoration.

Complaints, Appeals and Protected Concern Handling

Witness or trace: 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.

Synthetic challenge: An applicant appeals an indeterminate measurement because the nominal value is within tolerance. Review the actual prospective DR-A rule and interval. Uphold a correct original hold; later improved evidence supports a new decision rather than making the original record false.

5 Interface records, decisions and continuing use

Record	Required implementation purpose
AF-FR-9100-001	Application and Scope
AF-FR-9100-002	Application Profile and Acceptance Schedule
AF-FR-9100-003	Competence, Independence and Assignment
AF-FR-9100-010	Personnel Credential and Employer Task Authority
AF-FR-9100-011	Complaint, Appeal and Protected Concern
AF-FR-9100-031	Knowledge, Development and Observed Practice

Qualification, instance acceptance, current operating capability and independent attestation retain separate evidence and decisions. A new site, material, supplier, digital load, use environment or duty requires a relevant difference and requalification review. No previous result transfers automatically because the name is unchanged.

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.

26.1 Role analysis and competence criteria

SOURCE p. 46 | Normative when applicable

26.1(a) The responsible organization shall analyze the tasks, decisions, hazards, tools, interfaces and consequences associated with each role. Criteria shall identify required knowledge, practical skill, experience, communication and ethical behavior. Prerequisites shall be relevant to the actual tasks rather than selected solely by title or seniority.

26.1(b) Roles involving technical review, inspection, testing, special processing, maintenance, software release, safety, cybersecurity or conformity decisions shall include the ability to recognize limitations and escalate work beyond personal competence. Auditors and decision makers shall additionally meet Annex AB.

Required evidence: Job/task analysis; role profile; required competences; relevant prerequisites and assessment methods.

26.2 Development and verified competence

SOURCE p. 46 | Normative when applicable

26.2(a) The organization shall address competence gaps through suitable education, training, supervised practice or experience and verify the result. Training attendance, a degree or length of service alone shall not establish current task competence.

26.2(b) Assessment shall use evidence representative of the work, including practical demonstration where performance can affect an assured outcome. A competence assessor shall be qualified for the task and sufficiently independent to avoid approving inadequate performance under delivery pressure.

Required evidence: Gap assessment; development activities; observed demonstration; competent assessor conclusion.

26.3 Personnel certification and fair assessment

SOURCE p. 46 | Normative when applicable

26.3(a) A personnel-certification scheme shall use the role profile, examination and practical-assessment controls in Annex AE. The candidate shall be informed of scope, prerequisites, methods, passing rules, restrictions, conduct expectations and appeal rights before assessment.

26.3(b) Methods shall be fair and accessible without weakening essential competence. Language and accommodations shall be suitable for the work. Unsupported assumptions about personal attributes shall not replace task-relevant evidence. A candidate who fails an essential practical control shall not pass through a high aggregate score.

Required evidence: Published role profile; candidate information; validated assessment; fair-access arrangements; decision rationale.

26.4 Employer task authorization and supervision

SOURCE p. 46 | Normative when applicable

26.4(a) Before independent work, the employer or responsible technical authority shall issue task authorization specifying the person, task, product or process family, location or equipment limits, required supervision and expiry. The authority shall verify competence and any mandatory license for that exact task.

26.4(b) A personnel certificate may support this decision but shall not itself authorize work on every configuration or in every jurisdiction. Work outside the authorized scope shall require supervision by an appropriately authorized person or a new competence and authorization decision.

Required evidence: Task-authorization register; scope and limitations; competence and license checks; supervision arrangements.

26.5 Continued competence and reassessment

SOURCE p. 46 | Normative when applicable

26.5(a) Continued competence shall be reviewed using relevant practice, professional development, changes in technology, observed performance, errors and complaints. Renewal shall require evidence of current ability, not simply a fee or confirmation of employment.

26.5(b) The time limits and inactivity triggers in Annex AE shall apply to the relevant personnel scope. A significant technology change or evidence of unsafe or unreliable performance shall trigger reassessment immediately, even when a certificate or task authorization has not expired.

Required evidence: Practice and development record; performance review; reassessment; renewal and inactivity decisions.

26.6 Restriction, suspension and restoration

SOURCE p. 46 | Normative when applicable

26.6(a) Where confidence in competence or ethical conduct is lost, the organization shall protect affected work, restrict or suspend the relevant authorization and assess prior outputs. Restrictions shall be proportionate to the affected task but shall not conceal a systemic competence deficiency.

26.6(b) Restoration shall require verified corrective development, necessary reassessment and an authorized decision. Appeals shall be available, but a pending appeal shall not automatically remove a protective restriction. Credential status and employer task authorization shall be updated consistently.

Required evidence: Protective action; affected-work review; reassessment; reasoned restoration or withdrawal; status updates.

26.7 Personnel records and responsible use of credentials

SOURCE p. 47 | Normative when applicable

26.7(a) Records shall preserve identity, assessed scope, criteria, methods, results, assessor and decision identities, restrictions, development and status history. Access and retention shall respect legitimate confidentiality and applicable data obligations.

26.7(b) Public verification shall expose only information necessary to confirm the credential and scope. Competence records shall not be altered to imply that a person passed unperformed tests. The holder shall use the credential accurately and report relevant changes under the scheme conditions.

Required evidence: Protected competence dossier; current credential status; accurate claims; controlled access and retention.

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.

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.

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.

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 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.

Competence group	Illustrative knowledge weight	Practical evidence to define in the actual profile
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 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.
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.

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

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.