	ROYALCERT		
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## 1. OBJECT

The object of this manual is to explain; how the certification applications of organizations will be approached, assessed and concluded, by ROYALCERT. It is prepared in accordance with the national and international Accreditation body requirements, to be implemented in all ROYALCERT operations.

## 2. SCOPE

This manual is inclusive of; application requirements, pre-audit (if requested), certification audits, assessment of the system and certification principles, certificate use and obligations about financial issues, audits that will be carried out after the certification, rules for surveillance and certification renewal processes and the processes of suspension and decertify for the certification of the management systems.

## 3. DEFINITIONS

**System Certificate:** It is the certificate that indicates the organization's management system, has been audited and its conformity to the relevant management system standard has been approved; and has a validity period for three years.

**Accreditation:** Signifies that a certification body is in accordance with the requirements, and acknowledged by the third party that it is adequate to actualize the related conformity assessment activity.

**Certification Decision:** Decisions taken by ROYALCERT Certification Committee such as: Certification, Maintaining Certification, Suspension, Withdraw, Cancellation or Change of Scope.

**Audit:** It is a systematic, independent and documented process which determines objectively the quantity of actualization of specified requirements information gaining from the records, declarations and other relatives.

**Surveillance:** Overall activities covering the follow up for certified organizations accomplishments of certification requirements.

**Nonconformity:** The absence of, or the failure to implement and maintain one or more quality Management system requirements or a situation which would, on the basis of available objective Evidence, raise significant doubt as to the quality of what the organization is supplying.

**Major Nonconformity (NC1):** Nonconformity that affects the capability of the management system to achieve the intended results.

Note 1 to entry: Nonconformities could be classified as major in the following circumstances: — if there is a significant doubt that effective process control is in place, or that products or services will meet

specified requirements; — a number of minor nonconformities associated with the same requirement or issue could demonstrate a systemic failure and thus constitute a major nonconformity

Solution: Corrective actions must be submitted within 30 days and follow-up audits may be required according to decision of RoyalCert to verify corrective actions on site

**Minor Nonconformity (NC2):** A single observed lapse in a requirement, any unsystematic failure.

(e.g., two/three calipers not calibrated, supplier evaluation not updated acc. to procedures, etc.)

Solution: root cause analysis and definition of corrective actions within 90 days and verification of documents (off-site)

**Tolerable Nonconformity/ Observation (NC3):** Any nc2 that the auditor wants to verify in the next audit and does not require immediate action (one work instruction not updated, qualification matrix incomplete, etc.)

Solution: Auditor has to get the acceptance signature from the customer and verify in the next audit

**Correction Activity:** Activity taken to remove the cause of a detected nonconformity or other unwanted situations.

**Correction:** Activity taken to remove nonconformity.

**Complaint:** Verbal or written negative expressions, different than the Appeal, by an individual or company about ROYALCERT's performance of certification activity, procedures, policy, permanent or temporary personal, the activities of a certificated organization within the scope of certification, or any other relevant subject about ROYALCERT.

**Appeal:** The request by private or juristic persons for reconsidering the decisions taken by ROYALCERT

## 4. ORGANIZATION

RoyalCert Organization Chart may be shared by related part according to their requests.

The personnel working in the organization were provided to work impartially. ROYALCERT personal works impartial.

## 5. PRACTICE

### 5.1 APPLICATION

For applications to be taken, **Organization Information Form** must be filled out correctly and completely and all the documents required for management systems application (Organization Information Form, Commercial Registry Gazette, tax board, signatory circular, Chamber record certificate, other documents requested related to application and other documents requested for transfer) must be submitted. The organizations want to make an application can provide required information from ROYALCERT web site or by e-mail.

Organization Information Forms are approved after reviewing the adequacy of the applicant organization through criteria such as: scope, EA code, ISMS code accreditation, management system, man/day unit, audit team and competence for certification decision, locations, language, security conditions, threats against impartiality. In transfer request, also the previous certificate and reports are checked for acceptability, and it is decided whether the transfer is acceptable or not.

Proposal and contract shall be prepared in directions of **Pricing Instruction** and will be sent to applicant organization

The signing of Certification Practices Manual and the contract indicates all conditions are accepted by the organization. The documents of organization (Quality Manual, Procedures, documents representing achievement in meeting legal conditions, other documents of management system), brochures, if any, shall be requested with the contract.

The documents of the organization will be examined for acceptability, before the planning.

Result of the examining, if the documents are found adequate and the organization's application documents demonstrate that the system has been implemented at least for 2 months, the certification application will be taken into planning. For being able to carry out on-site audit; the applicant organization's management system should have been executed for minimum two months, internal audit and management review should have been actualized.

Organization shall fill separate forms and pay the same application fee for its facilities that have a different business entity concept.

The application shall be canceled if the organization does not accept the certification audit in six months from the application date and postpones. But in case of absolute necessity, these time limits are not applied. The cancellation of the application could also be done by the organization request.

### 5.2 AUDIT PLANNING

Certification Audit and other all audits are planned by the Planning Department according to T.01 Determination of Audit Durations Instruction.

Audit team is established considering the standard(s) subject to application, activity field of the organization, number of employees, the status of the processes. In the audit team; always a lead auditor and one or more auditor suitable to the scope to be certificated, and technical experts, if required, takes place.

In case the audit team and draft program are accepted by the organization, the audit shall be conducted.

In case the audit team and draft program are not accepted by the organization, the organization explains the causes in written. If the justifications of the organization will be acceptable, there will be amendment in the audit team. If necessary, the agreed audit dates will be changed by the request of both sides.

The request of the organization for change in the audit plan is evaluated by the lead auditor.

### 5.3 CERTIFICATION AUDIT


The first certification audit of a management system is carried out in two stages.

#### 5.3.1 STAGE 1 AUDIT

The stage 1 audit can be conducted earliest in two months implementation of the organization management system.

Stage 1 Audit, could be performed in the client field or as desk check up to the risk factor chart determined according to the Nace codes in related guides. The ISO 27001, ISO 22000, ISO 45001 Stage-1 audit must be performed on client's field.

If the audit shall be performed as desk check, extra information shall be asked for from the organization. In case of detecting a nonconformity, Stage 1 audit could

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be performed in the field of the decision of the lead auditor. The client will be informed about the result of audit. The company is obligated to inform the correction activities that will be taken against the detected nonconformities, in 15 days. CA closing time in ISMS audits depending on the severity of the ISMS risk, the duration foreseen by the Lead Auditor is maximum 1 month. **Minor Nonconformities should be closed in max. 90 days and major nonconformities in 30 days**

Stage 1 audit is carried out according to the Audit Plan. Audit is constituted of; opening meeting, conducting the audit, audit team evaluation meeting and closing meeting stages.

In the opening meeting the object and the scope of the audit, the methods to be used and procedures, audit draft plan will be discussed.

Conducting the audit; is performed to confirm that organization management system is acceptable according to the applied standard, scope, the documents formed, by means of interviews, inspecting the documents and records by sampling, observing the work and conditions in the related arenas.

Audit team, reviews the findings obtained from the audit. In case nonconformities are detected from standard requirements and organization documentation, nonconformity report, defining nonconformities, shall be prepared for each nonconformity separately. The type of the detected nonconformity shall be denoted in the nonconformity report. Audit team, evaluate the nonconformities in two classes as Major and Minor. Stage 2 audit can not be implemented unless the correction activities of nonconformities are accomplished.

In nonconformity reports, the scope and completion date of the correction activities are determined by the organization Responsible. The organization is obligated to inform the correction activities those will be taken against the nonconformities detected in the audit, in 15 days with the nonconformity report.

Audit report and its additions shall be signed mutually by the audit team and responsible of the organization in order to demonstrate that the nonconformities are accepted. In case the organization refuse to sign, the lead auditor prepares a report including his/her prospect about the audit conclusion with his/her own signature, submits to the Certification Committee. The organization will be informed about the Certification Committee decision. If the organization makes an appeal to the decision in 15 days, the Appeal shall be presented to the related Appeal Committee to be evaluated.

Closing meeting will be held at the end of the audit with audit team and organization's senior management, Organization Responsible and related department responsible. In the meeting, lead auditor presents clearly, positive and negative results of the audit, the nonconformities, if any, recorded to the nonconformity report. The report delivered by the audit team does not represent a final conclusion; it is rather regarded as a recommendation submitted to the certification committee.

In case of a difficulty in carrying out the audit, lead auditor informs the causes to the organization responsible and stops the audit and prepares a report.

The time given for to accomplish the correction activities, taken against nonconformities from the audit report, cannot be longer than 3 months. In case the organization can not remove the nonconformities at the given time, the application of the organization will be invalid and a related letter will be delivered to the organization.

Report including the Stage 1 audit conclusion will be notified to the organization.

The duration between Stage 1 and Stage 2 audits, is determined according to the Stage 1 audit conclusions. The duration can not be more than 6 months. For the durations more than 6 months Stage 1 audit shall be repeated.

The stage 1 audit shall be performed

- To audit the client's management system documentation.
- To evaluate the client's location and site-specific conditions and to undertake discussions with the client's Personal to determine the preparedness for the stage 2 audit.
- To review the client's status and understanding regarding requirements of the standard, in particular with respect to the identification of key performance or significant aspects, processes objectives and operation of the management system.
- To collect necessary information regarding the scope of the management system, processes and location(s) of the client, and related statutory and regulatory aspects and compliance (e.g. quality, environmental, ISMS, legal aspects of the client's operation, associated risks, etc.)
- to review the allocation of resources for stage 2 audit and agree with the client on the details of the stage 2 audit.

f) To provide a focus for planning the stage 2 audit by gaining a sufficient understanding of the client's management system and site operations in the context of possible significant aspects.

g) To evaluate if the internal audits and management review are being planned and performed, and that the level of implementation of the management system substantiates that the client is ready for stage 2 audit.

h) In the ISMS audits;

Reviewing the documentation of the ISMS design, including the customer's requirement for ISO / IEC 27001 clause 4.3.1

Understanding the ISMS in the context of the ISMS policies and objectives, and in particular the readiness of the client organization

Stage- 1 audit report is passed through and selection of the appropriate audit team for phase 2 audit is provided and decision to pass / fail stage- 2 is given.

### 5.3.2 STAGE 2 AUDIT

After the approving the audit team and plan, at the determined date stage 2 audit shall be performed in the company.

Stage 2 audit is carried out according to the Audit Plan. Audit is constituted of; opening meeting, conducting the audit, audit team evaluation meeting and closing meeting stages.

In the opening meeting the object and the scope of the audit, the methods to be used and procedures, audit draft plan will be discussed.

Conducting the audit; is performed to confirm that organization management system is acceptable according to the applied standard, scope, the documents formed, by means of interviews, inspecting the documents and records by sampling, observing the work and conditions in the related arenas.

Audit team, reviews the findings obtained from the audit. In case nonconformities are detected from standard requirements and organization documentation, nonconformity report, defining nonconformities, shall be prepared for each nonconformity separately. The type of the detected nonconformity shall be denoted in the nonconformity report. Audit team, evaluate the nonconformities in two classes as Major and Minor. The decision of certification can not be taken unless the correction activities of nonconformities are accomplished and been confirmed by follow up audit. If the audit team has not suggested a follow up audit is required for minor nonconformities, it can be controlled also by inspecting the documents and records whether the nonconformities are closed. The decision of certification can not be taken unless the correction activities of nonconformities are accomplished. Audit team reports also their observations. The detections, that can not be associated directly to the standard or the client's documentation but may turn to minor in case of not taking precaution against, are defined as observation and will be denoted in the audit report. Observations are not against to take certification recommendation.

In nonconformity reports, the scope and completion date of the correction activities are determined by the Organization Responsible. The organization is obligated to inform the correction activities those will be taken against the nonconformities detected in the audit, in 15 days with the nonconformity report.

Audit report and its additions shall be signed mutually by the audit team and Organization Responsible in order to demonstrate that the nonconformities are accepted. In case the organization refuse to sign, the lead auditor prepares a report including his/her prospect about the audit conclusion with his/her own signature, submits to the Certification Committee. The organization will be informed about the Certification Committee decision. If the organization makes an appeal to the decision in 15 days, the Appeal shall be presented to the related Appeal Committee to be evaluated.

Closing meeting will be held at the end of the audit with audit team and organization's senior management, Organization Responsible and related department responsible. In the meeting, lead auditor presents clearly, positive and negative results of the audit, the nonconformities, if any, recorded to the nonconformity report. The report delivered by the audit team does not represent a final conclusion; it is rather regarded as a recommendation submitted to the certification committee.

In stage 2 audit, audit team should review all the evidences and findings considering the below motioned issues, the assessment of practice and efficiency and agree on the conclusion.

- Information and evidence about conformity to all requirements of the applicable management system standard or other normative documents.
- Performance monitoring, measuring, reporting and reviewing against key performance objectives and targets (consistent with the



expectations in the applicable management system standard or other normative documents.

- c) Client's management system and performance as regards legal compliance
- d) Operation control of client's processes
- e) Internal auditing and management review
- f) Management responsibility for client's customer policies.
- g) Links between the normative requirements, policy, performance objectives and targets (consistent with the expectations in the applicable management system standard or other normative documents), any applicable legal requirements, responsibilities, competence of personnel, operations, procedures, performance data and internal audit findings and conclusions.
- h) In the ISMS audits;
  - Assessing information security risks and generating comparable and reproducible results,
  - Documentation requirements listed in clause 7.5.1 of ISO / IEC 27001: 2013,
  - Selection of control objectives and controls based on risk assessment and risk handling processes,
  - ISMS 'effectiveness audits and measures of effectiveness of information security controls, monitoring of reporting and ISMS objectives,
  - The relationship between the selected and implemented controls, the applicability declaration and the results of the risk assessment and risk handling process, and the ISMS policy and objectives,
  - To determine whether controls are being applied and whether they are effective to achieve the stated objectives,
  - that the risk assessment for information security is appropriate and sufficient for the activity of the client organization,
  - The procedures for establishing, reviewing and evaluating the threats, vulnerabilities and effects of the information security related to the client organization's assets, and whether their implementation results are consistent with the client organization's policy, objectives and objectives,
  - If the procedures used in the analysis of significance are logical and correctly applied

In case of a difficulty in carrying out the audit, lead auditor informs the causes to the Organization Responsible and stops the audit and prepares a report.

The time given for to accomplish the correction activities, taken against nonconformities from the audit report, cannot be longer than 3 months (this period is maximum 1 month for ISMS audits. In case the organization can not remove the nonconformities at the given time, the application of the organization will be invalid and a related letter will be delivered to the organization.

After the closing of the nonconformities lead auditor submits the audit report to the certification committee. By the decision of the certification committee, certificate will be issued. The audit reports will be delivered to the client.

#### 5.4 TRANSFER AUDIT

Transfer Audits are the audits conducted in order to provide the transfer of a management system certificate, given by another certification body accredited by an IAF MLA member of an accreditation body, to ROYALCERT. To consider a certificate transfer as Transfer Audit is conditional to below stated circumstances:

- To be able to perform a transfer audit the certificate should be active. Transfer audit can not be conducted for the suspended certificates.
- Before conducting a transfer audit, the nonconformities that has been notified to the company by the previous certification body should have been closed.
- The latest audit of the organization, applied for transfer, should have been performed at most 12 months before the transfer audit.

Transfer audit applications are made like certification audit applications. In addition to the documents (quality manual, procedures etc) requested before the certification audit, the reports and documents of all the conducted audits, prepared by the previous certification body will be reviewed.

Before certification below stated subjects will be reviewed:

- Organization's reason for transfer
- The duration and dates of latest performed audit
- The conformity of the company scope to scope of ROYALCERT
- The accuracy and the validity of the certificate, whether the addresses on the certificate and the addresses requested to be certificated are in the scope of certification and validity, the state of the nonconformities and if possible, confirmation of closed nonconformities by the previous certification body.
- Previous audit reports and observations

- Received complaints and activities taken.
- The existence of any conflict with legal authority.

The number of auditor/day for transfer audit, is determined considering the surveillance duration or if the due date is close duration of certificate renewal from the Determination of Audit Durations Instruction. Transfer audit is conducted like the surveillance audits or certificate renewal audits, described in this manual. The audit reports are delivered to the client.

The certificates that will be transferred by surveillance, the period of the certificate is same as date of the previous certification body.

#### 5.5 FOLLOW UP AUDITS

Are performed for determination of the relevant correction activities are being applied efficiently, defined in the item of suspending the company certificate, and major nonconformities emerged in stage 2, surveillance, renewal, transfer, amendment or particular audits and minor nonconformities that requires on-site audits.

Following the closings of the nonconformities, during the period agreed with the company, audit will be planned up to the Determination of Audit Durations Instruction. It will be taken care to assign the previous audit team.

In case the company can not complete its arrangements in the given time for the follow up audit (maximum 3 months) and/or can not prove dissolving of the nonconformities during the follow up audit, by the decision of the certification committee maximum 3 months time will be added. If in 6 months total it is observed that the nonconformities are not dissolved or confirmation for performing audit is not given, the application of the company will be cancelled. After the verification of the corrective actions by the lead auditor, certification file will be delivered to certification committee. Audit reports will be delivered to the client.

#### 5.6 DECISION OF CERTIFICATION

The organization gains the right to receive a management system certificate after the audit result of conformity to the management system standard requirements and the certification decision of the certification committee

No certification decision is made to the client organization unless there is sufficient evidence to demonstrate that the management's review and internal audits of ISMS internal audits are performed, active and sustainable.

Although the contract is normally valid for 3 years and certification period is 3 years but the certificate is issued for 1 year. In line with the special request of the client, certificate is three (3) years can be issued in case the surveillance audits are accomplished. If the client requests a certificate valid for 3 years who should send a request to ROYALCERT via e-mail.

The certification validity period is determined considering the last day of stage 2 audit. For certificate change first certificate date is taken as basis and there will be no change in the certificate Expiration Date.

The certificate is given to the scope which has been applied to be certificated, and it can not be used except this scope. Otherwise, If the organizations that do not obey the criteria and continue using the certificate, although being warned in writing by ROYALCERT, suspension and cancellation processes will be activated.

The certificate is in the possession of the organization whose name is stated in the certificate, and can not be turned over to another organization or incorporations, in no circumstances. The responsibility rises from unjustly use of the certificate by third parties belongs to the organization.


Certificated organizations are published by stating their certificated scopes on ROYALCERT web-site.

In case of amendments in certification rules, these changes will be informed to the concerned parties by Certification Practices Manuel and published on ROYALCERT web-site.

#### 5.7 SURVEILLANCE

Surveillance audits shall be conducted at least once a calendar year, except in recertification years. The date of the first surveillance audit following initial certification shall not be more than 12 months from the certification decision date. This audit can cover all or parts of the management system. The number of surveillance audits can be increased according to customer requirement, received customer complaints, the level of the nonconformity detected during surveillance audit or as audit team indicated.

Surveillance audits are planned according to item 5.2 by contacting the organization before the audit date. Postpone requests of organizations for Surveillance 2, in condition of having serious justifications, for temporary

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situations (e.g., heavy work load, temporary health problems, outage of production or service etc.) up to maximum 3 months delay for Surveillance 2; and for absolute necessity postponement of Surveillance 1 or 2 (e.g. natural disaster, economic crisis, terrorist activities, heavy health problems, pandemic, etc.) up to maximum 6 months delay, could be done. The request for delay must be send with an official letter to RoyalCert HQ before the Surveillance audit has to be done or the certificates expires. In case of postponement, the date of the conducted surveillance audit is not related with the next audit date. A remote document review can be done to continue certification in case an on-site audit is not possible due to extraordinary events as war, strike, riot, political instability, geopolitical tension, terrorism, crime, pandemic, flooding, earthquake, malicious computer hacking, other natural or man-made disasters. For this HQ has to be informed about the situation before the certificate expires. However, within 6 month an on-site audit has to be conducted. Otherwise, the certificate has to be suspended.

Conducting and reporting the audit and closed up the nonconformities and following them up are performed as in the stage 2 audit. But the whole system auditing does not require. In a certificate use period (3 years) at least 2 surveillances will be conducted. In this period all the items of the reference standard shall be inspected at least once. In each surveillance audit, the confidence to certificated management system that it full fills the requirements of standard must resume.

In surveillance audits below stated subjects are taken into consideration.

The organization is obligated to; perform the reference standard's implementations about management review and internal audit items once a year at least and submit the records of this implementations to the audit team in surveillance audits.

On-site confirmation of the nonconformities that has been detected in the previous audit and has been closed without onsite confirmation.

Dealing and eliminating the complaints

The efficiency of the system in terms of customer objectives

The developments of the planned activities for continual improvement

Sustained operational control

Review of every amendment in the system

Attribution to brand use/certification

Changes in SOA and its results (in ISMS audits)

In order to achieve the objectives of the ISMS information security policy of the customer organization,

Reviewing the procedures for periodic evaluation and compliance with relevant information safety laws and regulations,

On-site confirmation of the nonconformities that has been detected in the previous audit and has been closed without onsite confirmation, the control of brand and certificate use, are actualized during the surveillance audit. In case of detecting nonconformity in the result of on-site confirmation

it will be evaluated as major nonconformity in the nonconformity report and follow up audit decision will be taken by the audit team. In case the nonconformities are closed before indicated dates, the certificate of the organization will be suspended by the decision of certification committee. The situation will be notified to the organization by a letter.

For the certificates of the organizations that close all nonconformities in the stated date, the decision for continuation of validity is taken by the certification committee. The audit reports will be delivered to the customer.

#### 5.8 RECERTIFICATION AUDIT

Recertification audits are the audits that performed to recertify the organizations before the validity (3 years) of the system certificate expires. It is provided to plan an audit for 2-3 months before the certificate expiration date based on the certificate validity period. The time interval; between the first certification audit and recertification audit or between the two recertification audits must not be more than 3 years.

If the company does not respond or request the certificate continuance, at the end of the certificate validity period, the certificate becomes invalid.

A remote document review can be done to continue certification in case an on-site audit is not possible due to extraordinary events as war, strike, riot, political instability, geopolitical tension, terrorism, crime, pandemic, flooding, earthquake, malicious computer hacking, other natural or man-made disasters. For this HQ has to be informed about the situation before the certificate expires. However, within 6 months an on-site audit has to be conducted. Otherwise, the certificate has to be suspended.

Application procedures and planning activities are actualized as described in the items 5.1 and 5.2.

Certification renewal audit, may require a separate stage 1 audit for the important changes in the organization, organization's management system or the contents in which the organization management system runs (e.g., amendments in the regulations etc.). If stage 1 audit is considered necessary by the certification manager, the process performed in the certification audit will be implemented. If stage 1 audit is not required, the process being implemented from the stage 2 in the certification audit, will be followed. For the recertifying audit, planning, assignment of auditors, implementing the audit, reporting, closing nonconformities, taking the decision of certification are as in the certification audit.

During recertifying the nonconformities detected in the previous audit and corrective activities are inspected. The audit scope, new documents, brand and logo use will be controlled and transact as in the surveillance audit. The assessment of the audit conclusion is made as in the certification audit.

For any major nonconformity appeared during the recertification audit, shall be corrected, implemented and verified prior to expiration of certification.

When recertification activities are successfully completed prior to the expiry date of the

existing certification, the expiry date of the new certification can be based on the expiry date of the

existing certification. The issue date on a new certificate shall be on or after the recertification decision.

If the recertification audit has not been completed or implementation of corrections and corrective actions for any major nonconformity prior to the expiry date of certification RoyalCert shall not recommend recertification and validity of the certification shall not be extended. RoyalCert shall inform the client and the consequences shall be explained.

RoyalCert can restore certification within 6 months provided that the outstanding recertification activities are completed following expiration of certification, otherwise at least a stage 2 shall be conducted. The effective date on the certificate shall be on or after the recertification decision and the expiry date shall be based on prior certification cycle.

Where Royalcert conducts unannounced audits as part of surveillance activities, Royalcert describes and makes known in advance to the certified clients the conditions under which such audits will be organized and conducted.

#### 5.9 SPECIAL AUDITS

##### 5.9.1 AUDITS REQUIRE CERTIFICATE CHANGE

Are the audits performed because of; scope extension or restriction, site or affiliate addition, address change or other changes of organizations.

The organization shall inform the changes in; the scope, address, legal, commercial, organizational structure, property right, management, management system and processes to ROYALCERT.

The request for change will be recorded and reviewed in the direction of amendment proofs. The decision about whether an audit is required or not shall be taken by certification manager.

Audit is not required if there is a scope restriction or legal and commercial amendments that has no effect on the management system structure and will be assessed in the certification committee.


In audit required cases activities are carried out; in accordance with the process followed in the surveillance audits and covering the essence of change. Audit reports are assessed by the certification committee. In case the documents and reports are considered acceptable by the certification committee the requested change will be made. The audit report will be delivered to the organization.

In certificate changes the organization's present certificate validity period does not change.

Independently from the involvement of the competent regulatory authority, a special audit may be necessary in the event that Royalcert becomes aware that there has been a serious incident related to occupational health and safety, for example, a serious accident, or a serious breach of regulation, in order to investigate if the management system has not been compromised and did function effectively. Royalcert documents the outcome of its investigation.

The activities necessary to perform special audits shall be subject to special provision if a client with a certified ISMS makes major modifications to its system or if other changes take place which could affect the basis of its certification.

##### 5.9.2 SHORT-TERM INFORMED AUDIT

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Short-Term Informed Audits are performed for; investigating the complaints, the situation of changes in the management system standard or certificated organization's rules, or follow up the ending of suspension.

Being in a positive function of the scope of the special audit, the certification manager will decide how to implement the audit.

In this type of audits, the organization is informed in a period of time (at most 1 a day before) that there will be no possibility to change the current situation, and the audit is conducted.

Assigning the audit team that will perform the audit, certification manager appoints a team; different than the previous one and efficient for comment on the subject of complaint. In case the organization does not accept the audit, the certificate will be suspended by the decision of certification committee and the situation will be informed to the organization by a letter.

#### 5.9.3 REMOTE AUDITS

A remote document review can be done to continue certification (Surveillance or Recertification) in case an on-site audit is not possible due to extraordinary events as for example war, strike, riot, political instability, geopolitical tension, terrorism, crime, pandemic, flooding, earthquake, malicious computer hacking, other natural or man-made disasters. For this RoyalCert HQ has to be informed about the situation before the certificate expires. However, within 6 months an on-site audit has to be conducted. Otherwise, the certificate has to be suspended.

#### 6. SUSPENSION AND SCOPE RESTRICTION

ROYALCERT can suspend the use of organization's management system certificate for a particular time period, according to the decision of certification committee.

The reasons for suspension;

1- Continuous or serious failure of the certificated management system in fulfilling the requirements of certification, including management system efficiency conditions.

2- Client's rejection for surveillance or certificate renewal audits at the planned frequency.

3- Client's default in contract (payment, brand use, certificate use, etc)

4- On client's own accord,

5- Detecting major nonconformity in the audits or failure of the organization in closing the minor nonconformities at the given time

6- By the decision of the certification committee in the organization's request for adjourning the surveillance audit date for more than; 6 months in force major circumstances, 3 months for other than reasons, based on the certification audit date

7- Fail to inform ROYALCERT about important amendments made in the company organization

8- Discontinuance of activities on organization's own accord

9- The detection of failure in fulfilling the requirements or legal enforcements (e.g. occupational safety and health regulation or the special needs of the related product/service) other than the standard related to the product/service within the scope of audit

The organization shall stop the use of certificate and brand with the announcement of the suspension decision.

During suspension period, the organization can not make use of certificate rights. ROYALCERT has the authority to publish the decisions of certificate suspension. In case it is proven that the cause of certificate suspension has been dissolved (by audits, document review etc.), the suspension of the certificate will be over by the decision of the certification committee. The period for suspension of a certificate is 6 months at most. The certificate of the organization will be canceled or the scope will be restricted by the certification committee in case the organization can not dissolve the problems in the given time. On suspension or decertification, the name of the organization will be delisted from the list of certificated companies and shall be added to the list of suspended or cancelled certificates.

On continuous or serious failure of the organization in meeting the certification requirements for one part of certification scope ROYALCERT will restrict the client's scope of certification, excluding the part that does not meet the conditions.

#### 7. CANCELLATION AND WITHDRAWN OF CERTIFICATE

The contract for use of organization's management system certificate can be cancelled according to the decision of ROYALCERT certification committee.

The reasons for rescission of a contract and resumption of certificate;

1- The organization's disallowance for conducting the audit in the given suspension period, or default

in meeting the requirements of suspension (payment, document review etc.)

2- Organization's failure in closing the nonconformities in given time for the activities (audit, document, review etc) taken to end suspension

3- Organization's bankruptcy or shut the activity which is in the certificate scope

4- Use of the management system certificate in different areas from the product or service declared in the scope.

5- Organization's giving inadequate and insufficient information during the audits,

6- Deceptive and unauthorized use of certificate,

7- Failure in payment of the prices, effectuated by ROYALCERT, in 15 days from the invoice date

8- Detecting in the audits performed during the certificate validity period that the organization's management system has lost its adequacy entirely

9- Organization's being off at the facility address declared in the certificate

10- The change of organization's business entity concept

11- Organization's violating terms of this manual

12- Falsify on the certificate and its additions by the organization

13- The request of the organization for delay, for any reason, of the surveillance/follow up audit date

notified by ROYALCERT or request for cancellation of surveillance/follow up audit

14- Organization's request

15- Information on incidents such as a serious accident, or a serious breach of regulation necessitating the involvement of the competent regulatory authority, provided by the certified client or directly gathered by the audit team during the special audit, shall provide grounds for the Certification Body to decide on the actions to be taken, including a suspension or withdrawal of the certification, in cases where it can be demonstrated that the system seriously failed to meet the OH&S certification requirements. Such requirements shall be part of the contractual agreements between the CAB and the organization.

On cancellation of the certificate, the name of the organization will be delisted from the list of certificated companies and shall be added to the list of cancelled certificates. After the cancellation of the certificate the organization is obligated to stop the use of certificate and every kind of document or introduction material referring to certificate and deliver the original certificate to ROYALCERT and do its financial obligations. Anew applications of the organizations, whose certificate or contract has been cancelled, can be treated in 30 days at least. For anew applications the certification processes of first application will be implemented.

ROYALCERT has the authority to publish in its website the decisions about resumption of the certificate and cancellation of the annulment of the contract. When the certificated is received back the name of this organization will be delisted from the list of certified companies.

The organizations shall stop the use of certificate and logo after the announcement of certificate resumption and rescission of the contract. The organization is obligated to return every kind of document given to itself with the contract in 15 days from the date of notification at the latest.

#### 8. DISPUTES AND COMPLAINTS

Any person or organization can complain about and object to; ROYALCERT's; performance of certification and audit activities, procedures, policy, temporary/permanent personal or activities, within the certification scope of an organization certificated by ROYALCERT or any subject about ROYALCERT's activities, or object to decisions taken by ROYALCERT concerning themselves.

This complaints and Appeals are recorded to Appeal/Complaint Declaration Form. Appeal should be made written in 30 days from the date of decision in question. Relevant forms and procedures can be received at [www.royalcert.com](http://www.royalcert.com) web site.

All the received Appeals and complaints are evaluated from the point of qualification by ROYALCERT and complainant and objector are informed about the activities taken and will be taken.


It is provided that the persons doing the assessment and realizing the activities are not included in the issues that are subject to complaints or appeals.

The complaints about the certificated companies are recorded according to ROYALCERT procedures.

This circumstance is informed to certified organization and related correction activities will be requested to be informed to ROYALCERT in writing in one month, The complainant. will be informed about the received information.

#### 9. BRAND AND LOGO USE

Organization can use its certificate in its business, proposals, for the purpose of advertisement, to demonstrate that its product/service is produced/provided within the scope of certification system subject to application.

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The system certificate given to organizations can only be used for the scope and settlement(s) declared in the certificate.

The certificate can not be given to another organization or incorporation. The validity of the management system certificate is 3 years. The organizations are obligated to stop the use of certificate and logo in termination of certificate's validity. The organization; is obligated to stop using and refer its certificate in case of suspension and rescission; and should stop use of every kind of document, introduction materials, advertisement activities that demonstrates that the organization is certified and use of those carrying the related system certification logo.

In use of certificate and logo the organization is obligated meet the below stated conditions:

- a) Should fulfill ROYALCERT requirements when referring to certification status in communication media like Internet, documents, brochures or advertisement
  - b) Should not make any deceptive statements regarding its certification or allow such situation
  - c) Should not use the certification document and any part of it in a deceptive way or allow such use.
  - d) Should stop all the advertisement work involving any reference to certification on the suspension or cancellation of the certificate by ROYALCERT
  - e) Should change all the advertising materials accordingly when the scope is restricted
  - f) Should not use certification document or any part of it in such a manner that gives the impression of a product (including service) or a process of the organization has been certificated.
  - g) Should not give the impression of certification is applied to activities off site the certification scope
  - h) Should not use the certification in way that calls in question to prestige of ROYALCERT or the certification system and the certificate or public credence
- The organization gains the right for a certificate can use the ROYALCERT management system certification logo(s) as described in the, provided that indicating the certificate has been given to the management system not to the product. The instruction for logo use can be reached at [www.royalcert.com](http://www.royalcert.com) web site.

#### 10. THE REFERENCE STANDARD BASELINE TO THE CONTRACT OR THE CHANGES IN CERTIFICATION REQUIREMENTS

The changes in the baseline standard for certification are notified to the certificated organizations.

ROYALCERT is authorized to give an appropriate pass time to the organizations for application of new requirements, on condition that; not being contradictory to the legislation terms and not creating unfair competition environment and the certificate is valid through the end of the pass time.

The certification body announces every change in the certification requirements revising this manual to the certified clients. Because this manual has the characteristic of an contract, the suitability

of each customer to the new requirements is confirmed by signing this contract. This confirmation must be completed before the first audit that will be conducted after the requirements change date all rules determined by RoyalCert Head office and signed by RoyalCert GMBH and Client.

#### 11. OBLIGATIONS OF ROYALCERT INTERNATIONAL REGISTRARS

11.1 Is obligated: keeping confidential all the information and documents of organizations as required by procedure, provide that the contract including confidentiality terms is signed by the certification personal, auditors and specialists. But this information can be shared with the accreditation body, which ROYALCERT is accredited by, when requested. In case of being have to give information to third parties because of legal requirements, certainly informs the related company.

11.2 The service provided by ROYALCERT is acceptable for system audits and certification. Can not give consultancy for establishment of management systems.

11.3 ROYALCERT commits to conserve impartiality in its services

11.4 ROYALCERT, informs the organization in written for the complaints, forwarded to ROYALCERT, arising out of nonconformities from its management system. Based on the importance of the complaints an audit can be organized in the organization.

11.5 Is obligated to announce the important amendments that may occur in the certification system (in standard procedures or rules) as soon as possible to

certified companies for they can make the relevant arrangements in the determined pass time. For this purpose, web site and e-mail etc. can be used.

11.6 ROYALCERT has the authority to make changes on the implementation documents about system certification presented to the client. But the rights gained before the amendment is valid and for the application of the changes the amendment date will be the baseline. The amendment will be announced to all certificated organizations and then ones on the application stage, by web site.

11.7 ROYALCERT is responsible for keeping a list of certified, suspended and decertified organizations, and publishes this list on its website and update it monthly. This list is inclusive of the name, address (for each one of multi site organizations), management system standard, scope, certificate number, validity period, issue date and accreditation and etc information of certified clients.

11.8 ROYALCERT is obligated to keep the customers' all records about activities taken within the management system certification as long as certificate validity period.

11.9 ROYALCERT has "Professional Liability Insurance" against risks that can result in or cause damage within the certification and audit activities, and the scope and limits of ROYALCERT's responsibility is stated with it. ROYALCERT has no responsibility for the certificates not being recognized by third parties.

11.10 ROYALCERT has the authority to audit its certified customer when considered necessary.

11.11 ROYALCERT claims responsibility for all the work assigned to subcontractor auditor and/or technical experts.

11.12 The service provided by ROYALCERT pursuant to ISO 19011, ISO/IEC 17021 and other accreditation rules.

11.13 In case ROYALCERT gives up declare off its accreditation on its own accord or on the cancellation of its accreditation by the accreditation body; the organizations certified by ROYALCERT shall be in the supervision of a certification body allied to IAF member accreditation body.

#### 12. THE OBLIGATIONS OF CERTIFICATED ORGANIZATION

12.1 The certificated organizations are obligated to accomplish their responsibilities within the frame of this manual. They are supposed to follow and obey the changes in the documents about certification practices updated by ROYALCERT from [www.royalcert.com](http://www.royalcert.com).

12.2 The organization is responsible to implement the management system standard requirements baseline to certification.

12.3 The certificated organization should keep the records of the activities made within the certificated scope, in case of no legal obligations, as long as the certificate validity period at least.

12.4 The organization is obligated to inform the changes in managements system implantations (main policy, procedures etc), organizational changes, title changes, address changes, business entity changes and every kind of change about any of the information in the Organization Information Form, within the following one month.

12.5 The applicant organization, is responsible for informing ROYALCERT about all the activities regarding assessment of related management system before and after certification, give the requested information in time and correctly, providing every kind of convenience. And responsible to provide that ROYALCERT can reach records (including management review and internal audit records) of all fields.

12.6 In cases considered necessary by the accreditation body its representatives also attend the audit. The organization is supposed to give every kind of verbal or written information needed by accreditation body representatives about the audit.

12.7 The organization is responsible for; appoint a contact person in purpose of providing implementation and continuity of the established system, enabling entrance for the audit team to all necessary fields in the work hours, guarantee that not only the management system standard regarding the product within the certificate scope but also the current legal requirements or special needs are provided.

12.8 Organization is obligated to deliver to ROYALCERT the controlled copy of management system documents before the audit.

12.9 ROYALCERT performs additional audits against compensation for evaluating the effects of changes made, on the system. The organization should perform the important changes that may occur in the certification system (in standard procedures or rules) in the notified pass time

12.10 The organization can not; use its certificate in such manner that calls in question to prestige of ROYALCERT and cause any conflict and make declarations that could disempowered or misguide.



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- 12.11 Is responsible for using the certificate properly as stated in item no 9.
- 12.12 The organization shall keep the records of client complaints about product, service, process and performance of the services, if any, arising from nonconformities in the management system and submit to ROYALCERT if required.
- 12.13 Can use the Logo(s) on condition that indicates the certificate has been given to the management system not to the product, as described in the Instruction for Logo Use
- 12.14 The payments will be made in the time determined in the proposal. The certificates are not published until the first certification price or anew certification price are paid. In case the surveillance payments are not done the certificate will be suspended or recalled.
- 12.15 The right for publishing the certificate belongs to ROYALCERT, and can not be multiplied or copied in a different way unless approved. Only colored photocopy is allowed for giving customers as a proof of certification.
- 12.16 The extras that do not take place within the scope of the original proposal, unplanned visits are invoiced related to prices of additional audits performed for verification of quality management system continues its efficiency in practice.
- 12.17 The organization is responsible for making the payments related to management system certification as stated also in the Certification Pricing Instruction in the following 15 days from being invoiced.
- 12.18 All the prices of audit and surveillance activities are priced excluding travel and accommodation expenses (unless determined otherwise in the proposal). These expenses (travel accommodation) are invoiced as extras. All the prices are excised according to the tax rate of the present country. The organization is obligated to make the determined payments.
- 12.19 All the judicial, financial, technical responsibility of using the certificate by the third persons belong to the organization.
- 12.20 In case of decertification the original certificate shall be returned to ROYALCERT'
- 12.21 The organization is supposed to perform the applications related to management review and internal audit once a year at least.
- 12.22. The organization shall inform RoyalCert without delay, of the occurrence of serious incident or breach regulation necessitating the involvement of the appropriate regulatory authority (Especially for ISO 14001 and ISO 45001 management system certifications).