



ORGANISATION DETAILS	
Organisation Name	Element Materials Technology Warwick Ltd
UKAS Ref (Existing Customers Only)	0026

STANDARD

ISO/IEC 17025
 Sector Schemes / Other Details: [Click here to enter text.](#)
 (e.g. MCERTS, DWTS)

Is this application in support of an application to a UK competent authority for the purposes of appointment as a notified body? **Yes*** **No**
[Click here to enter text.](#)

*Please ensure that your organisation has signed a [Notified Body Confidentiality Waiver](#) allowing UKAS to share relevant information with the competent authority

Scope(s) Requested:

Your application cannot be processed unless the relevant technical procedures are submitted. When in-house developed or non-standard methods are proposed, the validation data must also be supplied.

No.	MATERIALS / PRODUCTS TESTED	TYPES OF TEST / PROPERTIES MEASURED / RANGE OF MEASUREMENT ¹	STANDARD SPECIFICATIONS / TECHNIQUES USED ²	DESCRIPTION OF EQUIPMENT USED	O & I ³
1	Aircraft avionic equipment	Cable bundle Single stroke Waveform 1 all levels Waveform 2 all levels Waveform 3 @1 & 10 MHz all levels (applied current limited to 100A) Waveform 4 levels 1-4 Waveform 5A all levels	DO 160 C,D,E,F,G section 22 MIL 461 CS117	Lightning waveform test generators Oscilloscope Voltage and current probes	<input type="checkbox"/>





No.	MATERIALS / PRODUCTS
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IN-HOUSE CALIBRATION:

Are there any in-house calibration(s) of equipment used for any measurement activities included in your scope of application?

Yes No

If 'Yes' please provide details below (refer to UKAS publication [TPS 41](#) for information)

No.	MEASURED QUANTITY/INSTRUMENT
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For an extension to scope to be considered for **desktop** review the following documentation, in addition to that listed above, must be supplied, where it is applicable. Applications submitted with no supporting documentation will not be accepted.

Documentation		Justification for non-submission
Details of Internal Quality Control including control charts	<input type="checkbox"/>	Click here to enter text.
Proficiency Testing Scheme Data	<input type="checkbox"/>	Click here to enter text.
Training Records of Relevant Staff	<input type="checkbox"/>	Click here to enter text.
System Suitability Checks	<input type="checkbox"/>	Click here to enter text.
Other (please state)	Click here to enter text.	Click here to enter text.

DECLARATION:

- I declare that I am authorised, on behalf of the organisation, to submit this application, and that the information contained herein is both correct and accurate to the best of my knowledge and belief.
- If this application relates to an extension to scope, I understand and accept that an assessment fee will normally be charged for the extension to scope, and it may be necessary to revise our annual fees upon grant of the extension to scope.
- [Standard Terms of Business.](#)

Name: Click here to enter text.

Position: Click here to enter text.

Date: Click here to enter a date.

APPLICATIONS TO BE SUBMITTED TO:

EMAIL: apps@ukas.com

POST: Applications Unit, United Kingdom Accreditation Service, 2 Pine Trees, Chertsey Lane, Staines-upon-Thames, TW18 3HR