



SRI LANKA ACCREDITATION BOARD
for CONFORMITY ASSESSMENT

RULES & PROCEDURES
for ACCREDITATION OF GHG
VALIDATION/VERIFICATION BODIES



ACCREDITATION SCHEME FOR GHG VALIDATION/VERIFICATION BODIES

Rules and Procedures for accreditation of GHG validation/verification bodies

1. Introduction

The Sri Lanka Accreditation Board for Conformity Assessment (SLAB) is the National Accreditation Authority of Sri Lanka established under Act No. 32 of 2005. The SLAB offers accreditation services to bodies that provide conformity assessment services such as testing, medical and calibration Laboratories, certification bodies for systems, products and persons, inspection bodies, GHG validation/ verification bodies (V/VB), good laboratory practice and proficiency testing providers.

The work procedures of the SLAB for V/VB are based on ISO/IEC 17011:2017 - Conformity Assessment-Requirements for accreditation bodies accrediting conformity assessment bodies. Preference will be given to subject specific documents published by Asia Pacific Accreditation Corporation (APAC) and International Accreditation Forum (IAF) wherever applicable. The Governing Council of SLAB or relevant advisory committees, if required, will develop specific guidelines and advice the SLAB management in the areas for which there are no IAF, APAC or other acceptable interpretation documents available. The quality manual is a policy document, which has to be supplemented by a set of other documents such as procedure manuals, work instructions etc. to align the quality system in accordance with ISO 14065:2013

1.1 Scope

This document outlines the Rules and Procedures to be adopted when V/VBs seek accreditation for their V/VB activities from SLAB. V/VBs activities for accreditation by SLAB cover the scope sectors applicable to GHG V/VBs at organizational and project level are given in Appendix I. Accreditation will be granted against the applicable International/Regional or National Standards or widely accepted standards or guidelines that are auditable or verifiable. Conformity assessment schemes/criteria for GHG V/VBs are reviewed by the SLAB and determine its suitability.\

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1.2 References

- Sri Lanka Accreditation Board for Conformity Assessment Act No 32 of 2005
- ISO/IEC 17011:2017 - Conformity assessment –Requirements for accreditation bodies accrediting conformity assessment bodies
- AC-RG (P)-01 - Policy for governing the use of SLAB accreditation symbols
- AC-RG(P)-07 - Policy on cross frontier accreditation
- GHG-GL(P)-02- Specific criteria for GHG validation & verification bodies
- GHG-RG(P)-03 - Terms & conditions for maintaining GHG validation/verification body accreditation

2. Accreditation requirements

2.1 Accreditation criteria

The international standard ISO 14065:2013 Greenhouse gases -- Requirements for greenhouse gas validation and verification bodies used by the SLAB along with specific criteria developed subject-wise, as applicable and required for accreditation of GHG V/VBs rules and procedures explained in this document, Terms and conditions for maintaining accreditation and other General policies identified as reference documents in this document.

All applicant and accredited V/VBs are advised to read this document and other related documents prior to apply for accreditation and contact SLAB for any clarification/ further information, if required.

If this document or documents referred in this document are revised, the SLAB will announced in the official website (www.slabs.lk) and automatically adopt those modifications in its criteria, but will give the parties concerned a realistic period of time for the transition.

Development of accreditation criteria involve a step to obtain views of interested parties and public comments prior to publication. Therefore, applicant and accredited V/VBs are requested to forward any written views/suggestions directly to the SLAB.

The applicable international documents, used by the SLAB for accreditation, are given below;

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Activity	Applicable standard/guide
Organization level for quantification and reporting of greenhouse gas emissions and removals	ISO 14065: 2013 ISO 14064-1:2006 ISO 14064-1:2018 ISO 14064-3: 2006 ISO 14064-3: 2019 ISO 14066: 2011
Project level for quantification, monitoring and reporting of greenhouse gas emission reductions or removal enhancements.	ISO 14065: 2013 ISO 14064-2:2006 ISO 14064-2:2019 ISO 14064-3: 2006 ISO 14064-3: 2019 ISO 14066: 2011
Carbon footprint of products — Requirements and guidelines for quantification	ISO 14065: 2013 ISO 14067:2019

As relevant to the Accreditation Schemes, the following mandatory documents and resolutions published time to time by International and Regional Accreditation Organizations as applicable as Accreditation Criteria. Depending on each accreditation scheme / scope (s) Specific criteria have been laid down and the above standards shall be read in conjunction with the relevant specific criteria documents.

IAF Mandatory Documents;

- IAF MD 06: 2014 – IAF Mandatory Document for the Application of ISO 14065:2013.
- IAF MD 14: 2014 – IAF Mandatory Document for Application of ISO/IEC 17011 in Greenhouse Gas Validation and Verification (ISO 14065: 2013).

IAF/ILAC Documents;

1. IAF/ILAC A5 - Application of ISO/IEC 17011:2004

If any document mentioned above is revised, the SLAB will automatically adopt those amendments/modifications in its criteria and parties concerned are given sufficient time as prescribed in publications of International/Regional Accreditation Organizations or as deemed suitable by SLAB for transition.

2.2 Eligibility

The applicant V/VB must comply with all criteria of Applicable Standard/Guide. In addition to this the applicant V/VB must comply with the relevant regulations (if any) and relevant specific criteria (if any) of SLAB for the scopes covered in their V/VB scheme.

V/VB that perform V/VB activities (organizational and project level), that has international or local recognition and acceptance can be accredited by SLAB.

The applicant V/VB must ensure that their validators/verifiers are competent and involved in continual professional development activities gaining skills and competencies as well as updating themselves to meet the demands and expectations of the clients/ stakeholders.

The applicant V/VB shall have conducted at least one internal audit and one management review before the submission of application to the SLAB.

3. Preparation for accreditation

3.1 Preparing for accreditation of GHG Validation/Verification bodies

The management of V/VB should first decide to obtain accreditation for their V/VB activities from SLAB. It is important for a V/VB to make a definite plan of action for obtaining accreditation and nominate a responsible person to co-ordinate all activities related to the accreditation process. The person nominated should be familiar with the V/VB's existing quality system. SLAB will coordinate matters related to accreditation process only through the authorized representative of the V/VB.

A request can be made to SLAB in person, by post, by telephone or by E-mail for relevant information on Accreditation. Information regarding SLAB Accreditation process, relevant documents and application form (GHG-FM (P)-01) will be freely downloadable from SLAB website (www.slab.lk). The V/VB should be acquainted with the SLAB assessment procedure & methodology before submitting the application in the prescribed format.

A quality manual shall be prepared in accordance with the requirements specified in the applicable standard/guide and this should be supplemented by a set of other documents such as procedures, work instructions etc. in alignment with the particular quality system requirements. The V/VB must ensure that the procedures described in the quality manual and other documents are being implemented. Preferably the applicant V/VB must have conducted at least one internal audit and one management review before the submission of application.

V/VB needs to establish the status of its existing quality system and technical competence with regard to requirements of SLAB for accreditation.

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3.2 Scope of Accreditation

The scope of the accreditation, often referred to as the 'scope', is defined as those activities for which to be covered under SLAB accreditation. The scope also specifies the locations/branches where the V/VB carries out its activities.

Based on the scope of accreditation, when an application is registered it is ensured that the policies, processes and procedures as necessary are in place. Therefore, each application is subjected to contract review, adequacy assessment and planning & conducting of pre-assessment, initial assessment, witnessing and review of assessment findings.

During the pre-assessment process, the scope of the accreditation is discussed with the V/VB in detail, and the nature and extent of the assessment will be based on that.

In the Initial Assessment, in addition to visiting the main or head office, based on the Scope of accreditation, visits will be made to all of critical locations from which one or more key activities are performed (ex. Policy formulation, process and/or procedure development, contract review, planning, review, approval and decision on Validation/verification). . Whenever a new critical location has applied, that critical location will also be witnessed.

4. Accreditation process

The accreditation process consists of registration followed by resource review, document and record review, a pre assessment and an initial assessment, grant of accreditation surveillance assessment and re assessment.

4.1 Application and Registration for Accreditation

The V/VB shall apply to SLAB in the prescribed application form (GHG-FM(P)-01) and Self-Assessment Questionnaire (GHG-FM(P)-02) and quality manual / management system documentation in accordance with ISO 14065:2013 along with other relevant documents to SLAB.

The application form and the necessary details are available on the SLAB web site-www.slab.lk. The V/VB shall submit the completed application form and other accreditation documents of the V/VB to SLAB.

The application shall be accompanied with the prescribed application fee stated in the fee structure (GHG-RG (P)-01). Application fee is nonrefundable. V/VB has to take special care in filling the scope of accreditation for which the V/VB wishes to apply. In case, the V/VB finds any clause of the standard (in part or full) not applicable to the V/VB, it shall furnish justifiable reasons.

Applications are not accepted and registered until the submission of required documents and application fee.

Applicant V/VB may withdraw its application or discontinue accreditation process before granting accreditation. In such case, applicant V/VB shall settle all due payments, if any.

For foreign applicant/ accredited V/VB shall follow policy on cross frontier accreditation (AC-RG (P)-07) and accreditation fees as stated in fee structure (GHG-RG (P)-01).

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List of documents required at the application stage is given the Questionnaire (GHG-FM(P)-02) .

4.2 Special Cases

- **Additional Accreditation**

If a V/VB that is already accredited wishes a second or further accreditation against another internationally accepted standard or for that matter any recognized and accepted standard, the procedure is the same as for a new registration. However, in such case, the assessment effort by the SLAB may be limited to cover the areas not covered by the existing accredited system and certain specific areas as decided by SLAB.

- **Already Accredited Certification Activity**

In case an applicant V/VB is already accredited for the applied scope by another Accreditation Body with IAF membership, in compliance with the SLAB Cross Frontier Accreditation Policy explained in AC-RG(P)-07, SLAB will communicate with the particular Accreditation Body to collect necessary information and will seek possibilities to act in collaboration with the said Accreditation Body when processing the Accreditation Application. In such circumstances the SLAB may grant accreditation after an abbreviated assessment; however, any such decision will be taken at the sole discretion of SLAB.

- **A V/VB operating in a foreign country**

In case if an applicant V/VB operating in a foreign country of which accreditation body has been a IAF MLA partner is seeking accreditation, SLAB will initially communicate with that accreditation body inquiring its obligations or objections with regard to processing of such application and based on the response will proceed with the application following the SLAB Cross Frontier Policy explained in AC-RG(P)-07.

- **Non Routine Cases**

In case a V/VB requests accreditation for a V/VB activity where an established Standard/ Guide is not available, SLAB, in consultation with the technical advisory committee will decide on the suitable accreditation criteria to be followed by the V/VB.

The applicant V/VB has to submit necessary supportive documents as evidence to substantiate their claim when they seek accreditation under Special Cases.

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4.3 Acknowledgement and Registration of Application

SLAB on receipt of application documents and other relevant documents and the fees, shall issue an acknowledgement to the V/VB. After scrutiny of application for its completeness in all respects, a unique accreditation number shall be allocated to the particular application, which shall be used for correspondence with the V/VB thereafter.

In case of any V/VB with multiple sites controlled by a main organization, same number shall be continued unless requested by the V/VB /decided by the Technical manager.

SLAB may request for additional information/ clarification(s), if necessary, from the applicant V/VB.

If, on the basis of documents and information provided by the V/VB, SLAB is of the opinion that an assessment cannot result in accreditation, the applicant V/VB shall be informed in writing giving reasons.

The SLAB's policies, processes /and procedures are non-discriminatory and applied in a non-discriminatory way. SLAB makes its services accessible to all applicants whose application for accreditation falls within the scope of its accreditation activities as defined within its policies and rules. Access shall not be conditional upon the size of the applicant V/VB or membership of any association or group, nor shall accreditation be conditional upon the number of V/VBs already accredited.

4.4 Appointment of authorized officer & resource review

Once the registration of application is completed with required documents, technical manager of accreditation scheme for V/VB appoints one of competent assistant director/deputy director (accreditation) as authorized officer for the application and continuation of accreditation process.

A resource review (technical review) will be carried out by the authorized officer in consultation with technical manager and collect additional information from the V/VB, if required. Authorized officer may indicate in the application form the additional information to be collected if required, for the assessment.

If relevant resources are not locally available steps will be taken to obtain resources through another accreditation body with the consent of the V/VB. If the initial assessment cannot be conducted in a timely manner, this shall be communicated to the V/VB.

Authorized Officer will contact the V/VB with respect to application and further information required, if any. Authorized officer is the contact person for the applicant V/VB.

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4.5 Document & record review

4.5.1 Appointment of assessor/ team leader

The SLAB shall appoint a competent internal Assessor/Team Leader from the pool of assessors to carry out document and record review on the documented management system adopted by the applicant V/VB.

4.5.2 Adequacy of quality manual / management system documentation

The competent internal assessor/team leader of SLAB will commence the assessment process with an adequacy assessment of document and record review based on the application submitted within one month. The aim of the adequacy assessment is to determine whether the V/VB is sufficiently prepared for a pre-assessment and having a reasonable chance of getting accreditation and to ascertain the compliance of the documents with the criteria specified in ISO 14065:2013. The adequacy assessment is also meant to obtain a clear idea of the intended scope of the accreditation.

The Team leader/assessor, shall inform SLAB regarding the adequacy of the quality manual/ management system documentation with a report (GHG-FM-05), indicating inadequacies (if any) in the quality manual which in turn should be communicated to the applicant V/VB. Based on this feedback the V/VB shall amend the quality manual/ management system documents and also implement the quality system accordingly and submit objective documentary evidence for corrective actions taken before not later than three months.

If the V/VB satisfies the relevant requirements at the adequacy assessment stage or after the V/VB has taken necessary corrective action based on the adequacy assessment, the assessment process will move into the next phase.

The document and record review process shall be satisfactorily completed within six months.

If, on the basis of documents and information provided by the V/VB, SLAB is of the opinion that an initial assessment cannot result in accreditation, the applicant V/VB shall be informed in writing and the documents concerned will be returned to the V/VB for necessary improvement.

If the outcome of the document and record review is not satisfactory, SLAB may decide not to proceed with the application. In such cases, results with justification shall be reported in writing to the V/VB.

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4.6 Appointment of Assessment Team

Towards the task of on-site assessment, the Team leader shall be assisted by a team of Assessors/ technical experts who will be appointed by SLAB as appropriate with the scope of accreditation and in accordance with the criteria adopted for the selection of Team leader. The SLAB shall propose the composition of assessment team. The V/VB may lodge an objection in writing against specific team members with justifiable reason to do so. Such an objection shall be reviewed by the technical manager to determine the validity of objections to ensure the impartiality and credibility of accreditation process. If the objection is found to be valid, a new team or a new member is nominated in place of the member (s) in question. If no replacement is available, it is possible that the visit will be postponed, or that a part of the scope will not be assessed until a suitable replacement is found.

SLAB may also nominate one of its officers to participate in the assessment, unless an officer is appointed as an assessor/observer/staff officer during the on-site assessment to convey his/her opinions to the team leader and to provide clarification on the international standard and SLAB specific criteria (if any) to the assessment team and keep coordination with SLAB whenever necessary.

As MRA partner of APAC and IAF, SLAB may select assessment of V/VB for peer evaluations and appoint peer evaluators as observer of assessment. In addition, assessment team may consist witnessing assessor from SLAB to evaluate the performance of SLAB assessors.

4.7 Onsite Assessment Plan

The SLAB contacts the V/VB to agree on the date(s) and assessment plan for the assessment. Based on this SLAB prepares the assessment schedule (GHG-PL-01) and the composition of the team and send it across to the V/VB well in advance. Authorized officer of SLAB will request information on due assessments at V/VB's clients in order to plan witness assessments at different locations. For this purpose, V/VB shall include possibilities of witnessing by the accreditation body assessors into contractual agreements with V/VB and its customers.

4.8 Onsite Assessment

The onsite assessment will be carried out two stages namely pre-assessment and initial assessment (Initial assessment is the final assessment for the grant of accreditation). During both these assessments, witness assessments at the site of the applicant V/VB's client may be required. Although there are no strict demarcations for these two assessments, the objectives of these assessments may be expressed in the following manner. On site assessment consists an opening and closing meeting. Therefore V/VB shall arrange required facilities to conduct meeting with assessment team members and key personnel of the V/VB and the assessment.

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The assessment team shall commence an on-site assessment with an opening meeting at which the purpose of the assessment and criteria are clearly defined and the assessment plan and the scope for the assessment are confirmed. During the assessment, the assessment team will assess the documentation and implementation of the management system as well as the competence of the V/VB in accordance with the ISO 14065:2013 and specific criteria (if any) of SLAB. In doing so, the assessment team will select a representative sample in the areas within the scope of the accreditation.

This process shall be extended to witness assessment activities also. The V/VB shall demonstrate that it is competent in all the activities at all sites for which accreditation has been requested. With regard to the management system of the V/VB, the assessment team shall be able to assess at least one complete cycle of the internal audit and management review.

4.9 Pre-assessment

Upon completion of document and record review, a pre assessment is conducted to gather information on following;

- a. Assess the completeness of the documentation structure of the implemented system
- b. Assess the degree of preparedness of the V/VB for the initial assessment
- c. Study the scope of accreditation so that the time frame, number of assessors required in various disciplines and visits to sites, if applicable.

Pre assessment is conducted by a Team leader/Assessment team which consists Team leader/Assessor/ Technical assessor/Technical expert. If required, on site witnessing may also be arranged at the pre assessment stage. At the end of pre assessment, assessment team complete pre assessment report and deficiencies identified during the pre-assessment and obtain the acknowledgement for recommendation and findings from the V/VB. Assessment team verifies the man day requirement for the initial assessment and propose and report required changes and planning of initial assessment.

V/VB shall take necessary corrective actions for the deficiencies s and submit documentary evidences within two months. On request, an extension of two months will be given on request with justifiable reasons. However, if the V/VB submits corrective actions within four to eight months and wishes to continue the application, a fresh pre-assessment shall be conducted. Any failure to submit documentary evidences within eight months, the application shall not be continued. The decision on discontinuation of the application shall be communicated to the V/VB. Upon the successful completion of the pre assessment, the V/VB shall be notified and shall be informed to prepare for the initial assessment.

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4.10 Initial assessment

Upon completion of pre assessment, an initial assessment is conducted to

- a. Assess the effectiveness of the implementation of the documented system
- b. V/VB's competence in performing verification and validation activities
- c. Finalize the scope of accreditation
- d. Take a decision on the recommendation for the grant of accreditation
- e. Decide follow up actions required to verify the effectiveness of corrective actions taken for previous nonconformities

At the end of each assessment, a closing meeting is conducted to disclose findings of the assessment. Initial assessment report contains assessment report, scope of accreditation, nonconformities and other relevant assessment records. Initial assessment report shall also provide a recommendation towards grant of accreditation or otherwise. Assessment team is not allowed to take decisions on granting accreditation.

V/VB shall submit corrective actions within two months with satisfactory documentary evidence. However, depending on the severity of actions to be taken, V/VB may take additional time up to one year from the date of initial assessment, for taking suitable actions in agreement with SLAB. If the corrective actions cannot be submitted for all nonconformities within one year another Initial assessment shall be arranged. If follow up assessment is recommended, it shall be conducted within six months from the date of Initial assessment and corrective actions for remaining non-conformities shall be submitted within two months. If the corrective actions cannot be submitted within one year from the date of Initial assessment, another Initial assessment shall be arranged. Based on the corrective actions submitted the assessment team may recommend to conduct on-site verification of effective implementation of corrective actions.

4.11 Assessment techniques

The SLAB assessors use one or more combination of the following assessment techniques when conducting the assessment.

- **Document review:** assessing quality system documentation for compliance with the criteria; a document review can also involve records at the V/VB's location, such as personnel files, quality control charts, audit reports, management review reports, audit files etc.;
- **Office assessment:** an assessment at the premises of the V/VB in order to assess the implementation of the system;
- **Interviews:** evaluating the expertise of the V/VB's personnel via targeted interviews.

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- **Witnessing:** observing validations and verifications carried out by the V/VB shall be witnessed as per the policy on assessment of V/VBs with multi-sites and witness assessments.

At least 40% of the scopes for the pre and initial assessments and the rest for the surveillances as per Annex 1 will be witnessed. At least 40% files of validators/ verifiers/ technical experts covering the scopes shall be reviewed during the assessment. Remaining files shall be reviewed during the surveillance assessments. For re-assessments, the number of scopes may be decided upon the changes added to the System but which should not be less than 25% of scopes including surveillances. If the V/VB has been accredited by another Accreditation Body (AB) for the respective scopes applied or accredited, witness audits may not be arranged for all scope sectors. In case of Scope extensions at least 50% of scopes shall be considered and the rest for the Surveillances.

When planning and conducting assessments any national/regulatory requirements/ risk & complexities associated shall be considered, if relevant.

4.12 Accreditation decision

After satisfactory closure of all non-conformities, the SLAB prepares a summary of all relevant information gathered during the processing of the application, the assessment report prepared by the assessment team, additional information received from the V/VB and the consequent verification activities. The summary report is placed before the accreditation committee which is appointed by the Governing Council as per the provision of SLAB Act. The accreditation committee for V/VBs studies the assessment reports, nonconformities and corrective actions, scope of accreditation, final report (GHG-FM-46) and the recommendation given by the team and then makes its own decision on grant of accreditation.

The accreditation committee decision on the approval of granting the accreditation shall be submitted to the Council through Director/CEO, SLAB for information.

The SLAB informs the V/VB in writing of the decision taken. All decisions taken by SLAB regarding grant of accreditation shall be open to appeal by the V/VB within one month as per appeal procedures (GN-PR(P)-09) within 30 days.

4.13 Issue of accreditation certificate and schedule

As soon as a decision is taken to grant accreditation SLAB shall prepare the following documents.

Accreditation certificate with a unique number for identification duly signed by the Director / CEO, SLAB. This certificate specifies the date on which the accreditation was granted, the standards based on which the accreditation was granted and the period of validity of the certificate.

A schedule of accreditation referring to the scope of accreditation with type of validation, verification and information and validity period of locations/sites covered under accreditation.

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Terms and condition for maintaining accreditation (GHG-RG(P)-03) is considered as the agreement between SLAB and V/VB. This contains the rights and obligations of parties; the party providing the accreditation and the party being accredited and signed by both parties. The applicant V/VB must fulfil all the financial obligations payable to SLAB, before receiving the certificate(s).

4.14 Post Accreditation Assessments

The SLAB accreditation certificate shall be valid for a period of 3 years unless specified by the SLAB. During the validity of accreditation, the V/VB must continuously comply with the requirements of the ISO 14065:2013 and “Terms and condition for maintaining accreditation” (GHG-RG (P)-03). In this regard SLAB shall periodically review the validity of accreditation. To this end, the SLAB carries out surveillance assessments annually and a re-assessment within three years. During the accreditation period, the scope of the accreditation may be changed.

4.15 Surveillance

The frequency of surveillance is one year from the date of granting accreditation. SLAB shall conduct annual surveillance of all accredited V/VB or following surveillance activities may be decided by the Technical manager based on the risks associated with the activities;

- Special on-site assessment/remote assessment
- Review of changes to V/VB’s management system
- Review of performance in proficiency testing and/or other inter-laboratory comparisons
- Conduct advanced surveillance assessment

Surveillance is aimed at examining whether the accredited V/VB is maintaining all the requirements of the ISO 14065:2013 and SLAB specific criteria (if any).

As planned in the assessment schedule, Authorized officer of SLAB shall in writing inform the accredited V/VB of the surveillance assessment at the beginning of the year and agree on the dates of surveillance assessment before the due date of assessment.

The V/VB during the validity of accreditation may request to extend the scope of accreditation for which they should preferably apply three months before the conduct of assessment/ surveillance. The mode of surveillance visit is similar to the initial assessment and it will cover only selected areas. The non-conformities, if any, shall be closed within two months of conduct of surveillance. The summary of the surveillance report along with other relevant information shall be submitted to the Director / CEO, SLAB to make a decision on the continuation of accreditation or otherwise. SLAB shall inform the V/VB, in writing, about the decision.

If there are remaining nonconformities with a justification by the Technical manager considering the associated risks, a letter of continuation of accreditation may be sent to the V/VB with conditions or suspend accreditation relevant to the particular nonconformity.

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When a follow-up assessment is recommended and conducted, documentary evidence for corrective actions for remaining nonconformities/ new nonconformities, if any shall be sent to the SLAB within a month unless there is any issue which may be compromised with reasonable justification.

On practical situations, faced by either party with reasonable justification, the maximum time that should be allowed for advancing or delaying the annual surveillance shall only be three months from the planned surveillance assessment.

4.16 Reassessment and or renewal of accreditation

As planned in the assessment schedule, Authorized officer shall in writing inform the accredited V/VB of the re-assessment at the beginning of the year.

Accredited V/VB shall apply four months before the expiry of accreditation for renewal of accreditation as per the terms and conditions for maintaining accreditation (GHG-RG (P) - 03). Application for renewal of accreditation is similar as initial application described above Sec. 4.1. Re –application shall be accompanied with the application fee as described in the fee structure.

The V/VB may request for extension of scope of accreditation, which should be explicitly mentioned in the application form.

The procedure for processing of renewal of application is similar to that of first application except that no pre-assessment is conducted and likewise, the procedure for the on-site reassessment visit is similar to that of initial assessment. If the results of reassessment visit are positive and all non-conformances are closed before the expiry of the validity of accreditation certificate, then the validity of the certificate is extended by a further period of three years without any discontinuity unless specific by the SLAB. In case of renewal, a new certificate and a schedule of accreditation is issued while the certificate number is retained. The decision on renewal of accreditation is also taken by the accreditation committee for V/VBs.

4.17 Supplementary Verification visits/ Special Assessments

The SLAB may organize supplementary verifications/ special visits under the following circumstances:

- Repeatedly finds nonconformities or many nonconformities during the surveillance/ reassessment which directly affect to the credibility of accreditation.
- Receiving complaints that are substantiated with facts or on instances where the V/VB is found to be misusing the certificate/ accreditation symbol.
- Based on public complaints, publications or information from interested parties and the government.

The Director/CEO, SLAB with the recommendation of Technical manager may decide to carry out special assessments at any time during the period of validity of accreditation. The execution of special assessments may take place with no prior notification or with limited time between notification and execution.

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Special assessment may also become necessary when changes occur in accreditation criteria, organizational structure and in management/ ownership/authorized signatories. However, in these cases, the SLAB will give V/VB sufficient time for preparation.

All costs associated with special assessments will be charged to the V/VB.

4.18 Changes in the accreditation / Specific criteria

If there is a change in the ISO 14065:2013 or in the accreditation criteria, SLAB shall inform the V/VB in writing indicating the transition policy with specific period for complying with new criteria. Upon receiving such information, the V/VB must confirm to SLAB's transition policy on implementation of changes. SLAB may assess the implementation of changes during surveillance and re assessments or conduct special assessment.

4.19 Changes Affecting the V/VB Operations

In the event of the V/VB informing SLAB about any changes affecting the V/VB's activities and operations, SLAB may organize a supplementary verification visit/ special visit. The reportable changes are described in section 5.1.4. V/VB shall communicate this with relevant documentary evidence. The final decision is communicated to the V/VB along with an amended certificate. The costs associated with the issue of amended certificate and schedule will be charged to the V/VB.

4.20 Reduction of the Scope

During assessments by the SLAB, the accredited V/VB shall demonstrate that it complies with all accreditation criteria regarding the entire scope and that it has complied with these criteria from the date on which accreditation was granted. If a V/VB is of the opinion that parts of the scope no longer conforms to the accreditation criteria, it is expected that the V/VB will withdraw the relevant part of the scope itself. If during an assessment it becomes clear that it is necessary to withdraw accreditation for parts of the scope, the SLAB will also review the validity of the remaining accredited scope.

In order to demonstrate that the V/VB has complied with and is complying with the criteria for the complete scope of accreditation, the V/VB shall be able to provide records of the activities carried out. During SLAB assessments, these records shall demonstrate that the procedures for carrying out specific activities have been applied correctly by qualified personnel in the past year.

The concerned part of the scope shall be withdrawn if records do not demonstrate this. If this means that the entire scope is withdrawn, then the entire accreditation is withdrawn. However, the V/VB concerned can again be granted accreditation for the standard and the scope involved, under the same registration number after submission of application as scope extension and a full assessment of areas withdrawn.

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4.21 Extension of Scope

At any given moment, the V/VB can request an extension of the scope. To this end, a written application shall be sent to the SLAB. An assessment for extension of scope will not be initiated, if nonconformities are currently open in related parts of the scope or in the general management system of the V/VB.

The SLAB distinguishes between extension within and extension outside the scope already accredited. Extensions of the scope that fall within the framework of the same accreditation standard will be considered Extension within the scope and if not, it will be considered otherwise. Requests for accreditation involving a different accreditation standard shall be treated as a new application.

Depending on the size and nature of the extension requested, the extent of the assessment needed for the extension will be determined by SLAB on a case by case basis. All costs for extension of scope will be charged to the V/VB.

4.22 Transfer of Accreditation

If the ownership or name of an accredited V/VB changes, the accreditation may be transferred to the new owner or to the new name if the V/VB involved make such requests in writing. For such a transfer the following pre-conditions apply:

- The V/VB remains operating within the legal and regulatory framework of the country in which it operates;
- The policy and management system remain unchanged;
- The management and key personnel remain unchanged;
- The former owner does not remain active in the same sphere of activity or a similar area under the old name or a related name;
- The general composition of the V/VB's personnel remains the same;
- The basic infrastructure and other facilities are not compromised.

The V/VB shall provide the SLAB with the necessary documents showing that the above conditions are met. The costs for reviewing the documents/ conducting onsite review will be charged to the V/VB.

If all requirements are met, the new V/VB retains the registration/accreditation number and receives the new accreditation documents. The surveillance and re-assessment schedule will remain unchanged.

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5. OBLIGATIONS

5.1 GHG Validation/Verification Body

5.1.1 General

A V/VB shall always comply with the relevant regulations and accreditation criteria. This not only applies to accredited V/VBs but also to V/VBs whose accreditation has been suspended.

5.1.2 Co-operation

The V/VB shall provide the SLAB assessment teams with all the necessary support in order to carry out their work efficiently, safely and honestly, whereby:

- It shall be possible to check the compliance of the V/VB's management system within the criteria;
- It shall be possible to gain insight into the relationship between the documented system and the Standard via an up-to-date review;
- It shall be possible to observe the activities at the V/VB.
- The V/VB shall provide the assessment team with the necessary safety instructions, safety equipment & personnel protective equipment;
- If requested, the V/VB shall provide access to all relevant locations, equipment, dossiers and documents;
- Assessors of SLAB shall not be put in a position where their independence and objectivity could be compromised.

5.1.3 Accreditation Symbols

Accredited V/VB have the right to use the applicable accreditation symbol. As such, on grant of accreditation, the V/VB may use SLAB accreditation symbol on letterheads, brochures and any other material issued to its clients including the certificates. However, such usage shall be confined within the scope of Accreditation. V/VB shall comply with the policy on governing the use of accreditation symbol (AC-RG (P)-01).

Misuse of the accreditation symbol by accredited V/VB may lead to suspension or withdrawal of the accreditation. If non-accredited V/VB use the accreditation symbol, the SLAB can resort to legal action.

5.1.4 Reporting Changes

The V/VB shall inform the SLAB immediately of every change that can have considerable impact on the activities covered by the scope. Such changes may be of following nature:

- Changes in the legal, commercial or V/VB's organizational status;
- Changes in the sphere of activities or economic activities of the V/VB
- Change in management and in structure;
- Policy changes;

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Changes in personnel that fill key positions, such as managers and decision-makers and personnel with specific and unique expertise for the V/VB;
 Changes in location and other resources that can have a significant influence on the accredited activities carried out;
 Significant changes in working procedures.

If a V/VB expects the changes to have a temporary negative effect on the accredited activities, then the V/VB can request a voluntary suspension. In case of that the SLAB possesses the right to carry out extra assessments to ensure that the V/VG again complies with the accreditation criteria before lifting the suspension. If during a surveillance activity of SLAB, it is found that SLAB was not informed about changes may decide to extend the assessment to review the changes and their impacts.

5.1.5 Financial Obligations

The V/VB will receive an invoice for all the accreditation activities carried out by the SLAB. The amount invoiced will depend on the number of man-days worked; the applicable fee and other costs be found in GHG-RG(P)-01. A V/VB shall take prompt actions to settle such payments. If V/VB does not make payment on time, the SLAB sends a reminder. If payment is still not made then, the suspension procedure will begin. If there are payments outstanding during the initial phase of the accreditation process, the SLAB has the right to halt the accreditation process until payment is made.

5.2 SLAB

5.2.1 Behavior of Assessment Teams

The assessment team will limit its assessment activities to an investigation of whether the V/VB complies with the applicable criteria. In doing so, Assessors will make use of the relevant criteria documents, scope-related documents (including standards, descriptions of methodology, diagrams etc.) and generally accepted interpretations. Assessors may not accept any gifts, presents etc. from V/VB that may compromise their neutral role in assessments. Assessors shall follow the health and safety instructions of the V/VB being assessed.

5.2.2 Confidentiality

SLAB shall treat all the information obtained or created during the accreditation process of V/VBs/sources other than the V/VBs as strictly confidential, unless otherwise required to be disclosed under a legal or regulatory framework and unless agreed by the source. Legally enforceable agreements are made available to safeguard the confidentiality of the information obtained in the process of accreditation at all levels of SLAB including the staff of SLAB, committees, service providers, assessors, or other bodies or individuals acting on behalf of the SLAB. Confidential information related to any V/VB shall not be disclosed, outside the SLAB without written consent of that particular V/VB, unless otherwise required by law. Any information about a V/VB obtained from other sources is not shared with that V/VB, unless agreed by the source.

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6. Suspensions, withdrawals and reductions

Suspension, Withdrawal and Reduction of scope of accreditation arises, in the event of a V/VB persistently failing to meet the requirements of accreditation criteria, and/or violating the Rules and procedures and Terms and Conditions agreed upon at the stage of granting accreditation. On V/VB's request, the scope may also be suspended, withdrawn or reduced.

SLAB shall take decision on suspension of accreditation for a maximum of four months or withdrawal/reduction of accreditation with immediate effect. Any failure to rectify the issues related suspension within the given period, accreditation shall be withdrawn/reduced with immediate effect and the decision will be informed to V/VB and published in SLAB web site. SLAB may issue a revised certificate/schedule of accreditation.

6.1 Suspensions

During the suspension period, the V/VB may not make use of the accreditation mark or in any other way actively refer to the accredited status.

V/VB may not accept any new certification requests for issuing accredited certificates. Existing certification contracts shall be respected, which means that the V/VB continues to carry out the necessary surveillance activities.

A suspension is lifted if an additional assessment shows that the reason for the suspension no longer exists. If the suspension period ends without this being the case, the SLAB implements the withdrawal procedure. In exceptional cases, the Director/CEO, SLAB may extend the period for further period of six months.

A V/VB may request a voluntary suspension from the SLAB if it is temporarily unable to comply with the accreditation criteria. In such circumstances, the V/VB is not permitted to make use of the logo or refer to the accredited status. It is not possible to submit a request for a voluntary suspension during the period that a SLAB assessment is being carried out.

6.2 Withdrawal and reduction

The accredited V/VB and the SLAB can withdraw/reduce the scope of accreditation. From the moment of withdrawal/reduction, the V/VB will have to refrain from using the accreditation symbol or otherwise referring to the accredited status for the full/part of scope of accreditation. In such situations the certificates issued under SLAB-accreditation shall also have to be withdrawn or reissued.

If V/VB wishes, for whatever reason, to terminate its scope of accreditation in full/part, it shall submit a request to the SLAB for voluntary withdrawal/reduction in writing. Withdrawal shall apply to the entire scope and reduction shall apply for part of the scope. The SLAB confirms the withdrawal/reduction in writing.

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When SLAB determines that a suspension of full/part of the scope of accreditation, has not been lifted within the applicable period or if evidences are found to substantiate that the V/VB brings the accreditation into grave disrepute, the SLAB will impose the withdrawal/reduction. SLAB informs the V/VB of the withdrawal/reduction in writing. After a withdrawal, the SLAB will not accept an application for accreditation from the same V/VB within a period of six months.

7. Disputes, complaints and appeals

7.1 Disputes

The SLAB defines a dispute as difference of opinion between the accredited V/VB or the applicant V/VB and the SLAB with regard to:

- The interpretation of a requirement of a standard;
- The working procedure of the SLAB.

The V/VB can report the existence of such dispute to the Director/CEO, SLAB in writing. The Director/CEO, SLAB will consult with the parties involved and with the Technical Advisory Committee and takes a decision. The decision will be communicated to the parties in writing.

7.2 Complaints

The SLAB distinguishes two types of complaints:

- Complaints about the SLAB and its Assessors.
- Complaints about registered or accredited V/VBs.

In both these cases Director/CEO, SLAB or the panel appointed by him/her will investigate the complaints. The complaints will be handled in accordance with the Procedure for handling of Complaints (GN-PR(P)-08) which is available on SLAB website.

7.3 Appeals

V/VB are free to make appeals against decisions taken by the SLAB such as appointment of assessors, grant of accreditation, reduction/ expansion of scopes, suspensions/ withdrawal etc. All such appeals will be dealt with in accordance with the procedure for dealing with appeals (AC-PR(P)-09) which is available through SLAB website.

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8. Publicity

SLAB shall publish the details of scope of accreditation & accreditation status of the accredited V/VB along with their contact addresses and suspension/withdrawal of accreditation status in SLAB web site.

SLAB posts all Rules and Procedures, Terms and Conditions, Fee Structures, Specific Criteria and Applications and supporting documents and subsequent changes in the SLABs official website. V/VB are required to implement such changes as per instructions given by the SLAB.

9. Liability

SLAB shall not be responsible for any damages, which the V/VB may suffer as a result of any action or negligence by those who are carrying out the tasks on behalf of SLAB and any failure to the grant of accreditation or abeyance / suspension of the accreditation, and neither shall SLAB be held responsible for any damage whatsoever, caused to any party by the acts of V/VB.

V/VB shall have adequate provisions (Insurance coverage or reserve) to cover liabilities arisen from its operation.

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Appendix 1

SCOPES OF ACCREDITATION

1.1 Organizational level verification (ISO 14064-1)

	Sector	Examples of included activities
1.	Power generation and power Transactions	<ul style="list-style-type: none"> Transmission of electricity Generation of bulk electric power Transmission from generating facilities to distribution centers and /or distribution to end users Renewable energy systems Purchased electricity, and heat
2.	General manufacturing (Physical or chemical transformation of material or substances into new products)	<ul style="list-style-type: none"> Manufacturing - Electric and electronics equipment, industrial machinery Manufacturing of Food Beverages, tobacco and food processing Manufacturing of Textile, wearing apparel and leather products Manufacturing of Wood and wood products Manufacturing of Paper and paper products Manufacturing of Chemical, petroleum, rubber and plastic products Manufacturing of Nonmetallic products Manufacturing of Basic metal products Manufacturing of Fabricated metal products Manufacturing of Products not elsewhere specified Civil construction
3.	Oil and gas exploration, extraction, production and refining and pipeline distribution, including petrochemicals	<ul style="list-style-type: none"> Conventional exploration and production Oil sand and heavy oil upgrading Coal bed methane production Gas processing plants Gas well completion Transportation and distribution Natural gas storage and LNG operations Crude oil transportation Refilling Petrochemical manufacturing Emissions from process vents in oil and gas treatment Process emission (eg: - glycol dehydration, acid gas removal/sulphur recovery, hydrogen production, fluid catalytic cracker (FCC) catalyst regeneration). Venting emission (eg;- vessel loading, tank storage and flashing, and venting of associated gas) Fugitive emissions (e.g leaks from equipment and piping components) Non - routine events (e.g gas releases during planned piped line and equipment maintenance releases from unplanned events)

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	Sector	Examples of included activities
4.	Metals production	Production of processing of ferrous metals Production of Primary and secondary aluminium Production of non-ferrous metals including production of alloys Production of coke Metal ore roasting or sintering including pelletisation Production of pig iron or steel including continuous casting
5.	Mining and mineral production	Production of cement clinker and production of lime or calcinations of dolomite or magnetite Glass and ceramic, mineral wool
6.	Pulp, paper and print	
7.	Chemical Related Process	Production of carbon black Production of ammonia Production of bulk organic chemicals by cracking, reforming, partial or full oxidization or by similar processes Production of hydrogen and synthesis gas by removing or partial oxidation Production of soda ash and sodium bicarbonate Production of nitric acids production of adipic acid production of glyoxal and glyoxylic acid
8.	Carbon capture storage	Capture and transport of GHG by pipelines for geological storage Geological storage of GHG in a storage site
9.	Transport	Aviation Other transportation
10.	Waste handling and disposal	water and waste water treatment Landfill and Composting Facilities
11.	Agriculture, Forestry and Other Land Use	
12.	General	Building Services/ Facilities Management Education Hospital Other

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1.2 Project Level Validation and Verification (ISO 14064-2)

	Sector	Examples of included activities
1.	Energy industries (renewable/non-renewable sources)	Thermal energy generation from fossil fuels and biomass including thermal electricity from solar Energy generation from renewable energy sources
2.	Energy distribution	Electricity distribution Heat distribution
3.	Energy demand	Energy Demand
4.	Manufacturing industries	Cement sector Aluminium Iron and steel Refinery
5.	Chemical industry	Chemical process industries
6.	Construction	Construction
7.	Transport	Transport
8.	Mining/mineral production	Mining and mineral process excluding oil and gas industry, coal mine methane recovery and use Oil and gas industry, coal mine methane recovery and use
9.	Metal production	Metal production
10.	Fugitive emissions from fuels (solid, oil and gas)	Mining and mineral process excluding oil and gas industry, coal mine methane recovery and use Oil and gas industry, coal mine methane recovery and use
11.	Fugitive emissions from production and consumption of halocarbons and Sulphur Hexafluoride	Chemical processing industries GHG capture and destruction
12.	Solvents use	Chemical process industries
13.	Waste handling and disposal	Waste handling and disposal Animal waste management
14.	Afforestation and reforestation	
15.	Agriculture	Agriculture
16.	Carbon Capture and Storage of CO ₂ in Geological Formation	Carbon capture and storage of CO ₂ in geological formation

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