#### Information & Instructions for completing an Application Form

- 1. The applicant laboratory shall undertake to carry out its testing activities in such a way as to meet the requirement of ISO 15189:2012, NABL specific criteria, other relevant requirements of NABL and the regulatory authorities, as applicable at all times.
- 2. Applicant laboratories are advised to ensure that the latest versions of NABL documents are available with them.
- The application fee and other necessary charges related to accreditation process is given in NABL document NABL 100 'General Information Brochure' under NABL Finance and NABL Fee Structure'. NABL 100 is available on NABL website.
- 4. Laboratories are advised to familiarize themselves with NABL 100 'General Information Brochure', NABL 201 'Procedure for dealing with Changes in Accredited Conformity Assessment Body's Operations', NABL 216 'Procedures for Dealing with Adverse Decisions' and NABL 131 'Terms and Conditions for Obtaining and Maintaining Accreditation' before filling up this form.
- 5. The applicant laboratory shall provide photocopy of appropriate document(s) in support of the legal status claimed (eg. Registration Certificate under Indian companies Act, Limited Liability Act, Partnership Act, Registration of Business as Sole Proprietor, Indian trust Act, Societies Registration Act, Any Government notification in support of establishment of institution/ laboratory or any approval from local or regulatory bodies etc.) The name of the organization / laboratory shall not be different from the name given in the proof of legal identity certificate. If it is different, valid reasons for the same shall be furnished.
- 6. The applicant laboratory shall intimate NABL about any change in the information provided in this application such as scope applied for accreditation, personnel, and location etc. within 15 days from the date of changes.
- 7. NABL expects applicant laboratories that are to be accredited to follow the test methods as mentioned in the current National or International standards and as stipulated by regulatory bodies. Where such methods do not exist, other validated methods are acceptable. In case laboratory uses in-house validated methods the validation data should be submitted along with the application.
- 8. The applicant laboratory must participate satisfactorily in the Proficiency Testing program / EQAS conducted by APLAC or NABL any other national or international accredited/ recognized PT provider. For participation in PT, refer NABL document NABL 163.
- 9. The laboratory shall also inform NABL in advance about any reservation regarding appointment of Lead Assessor/Assessor for the assessment.
- 10. The applicant laboratory shall be given due notice of any intended changes relating to NABL accreditation criteria and will also be given such time, as in the opinion of NABL is reasonable to carry out the necessary adjustments to its procedure(s). The laboratory shall inform NABL when such adjustments have been completed.
- 11. The application must be filled up carefully to provide required information in such a manner that further correspondence for seeking clarifications are not required. Particularly the scope of accreditation shall be complete to indicate unambiguously:

- a. materials or items tested
- b. specific tests or types of tests performed
- c. specification, standard (method) or technique used
- d. range of testing/ limit of detection for each test (as applicable)
- e. % CV (or) uncertainty of measurement (MU) for each test (wherever applicable) at a confidence probability of 95%.
- 12. The laboratory locations, tests, which the laboratory intends to cover, vide NABL accreditation must be listed clearly. The tests those are performed at site should be clearly identified in the scope of accreditation.

Note: Multilocation laboratory: A laboratory with more than one location in the same city with same legal identity and with overlapping scopes in different locations. The details of each location shall be explicitly mentioned in application form. In events where the laboratory operates from different city/ state, each laboratory shall apply separately for accreditation except those cases where safety or regulatory requirements are there for operation of the laboratory. In such cases, the laboratory shall provide the proper justification.

- 13. The laboratory shall offer the NABL or its representative cooperation in:
  - a. undertaking any check to verify testing capability of the laboratory.
  - b. the laboratory shall unambiguously provide names of all authorized signatories who are responsible for authenticity and issue of test certificates and reports.
  - c. offering access to relevant areas of the laboratory including primary sample collection centres for witnessing the activity being performed.
  - d. examination of all relevant documentation and records.
  - e. interaction with all relevant personnel.
- 14. The laboratory shall discharge all non-conformities raised during the assessment within the stipulated time. The same shall be verified to the satisfaction of NABL. The final decision on accreditation shall rest with NABL.
- 15. The application shall be kept confidential by NABL and information obtained during the processing of application, assessment visit and grant of accreditation shall be safeguarded and dealt with impartiality *until required by Law*. The procedure for processing of application for accreditation is given in NABL 100.

# <u>User</u> Manual

National Accreditation Board for Testing and Calibration Laboratories (NABL)

> **Type of Application: Medical**

> > Creation Date: 16<sup>th</sup> Dec, 2017 Last Updating Date: 29<sup>th</sup> Jan, 2018 Version: 1.3

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  - Quality Control Activity
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## 1. Registration of CAB:

Open the URL <u>http://nablwp.qci.org.in/Account/Register</u>. It opens registration form for different types of users.

NABL Home At	out 👻 Contact Us		Register Log in
Register. Create a new account.			
Type of CAB*	Select CAB Type	Y	
Name of CAB*			
Address Line 1*			
Address Line 2			
Country*	India	Ý	
State*	Select State	¥	
City*	Select City	¥	
Pin*			
Contact Person*	Dr. V		
Contact Person Mobile*	+91 10 digits		
Contact Person Email*		Send OTP (one time password)	
Please Enter mobile no. and E	mail-ID carefully. You will get different O	P on mobile and Email for verification.	
	Register		

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For Type of CAB, there are five types of CAB, select Medical. Enter all the details with valid mobile number and email id.

You will get OTP on your mobile number and email id. You have to validate your mobile number and email id using OTP.

Google Gmail -	11 N			ations for Gmail. Learn more H		
Starreit Sent Mal	to ntë ( Deariti	<b>ğışmail.com<u>via</u> senderid.net</b> T İanpreet Kaur.Dhaliwat, TP.hor Emxil Veribcation on NABL is-	20465.		sti išt Ateţisminus	ss ago) 📩 🗼
	Fromiß		900 ( 1940) -		 	
	0.15 GB (1%) of 1	is GB vised		Terra Privity.	 Lesi	pocounterchity: do f.milioute Distable
						- Acquiring

After entering OTP, Your Mobile number and Email ID will be validated and thereafter registration can be done.

After successful registration, you will receive Username and password on your email id.

Google Gmail Rosecce Indox Starred Sant Mail Drafs More v Mare v		k here to enable desktop notifications for Gmail. Learn		
No investmentation	A contraction of the second se			
Statta new One	0,16 GB (1%) of 15 GB used Manaza	Jama - Erivacu	Last account activity: 0 minutes is / Deba	go

# 2. Login by CAB:

Open the URL <u>http://nablwp.qci.org.in/Account/Login</u>. It will redirect you to login form.

NABL Home About - Contact Us	Register Log in
Log in.	
Enter your account details to log in.	
User name	
Password	
Log in	
Forgot Password	
Register if you don't have an account.	

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Enter the credentials you receive in your email id.

After submitting the credentials you will be redirected to change password screen.

It is mandatory for first time user to change the password.

		Hello, nabl000001! Log Out
Change Password		
Current password		
New password		
Confirm new password	Change password	
© 2017 - National Accreditation	Board for Testing and Calibration Laboratories (NABL)	

New Password should have minimum 8 characters with at least one special character, one number, one uppercase letter and one lowercase letter.

After changing password, it opens a new page with button Create New Application.

NABL Home About + Contact Us	Hello, nabi0000011 Log Out
Welcome to NABL Portal.	
Create New Application	
© 2017 - National Accreditation Board for Testing and Calibration Laboratories (NABL)	
Click on create new application, it shows Select any one.	the options "Applying for".
	the options "Applying for".
Select any one.	
Select any one.	
Select any one.	
NABL       Home       About C       Contact Us         Welcome to NABL Portal.         Create New Application         Applying For:	

Laboratory Details:

After submitting the option, you will be redirected to Laboratory details page.

Laboratory Details	Discipline Details	Scope Of Acc	reditation	Organization	Equipment
Reference Materials	Quality Control Activity	Enclosur	e List		
		Labor	atory Details		
Note : Indicate name of the	Name of the Laborat Laboratory will be appear on the Certi	WILDIC	AL		
	Type of Labora	Select	Type of CAB		
	G	STIN			
	Cou	ntry * India			
	Si	tate * Punjab			
		City * Balacha	aur		
	Add	ress* CHAN	DIGARH		
	Di	District			
	Pin,Co	ode * 89458	9		
	Mobile	e No* +91	Mobile N	10	
	Landlir	ne no STD C	Landline	No.	
	Fax	x No. STD C	Fax No.		
	E-	mail* Email			

#### Medical Laboratory Details

Complete the laboratory details with all the mandatory details. If you want to proceed further, it is necessary to fill laboratory details

first.

For category of facility, it is mandatory to select at least one facility. For legal identity details, select legal identity options available and upload documents.

In Lab details, if you click Yes for "Does accreditation sought for different locations", it will add new tab "Location details" where you can add multiple locations.

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After saving the form, click Next and you will be redirected to new tab.

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Location Details:

In new tab location details, it shows a default location. This is the location which user has added in laboratory details.

User can add more locations by clicking on button "Click here".

Medical	Laboratory	Details
---------	------------	---------

Laboratory Details		ratory Details Location Details		Discipline Details		Scope Of Accreditation		n	Organiza	lion
Equ	ipment	Referenc	e Materials	Quality Control Ac	tivity	Enclo	osure List			
				Location	Details					
			Add Locatio	Click Here	To Add Loca	ation				
Locatior	Details									
sr. No.	Update	Delete	Location Name	Address Line 1	City	District	Pin Code	Contact No	FAX No	E-mail

When user clicks on Click here to add location, it opens a form for adding location.

After adding location, it will be redirected to discipline details page.

#### $\succ$

Discipline details:

For discipline details page, select the Discipline of Medical testing from the dropdown.

#### **Medical Laboratory Details**

Laboratory	Details	Location Details	Discipline	Details	Scope Of Accreditation	Organization	
Equipo	ient-	Reference Materials	Quality Contr	ol Activity	Enclosure List		
			Discip	line Detai	ls securit		
		wischline of Med	lical <sup>¢i</sup> -Selec Back	t Disciplise Save Next			
Discipline	Details						
S.No.	Delete	<b>L</b> ар Туре		Discipline.			
ŧ	- <b>M</b>	Attection		(Unical Riochen	datry:		

Scope of Accreditation:

After adding Discipline Details, you will be redirected to Scope of Accreditation tab.

#### **Medical Laboratory Details**

Laboratory Details	Location Details	Di	scipline Details	Scope Of Accreditation	Organization
Equipment	Reference Materials	Qual	ity Control Activity	Enclosure List	
		ų	Accreditation Detai	S	
	Select Disc	ipline	-Select Discipline-	]	
	Type of Samples Examined/Te	sted	Type of Samples Exa	ntilined	
Sp	eolfic Tests/Examination Performe	ed* 💽	Details of Test(s)		
	Test Performed at* Site	Facility	n	205	
Standard (Method),	Principle / Methodology or s	țandărd			
Range of Testi	ng/ Limits of Detection   Q	ualitative			
	R	lemaiks			
			Add More		

In this form, for location, it shows those values in dropdown which you have added in second tab location details.

For selecting discipline, it shows those disciplines in dropdown which you have added in third tab Discipline Details.

In the Type of Samples examined/ Tested lab to provide the exact material used for testing.

In the Specific tests/ examination performed CAB to provide the Specific test performed in the above material of testing.

In the Standard (method), Principle /Methodology or technique used

– CAB to specify the exact the methodology or Principle.

In the range of testing/ Limit of detection – CAB need to provide the range of testing of the equipment only. In cases of Specialized tests CAB may provide limit of detection

For Qualitative parameters CAB to specify the reporting pattern in the remarks Ex: Positive/ negative, Absent/ Present etc.

In %CV/MU – CAB to provide the highest %CV of last six months up to one place decimal Ex: 2.6, 3.0, 5.2, 15.1 Save the details and click Next.

Note: If you are adding scope of accreditation for all the locations, then you will have to add organization, equipment, reference materials and quality control activity for all locations.

#### **Important Information:**

We understand that filling the scope of accreditation may appear as time consuming but it has been consciously designed in such a manner to overcome the issues related to scope of accreditation. The tests, test methods, Range of testing & MU (wherever applicable) is required to be filled for each parameter as per the designed format. This is also a one-time activity wherein laboratory has to fill the requisite information initially and the information will be pre-fetched in future. The laboratory is required to fill the requisite information correctly and consciously as it an important part of accreditation. The laboratory is held responsible for the information provided in the application irrespective of the person who is filling the information. Any incorrect or insufficient information provided intentionally while filling the requisite information is treated as "Misleading/ Malpractice/ Fraud" and actions as per NABL 216 will be initiated which may also lead to calling off assessment.

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Organization:

To add organization chart, scope of accreditation must be filled initially.

#### **Medical Laboratory Details**

Laboratory Details	Location Details	Discipline Details	Scope Of Accreditation	Organization
Equipment	Reference Materials	Quality Control Activity	Enclosure List	
		Organization		
Organization Structure				
	Organization Chart of lab	Choose File No th	elohipéen	
New Employee Details				
	Em	ployee ClickHere To Add	Employee Details	

In organization form, once you upload the relevant documents, it opens a separate section for filling the employee details.

Fill the employee details as required.

In case of Quality Manager, 4 days training course on "Laboratory

Management system & internal auditing as per ISO 15189:2012" is mandatory and training certificate for the same to be uploaded.

#### Note: While adding employee details, it is mandatory to add details for all employee types and for all locations which have been selected by scope of accreditation.

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Equipment:

After completing the organization details, click on equipment and enter the all details as required.

If CAB is using one equipment for multiple parameters, then it has to tick the boxes in the parameters.

CAB to provide major and minor equipments used in the testing.

UID of equipment: Unique Identification number generated by the

laboratory on its own for each & every equipment individually under scope of accreditation.

If the equipment is calibrated externally, the name of calibration agency along with the location to be specified in the box provided. UID of equipment: Unique Identification number generated by the laboratory on its own for each & every equipment individually under scope of accreditation.

> If the equipment is calibrated externally, the name of calibration agency along with the location to be specified in the box provided. If the equipment is calibrated in-house, the traceability details of the master equipment/ reference standard used for calibration to be specified in the box provided.

Laboratory Details	Location Details	E.	Discipline Details	Scope Of Accreditation	Organization
Equipment	Reference Materials	Qua	Quality Control Activity	Enclosure List	
			Equipment		
	Select Disc	cipline	Select Discipline		
	Select Type o	of Test			
	UID of Equipmer	nt * 📀	UID Of Equipment		
	Name of Equip	ment*	Equipment Name		
	Ser	rial No	Serial No		
	м	odel*	Model		
	. N	/lake *	name of manufacture	r	
	Year of M	Make*	2018		
	Receipt date & date placed in Se	rvice*	Reciept Date		
	Range and Accu	uracy*	Range and Accuracy		
	Calibration	date*	Calibration Date		
	Calibration Du		Due On		
e laboratory to decide the calibration	interval based on NABL 112 & ISO 10012 or IL Calibrat		○Inhouse ○External		
	Guibia	······			
			Back Add more N	lext	

#### **Medical Laboratory Details**

Reference Material:

After completing the equipment details, click on "Next" tab. It opens the form for reference materials.

Laboratory Details	Location Details	D	iscipline Details	Scope Of Accreditation	Organization
Equipment	Reference Materials	Qua	lity Control Activity	Enclosure List	
	Re	ference	Materials/ Referen	ce Standards	
	Select Dis	cipline	Select Discipline		
	Select Type	of Test		]	
Nan	ne of Reference Material/Strain/C	ulture*	Reference Material N	ame	
	S	ource*	Source		
	Date of	Expiry	Date of Expiry		
	Tracea	ability*	Traceability		
		E	ack Save Draft	Vext	

#### **Medical Laboratory Details**

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Quality control Activity:

After completing the details of reference materials, click on "Next"

tab.

It opens the form for quality control activity.

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aboratory Details	Location Details.	D	Iscipline Details	Scope Of Accreditation	Organization
Equipment	Reference Materials		lity Control Activity	Enclosure List	
			Proficiency Testin	Ģ	
	Type of Participa	ion	select		
	Select Discip	ine	-Select Discipline-		
	Details of Teat(s)/ examina	fon			
	Product/Mater	la <b>i</b> *			
	Date of Testing/ examination	un *	Date of Testing		
	Organizing So	d <u>y</u> e	Crojeniating Body		
Performance Ir	1 Terms of Z Score / Any Other Grite	r(a*	Pelfomance		
	Corrective Action Taken (if a	່ດເບັ່	Confettive Action If the		

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Enclosure List:

When whole form is completed, click on enclosure list.

If there is any detail which is missing, then it will be shown under pendency's.

If it meets with all the details, then it will show green tick in front of it under availability column.

Labora	atory Details	Location Details	Discipline Details	Scope Of Accreditation	Organiza	tion
Eģi	ulpment	Reference Materials	Quality Control Activity	Enclosure List	ļ	
			Upload Quality manual I	Document		
		Upload Quality	manual Choose File No fi	ile (choșten)		
			Ápplication Form- Chi	eck List		
1.1.1.1	tion Check List		tion -		Availability	Pendencies
S No.	Information / de	t etails provided as part of applica entity (Registration Details of the La			Availability	Pendencies
S No.	Information / de	etails provided as part of applica	éxpratory).		0	Pendencies
<b>S No.</b> 1. 2	Information / de Cosy of Legal Ida Scope of Accession	etails provided as part of applica entity (Registration Details of the La	bonatory). Teeting and MU		<b>0</b>	Pendencies
<b>S No.</b> 1. 2.	Information / de Cosy of Legal Ids Scope of Accedu	etails provided as part of applica eptity (Registration Details of the La Kation with Test Methods, Range of	bonatory). Teeting and MU			
S No 1. 2. 8:	Information / de Cosy of Legal Ids Scope of Accedu	etails provided as part of applica entity (Begistration Details of the Le Kation with Test Methods, Range of Management with Designation and proposed Authorized Signatories	bonatory). Teeting and MU			
5 No. 1. 2 4 5	Information / de Copy of Legal Ids Scope of Accred Datails of Senior List of Staff and Organization Cha	etails provided as part of applica entity (Begistration Details of the Le Nation with Test Methods, Range of Management with Designation and proposed Authorized Signatories	Bonetory). (Teeting and MD Contact Details			
5 No. 1. 2. 3: 4: 5:	Information / de Cosy of Legal Ids Scope of Accred Datails of Sesion List of Staff and Organization Cha List of Equipmen	etails provided as part of applica entity (Registration Details of the La Kation with Test Methods, Range of Management with Designation and proposed Authorized Signatories wit Epicloped	Bonetory). (Teeting and MD Contact Details			© ©
Applica \$ No. 1. 2 3 4 5 5 5 8 8 8	Information // de Cosy of Legal Ids Scope of Acced Datails of Sesion List of Staff, and Organization Cha List of Staff, and Datails of Duality	etails provided as part of applica entity (Registration Details of the La Kation with Test Methods, Range of Management with Deelgnation and proposed Authorized Signatories wit Epicloped ts / Belfejence Material used with d	Bonetory). (Teeting and MD Contact Details			Ō

To add the details which are pending, click on icon under pendency, it opens a pop up.

Applic	ation Check List			
S No.	Information / details provide	d as part of application	Availability.	Petidenc
'n	Copy of Eaglal Identity (Riegistics	for (jetails of the Laboratory)	0	
2	Scope of Accreditation with Te	st Methods, Range of Testing and Mil		O
8	Details of Schior M	Pondencies	Close	©
-4-	Year of cheft and the	NO Sugar britrided vitin Tiel, Nethadas, Banger O'Telaho, and MO. Capacitoria	,	<b>O</b>
8	Qığanilçatları çhart			
6	List of Equipments			
7	Details of Duality Sontool Activ	ty/Pin/tijclinition	0	
8	Dates of Internal Audit and Mar	agement Review	0	
v	in Qirts:file Uploaded			

It opens a pop window with click here button, Click on that button and complete the pending points.

> When whole form is complete, it will show green tick in front of it and declaration form will be visible with Terms and conditions.

#### **Medical Laboratory Details**

Laboratory Details	Location Details	Discipline Details	Scope Of Accreditation	Organization
Equipment	Reference Materials	Quality Control Activity	Enclosure List	Declaration
		Obtaining and Maintaining	NABL Accreditation (NABL	131)
			ncy Testing Providers PTP / Refere	ice Material Producers RMP) that are :
			/ PTP / RMP lactivities in such a way licable, relevant NABL specific criter	as to meet the requirement's of ISO//E is and other policies of NABL.
2. The CAB shall have a vali	d legal identity.			
3. The CAB shall meet the n	équirements of régulators in rele	vant field.		
4. The CAB shall identify an	d define various activities which	they are involved in, and ensure th	at it does not lead to any potential or	inflict of Interest.
<ul> <li>A second s</li></ul>	uate qualified and trained manpo each field / discipline of accred		BL approved authorized signatory w	ho meets the requirements of relevant
reputed training Institute.	• When the second se	ager shall preferably undergo eithe	36	89:2012 whichever is relevant from a 010 / 190 Guide 34:2009 or at least 4 d
to gaining accreditation a		for all groups included in the accre		iméter / type of test per discipline prior st önce every four years. Requirements
	npleted application for renewal o BL to maintain continuity in acc	the second se	the expiry of accreditation and also	agree to undergo assessment as per th
9. The CAB shall offer coop	eration to NABL or its represents	ttive in:		
<ul> <li>Undergoing assess</li> </ul>	sments in stipulated time inferva	Is / whenever NABL considered it a	as required.	
Access to all CAB	areas of operations including sul	contractor premises; wherever rel	evant and applicable.	
<ul> <li>Undertaking any cl</li> </ul>	neck / inspection to verify the ca	pability of the CAB for the applied ,	accredited scope.	
<ul> <li>Witnessing the act</li> </ul>	Wities being performed relevant	to accreditation.		
<ul> <li>Assessing the con</li> </ul>	ipetence of the staff (including s	taff working in shift operations / a	(site) during assessment:	
<ul> <li>Access to all televi</li> </ul>	ant information and documentat	lóh.		
<ul> <li>Access to those do</li> </ul>	cuments that provide insight int	o the level of independence and in	ipartiality to the CAB from its related	bödjes, if applicable.
<ul> <li>Access to all record</li> </ul>	ds pertaining to relevant person	hel <sub>c</sub>		
<ul> <li>Providing names of</li> </ul>	f all authorized signatories who	are responsible for authenticity an	Lissue of test / calibration / PTP / R	MP reports.
<ul> <li>investigating any c</li> </ul>	omplaints against the CAB.			
There i	s also preview	report button.	Clicking on that	button shows

Download PDF	
Medical Pre	view Report
Lab General Details	
Details	Data Feeded by Lab
Name of the Laboratory	Stedical,
Type of Laboratory	Public
ĞSTİN	
Country	India
State/Province	Punjab
City	Balachaur
Lindine -	÷
Does the laboratary operate from different locations having same legal identity within the city	Nex
Does accreditation sought for different locations?	Nes
Are you from SEZ region(Special economic zone)	No
Whether any individual of organization has provided, consultancy for preparing towards NABL Accreditation.	No.
Whether any adverse action has been initiated taken by NABL against the laboratory in the past years.	30

After completing all the information/ previewing the application Click

"submit". It will ask password for submission of application. Once the password entered by the user the application will be finally submitted. After final submission, it shows View report button. Clicking on it opens the preview from where you can download the form also.

Download PDF	
Medical Pre	view Report
Lab General Details	
Details	Data Feeded by Lab
Name of the Laboratory	MEDICAL
Type of Laboratory	Public
GSTIN	
Country	India
State/Province	Punjab
City	Balachaur
Landline	2
Does the Jaboratary operate from different locations having same legal identity within the city	Yes
Does accreditation sought for different locations?	Yes
Are you from SE2 region(Special economic zone)	No
Whether any individual or organization has provided consultancy for preparing- towards NABL-Accreditation	No
Whether any adverse action has been initiated taken by NABL against the laboratory in the past years.	Ne

Payment Process:

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At the bottom of Terms and conditions it shows Proceed to payment option.

	Home Hello, nabi0000251 Log 0
	Conformity Assessment Body.
8	3. We shall comply with all national, regional and local regulatory requirements for operating a laboratory.
4	<ol> <li>We agree to comply with accreditation procedures and pay all costs for pre-assessment, assessment, verification visit (if any), surveillance and reassessment irrespective of the result.</li> </ol>
5	5. We agree to co-operate with the assessment team appointed by NABL for examination of all relevant documents by them and their visits to those parts of the laboratory that are part of the scope of accreditation.
6	6. The information provided herein with reference to the consultancy provided to us and also in respect of any adverse decision, taken by NABL or by any other Accreditation Body is true to the best of our knowledge and believe and nothing has been concealed.
7	7. All other information provided in this application is true and nothing has been concealed.
8	8. For any payment which has not been made in response to the bills raised by NABL, we are liable for adverse action which may be initiated by NABL as specified in NABL 216.
ç	9. If any information is found to be false or has been concealed wilfully, we are liable for any lawful action which may be initiated by NABL as deemed fit.
10	0. For any payment which has not been made in response to the bills raised by NABL, we are liable for adverse action as specified in NABL 216
	1. If any information is found to be false or has been concealed wilfully, we are liable for any lawful action as deemed fit.

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### After clicking on Proceed to payment, it shows the payment details.

Home	
Payment D	etails.
Application Fee Pa	iyment
Total Amount:	Rs 11000
Tax (18 %):	Rs 1980
Amount To Pay:	Rs 12980

After clicking on proceed, it will redirect to the CC payment gateway.

LAB TEST

			English
Billing Information		ORDER DET	AILS
LAB TEST		Order #:	18012911112364
Address.		Coupon Code	Apply
Zip Code	City	Order Amount	12980.00
State	Select Country	v Total Amount	INR 12980.00
Mobile Number	Email		
Notes (Optional)		CHECK	<b>ĸ</b> OUT
My Billing and Shipping address are different Payment Information		Enter Usernam Enter Passwor	
Credit Card > Card Number		Forgot Passwo	ard2
Debit Cards	inter Kir	📰 😄 VISA	Login
	Click Stell of Protection		
Mobile Payments INR 12980.00	(Total Amount Payable)		
Paytm Make Payment	Cancel		
Wallet			
UPI			

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On Payment gateway, user can select any type of card or can pay via different payment options like Pay tm, Wallet, etc.

After making payment, the application will be redirected to the declaration of the form.

At the bottom, it shows submit button. Click on submit button and it will ask for password.

	Home	Hello, nabi000056 !	Log Out
	Conflormity Assessment Body.		
	6. We shall comply with all national, regional and local regulatory requirements for operating a laboratory.		
	<ol> <li>We agree to comply with accreditation procedures and pay all costs for pre-assessment, assessment, vertication visit(if any), auveilant irrespective of the result.</li> </ol>	e and reassessment	
	3. We agree to go operate with the assessment team appointed by NABL for examination of all relevant documents by them and their visits shat are part of the acape of accreditation.	to those parts of the	İsboratory
	6. The information provide therein with reference to the consultancy posided to us and also in respects of any advected ecision, taken by N/A Acceditation Body lachue to the best of our knowledge and believe and nothing basilises concealed.	kBL, or by any other	
	7. All other Information provided in this application is true and holdling has been concealed.		
	<ol> <li>For any payment which has not been made in response to the bills raised by NABL, we are liable for adverse action which may be initiated 216.</li> </ol>	Hby NABL as specifier	d in NABL
	9. If any Information is found to be false or has been concealed wilfully, we are liable for any lawful action which may be initiated by NABL a	is deemed fit.	
	10. For any payment which has not been made in response to the bills raised by NABL, we are liable for adverse action as specified in NABL.	296	
:	11. If any information is found to be false or has been concelled willing, we are trable for any lawful action as deemed fit.		
	Submit View Preview Report		

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Once correct password is inputted, the application is submitted successfully.

General Note:

Click on "Save draft" option given at all places to remain in the same tab which enables the user to fill the complete details in the respective tab at the same time. For eg: In case of equipment, fill the details on one equipment as required. Now, if the details of second

equipment needs to be filled, then click on "Save draft" option to continue filling the details of second equipment and so on.

Click on "Next" option given at all the places enables the user to go

to another tab. The user is required to click on "Next" tab after completing all the required details in that particular section.