

OMB Number: 0693-0015
Approval Expires: 12/31/2009

**U.S. DEPARTMENT OF COMMERCE
NATIONAL INSTITUTE OF STANDARDS AND TECHNOLOGY**

FASTENER QUALITY ACT

Notwithstanding any other provision of the Act, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection-of-information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid Office of Management and Budget (OMB) Control Number.

The reason for collecting this information is to seek information from persons self-declaring that they meet the requirements of ISO/IEC 17011 for laboratory accreditors and for quality system registrar accreditors. An organization having made such an affirmation to NIST may accredit either fastener testing laboratories or quality system registrars for fastener manufacturers in accordance with the applicable provisions of the Fastener Quality Act. No confidentiality for the information submitted is promised or provided.

The public reporting burden per respondent for the collection of information contained in this rule is estimated to average 1.5 hours. This estimate includes the time for reviewing instructions, searching existing information, gathering and maintaining the information needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503; and to National Institute of Standards and Technology, 100 Bureau Dr. Mail Stop 2150, Gaithersburg, MD 20899-2150.

This information can be placed on the information declaration, in the instructions for a collection, or in a cover letter or memo that accompanies the collection of information. We usually recommend the information declaration itself but you may feel otherwise.

INFORMATION DECLARATION INSTRUCTIONS

1. Print or type all information. If more space is needed for a response use additional sheets and reference the question being answered.
2. Respond to all applicable questions fully. If not applicable write N/A.
3. Any provided information that is considered proprietary or confidential should be clearly indicated as such.
4. All information must be completed in English.

5. **Send all completed information declarations to:**

FQA Document Certification
National Institute of Standards and Technology
100 Bureau Drive, Mail Stop 2600
Gaithersburg, MD 20899-2600

For assistance call 301-975-4019 or Fax 301-975-4715

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INFORMATION DECLARATION

FOR A QUALITY SYSTEM REGISTRAR ACCREDITATION PROGRAM

UNDER THE FASTENER QUALITY ACT

1. Legal Name of Accreditation Body:

2. Authorized Representative:

The Authorized Representative is the person who assumes all responsibility to commit the organization to the terms of the agreement with NIST. This person will be NIST's point of contact with the organization. All correspondence with the organization will be addressed to this person.

Printed Name _____

Title _____

Address _____

Street _____

(Mailstop, P.O.) _____

City _____ State _____ Zip _____

Country _____

Telephone _____ FAX _____

3. Will all accreditation activities be conducted at the above address?

Yes _____ at another location(s)? _____

Please describe and give location of all sites to be included.

Registrar Accreditation Body

Declaration:

As the Authorized Representative of the organization, by signing this document, I hereby declare and commit to the following:

I have read the provisions of the Fastener Quality Act, as amended by P.L. 106-34 and fully understand the requirements and the responsibilities imposed upon this organization.

I affirm that this organization fully meets the requirements of ISO/IEC 17011 (or another document approved by the Director¹) and shall continue to meet such requirements. I will notify the NIST Director if and when this organization no longer meets such requirements.

I understand that neither the accreditation body nor any accredited registrar, nor any registered facility, nor any other person or organization may state or imply any product approval, certification or other type of recognition by NIST or the U.S. Government solely because a fastener product was produced by any entity registered by an organization accredited by this organization.

I will ensure that this organization informs all registrars that it accredits and requires registrars to inform their registered facilities of their responsibilities under the Fastener Quality Act.

I will ensure that the organization does not state or imply in any way that it, or registrars which it accredits, has(ve) NIST approval/recognition.

Authorized Representative:

Signature

Date

Title

¹If applicable please provide:

Title of Document :

Date of Approval by Director: