

# ANSI GHG Accreditation Milestones

V/VB files preliminary application

V/VB submits full application

V/VB undergoes witness and onsite assessments

corrective action and ETG/committee review

Accreditation

Applicant organizations must submit preliminary documentation of the following:

- 1 – Confirmation of third-party status
- 2 – Description of Legal Status of applicant
- 3 – Proof of publically available documents describing the validation/verification program
- 4 – Description of the applicant organization's management system and verification procedures
- 5 – Description of the applicant organization's validation/verification program and identification of GHG programs in which it participates or plans to participate
- 6 – Proof of ownership of mark, when applicable

Once accepted as a preliminary applicant the organization submits full application with clearly defined scope of accreditation

Applications are reviewed by ANSI staff for completeness

ANSI assigns a Lead Assessor and Technical Expert Team to review documentation

ANSI will:

- 1 – Ask for additional documentation or clarification on the documentation submitted
- 2 – Suggest a preliminary visit to identify deficiencies at the applicant's request
- 3 – Proceed with planning witness and onsite assessments

ANSI Assessment Team and VVB coordinate onsite and witness assessment visits

**Note: Duration of witness activities are dependent on scope of accreditation sought**

ANSI Assessment team issues report and citations into ANSICA in order for the applicant to post corrective action

VVB Submits Corrective Action for Assessor and ETG (Evaluation Task Group) Review

Assessors review corrective action and either:  
A – request additional action  
B – close nonconformances

Assessors and ETG hold a meeting to discuss the results of the assessment and corrective actions. The ETG either:  
A – requests additional information or action  
B – accepts report and recommends accreditation to the full committee

Committee meets and either:  
A – accepts recommendation of ETG and votes to accredit the applicant  
B – does not accept recommendation of ETG and requests additional action

Accreditation is granted and accredited organization enters into annual surveillance and reassessment cycle

**Current Reassessment and surveillance schedule:**  
Surveillance occurs each year at the date of initial accreditation  
Reassessment occurs every two years and includes a full onsite assessment of accredited body operations