



Perry Johnson Registrars, Inc.

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# Suspension or Withdrawal of Registration Certificates

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Third-party certification demands adherence to a rigorous standard or specification. In order for PJR certification to maintain its high degree of credibility and customer acceptance, there must be an effective enforcement mechanism for dealing with unauthorized actions. This procedure describes a method whereby alleged offenders are treated fairly, while at the same time protecting the viability of third-party certification.

## SUSPENSION OR WITHDRAWAL OF REGISTRATION CERTIFICATES

### 1 General

- 1.1 Purpose: Defines the procedure for suspending and/or withdrawing registration certificates.
- 1.2 Scope: Covers all PJR registration activities.

### 2 Related Procedures, Definitions, Exhibits

- 2.1 ISO/IEC 17021, latest revision
- 2.2 PJR-1 Quality Manual
- 2.3 PJR-0 By-Laws, Article 8
- 2.4 PRO-10 Dispute Procedure
- 2.5 PRO-1 Registration Procedure
- 2.6 R2 Code of Practices
- 2.7 AS9104/1, latest revision
- 2.8 ISO/IEC TS 27006-2

### 3 Responsibilities

- 3.1 The Programs & Accreditations Manager (PAM) and/or designee is responsible for ensuring this procedure is implemented effectively. The Front Office Supervisor is responsible for sending warning, suspension and withdrawal letters and notifying applicable sector-specific database owners of certification status changes.

### 4 Prohibited Acts

- 4.1 Prohibited acts include, but are not limited to, violations of F-3tc Terms and Conditions, falsification, fraud, failure to submit timely and acceptable corrective actions, failure to schedule required audits, serious valid complaints from interested parties and other situations as determined solely by PJR Program Management. Some industry sectors document additional requirements violations of which warrant a change in the certification status. These additional requirements are covered in this procedure.

#### 4.2 Prohibited Acts Specific to R2V3

The CB shall consider suspension of an R2 Facility's certification for contractual, administrative or performance reasons. This suspension review of the R2 Facility shall be documented and maintained in the R2 Facility's certification documents. Justification for not suspending based on stipulated criteria must be documented. The following criteria shall be used for initiation of a potential suspension:

- 4.2.1 Illegal imports or exports
- 4.2.2 Repeat NCs
- 4.2.3 Five or more major NCRs on an audit
- 4.2.3 Alteration and misrepresentation of the description of types and status of equipment and/or materials to mislead Auditors or downstream suppliers
- 4.2.4 Conviction or settlement of regulatory actions against the company due to egregious environmental, health or safety violations
- 4.2.5 Hiding or omitting transactions, equipment, materials, or any other form of deception to the Auditor, CB, and/or SERI
- 4.2.6 Selling untested equipment to end users
- 4.2.7 Misrepresentation of the R2 Certification and status of any Facility affiliated with the organization
- 4.2.7 Failure to provide correction and/or corrective actions for SERI complaints
- 4.2.8 Failure to maintain necessary and valid QEHS (as applicable) certificates
- 4.2.9 Failure to schedule an annual surveillance audit
- 4.2.9 Failure to pay the SERI license fee and/or maintain a valid SERI License
- 4.2.10 Facility closure, discontinuation of R2 scope activities, or relocation of an R2 scope activity(ies)/process(es) or operations to an address not listed on the R2 certificate
- 4.2.11 Failure to conduct an audit for facility moves, name changes or scheme changes within 60 days of the effective date of the change

## 5 Failure to Submit Acceptable Corrective Actions

### 5.1 For all PJR audits (other than R2v3, FSSC and aerospace audits)

- 5.1.1 Clients must submit acceptable corrective actions to auditor by day 60 of the last day of the audit. If the Lead Auditor has not received acceptable corrective actions and submitted them to the Audit Support Assistant (ASA) by day 75 from the last day of the audit, the ASA will elevate the issue by logging the “75 days past due” event in PJView.
- 5.1.2 A designee of the Programs & Accreditations Manager will send a warning e-mail to the client. This warning e-mail will give the client thirty days to submit acceptable corrective action responses. The e-mail will warn the client that failure to submit acceptable corrective action responses will result in a certificate suspension.
- 5.1.3 If acceptable corrective actions have not been received on or around day 105 after the audit, then a designee of the Programs & Accreditations Manager will suspend the client’s certificate. The client will be notified of this suspension via a suspension letter. The letter will inform the client that failure to submit acceptable corrective action responses in 30 days will result in withdrawal of their certificate.
- 5.1.4 If acceptable corrective actions are still not received on or around day 135 after the audit, then the client’s certificate is withdrawn. The client is notified of certificate withdrawal via letter.
- 5.1.5 Stage II audits: If PJR is unable to verify the implementation of correction action for any major nonconformity (or accept the corrective action plan for any minor nonconformity) within 6 months of the last day of the audit, the client will be required to repeat Stage II.
- 5.1.6 Re-certification audits: If PJR is unable to verify the implementation of corrective action for any major nonconformity (or accept the corrective action plan for any minor nonconformity) within 6 months of the certificate expiration date, the client will be required to repeat Stage II.
- 5.1.7 Only the Programs & Accreditations Manager or other sector-specific Program Manager is able to approve deviations to this process. Note: No deviations are allowed relative to the six-month rule described in 5.1.5 and 5.1.6. The Programs & Accreditations Manager reserves the right to suspend a client immediately and not extend the 30 day grace period, which is granted by the warning letter.

### 5.2 For PJR aerospace audits

- 5.2.1 Clients must submit acceptable corrective action plans to auditor by day 30 of the last day of the audit. If the Lead Auditor has not received acceptable corrective action plans by this deadline, he/she will notify the ASA. The ASA will notify the Programs & Accreditation Liaison, who will then send a suspension letter to the client updated the OASIS database. (Note: PJR’s Aerospace Technical Committee has the authority to exercise discretion in suspending clients in this situation).
- 5.2.2 The ASA must receive evidence of containment/correction for all nonconformities from the Lead Auditor 60 days after the last day of the audit. If this evidence is not received, the ASA will notify the Aerospace Program Manager. The Aerospace Program Manager will determine if the client should be suspended. When a suspension decision is made, the Aerospace Program Manager will notify the Programs & Accreditation Liaison to send the aerospace suspension letter that is specific to failure to re-establish conformance within 60 days. The organization must submit evidence that proves they have re-established conformance within 30 days of the date of the letter. If acceptable evidence is not received, then the organization’s certificate is withdrawn. The Programs & Accreditation Liaison also suspends the client in the OASIS database.
- 5.2.3 The organization must still submit evidence of acceptable corrective actions (root cause and corrective action) in accordance with section 5.1 above.
- 5.2.4 If, for any reason, PJR will not be able to issue a new aerospace certificate prior to expiry of the existing one, then the existing certificate must be withdrawn the day before it expires.

### 5.3 For FSSC 22000

- 5.3.1 The following four (4) criteria apply;
  - a) The CB shall suspend a certification when there is evidence that their client is either unable or unwilling to establish and maintain conformity with Scheme requirements within

the time frames applicable to the clearance of major nonconformities (see Annex III for applicable timeframes).

b) The CB shall withdraw a certification when there is evidence that their client is either unable or unwilling to establish and maintain conformity with Scheme requirements, within the timeframes applicable to the clearance of critical nonconformities (see Annex III for applicable timeframes).

c) When the CB has evidence that their client holds a certificate whose scope exceeds their capability or capacity to meet, the CB shall reduce the certification scope accordingly.

d) For FSSC 22000 certification, when an annual surveillance audit was not performed due to significant incident such as disaster and pandemic, certification shall be suspended (however, when FSSC Foundation approves the incident as an exception, certification is not suspended).

e) If the certified organization refuses to participate in the unannounced audit, the certificate shall be suspended immediately within 3 working days of the date of refusal. The CB shall withdraw the certificate if the unannounced audit is not conducted within a six-month timeframe from the date refusal of suspension.

5.3.2 Examples include:

a) The organization's certified management system has persistently or seriously failed to meet the Scheme requirements, including requirements for the effectiveness of the management system.

b) Immediate risk to the safety of the product impacting consumer health.

c) The certified organization does not allow surveillance or recertification audits to be conducted at the required frequencies.

d) The certified organization has voluntarily requested a suspension.

5.3.3 Action upon suspension, withdrawal and scope reduction

5.3.4 In case of withdrawal or suspension, the organizations' management system certification is invalid. The CB shall:

a) immediately change the status of the certified organization in the FSSC 22000 database and its own Register of Certified Organizations and shall take any other measures it deems appropriate;

b) inform the organization in writing of the withdrawal or suspension decision within three (3) days after the decision was made and confirm the decision;

c) instruct the organization to take appropriate steps in order to inform its clients through various forms of communication such as advertising and product labelling where applicable.

5.3.5 In case of scope reduction the organizations' management system certification is invalid beyond the revised certification scope statement. The CB shall:

a) immediately change the scope of the certified organization in the FSSC 22000 database and its own Register of Certified Organizations and shall take any other measures it deems appropriate.

b) inform the organization in writing of the scope change within three (3) days after the last day of the audit or any other intervention and confirm the decision.

c) instruct the organization to take appropriate steps in order to inform its clients through various forms of communication such as advertising and product labelling where applicable.

5.4 For R2V3

5.4.1 The CB has 60 days from issuance to accept a documented plan for correction, root cause, and corrective action, for all NC's, majors and minors, except from Stage 1 and 2 audits. If the organization is unable to submit acceptable responses to the CB within 60 days, the organization's certificate shall be suspended.

5.4.2 Evidence of correction of all NC's, majors and minors, issued at any certification body audit except from Stage 1 and 2 audits must be submitted to the CB within 60 days from issuance. If the organization is unable to submit evidence of corrections within 60 days of issuance of NC's the organization's certificate shall be suspended.

5.4.3 The CB has 90 days to verify the implementation and effectiveness of the CA from the date of issuance except from Stage 1 and 2 audits. If the CA are not effective the R2 facility's certificate shall be suspended.

- 5.4.4 A revisit is to be conducted for all NC's, majors or minors, except from those audit types listed below, during which verification of CA implementation and effectiveness is to be verified, prior to audit package approval or certification decision. The revisit can be on-site or virtual.
  - 5.4.4.1 Note: Revisits are not required for Stage 1 NCs, special audit NCs, or NCs issued outside of the annual audit process; it is at the auditor/CB's discretion.
  - 5.4.4.2 Special audit NCs must be closed within 6 months of the end of the audit.
  - 5.4.4.3 NCs issued outside of the normal audit process must be closed within 90 days of issuance.
  - 5.4.4.4 A deadline for Stage 1 and 2 NCs is not stipulated, however, a certificate must be issued within 8 months of the end of the Stage 1.
  - 5.4.4.5 Revisits are required within 6 months of the end of a Surveillance or Recertification audit. Failure to complete the revisit as required will result in certificate suspension.

#### 5.5 For ISO/IEC 27701 (PIMS)

- 5.5.1 PJR must suspend, withdraw or reduce the scope of certification of ISO/IEC 27701 where its base ISO/IEC 27001 certificate is suspended, withdrawn or its scope (which includes the scope of ISO/IEC 27701 certification) is reduced.

### 6 Failure to Schedule

#### 6.1 Failure to Schedule all PJR audits, excluding the ANS1 after the Stage 2 Certification Decision

- 6.1.1 If an organization has not scheduled their audit by the required due date, the Scheduler will send the Notification of Failure to Comply form (F-157) to Customer Service, the Front Office Supervisor, and Sales Representative on day 25 of the audit due date. If known in advance that the organization is not going to schedule their required audit, the Notification of Failure to schedule may be sent sooner.
  - 6.1.1.2 For Italy only: the certificate will be suspended upon exceeding the timescales outlined below:  
lined below:  
Surveillance audits must be conducted at least once a year (calendar year) except in certification renewal years.  
The first surveillance audit, following the initial certification, must be conducted within a maximum of 12 months from the certification decision date.  
The second surveillance audit, following the initial certification must be conducted no later than 27 months from the certification decision date (in any case no later than the reference calendar year).  
The first and second surveillance audit, following the renewal of the certification can be conducted at the latest when there are, respectively, 21 months and 9 months left before the certificate expires (in any case no later than the reference calendar year).
- 6.1.2 If the client still has not scheduled their audit 30 days past their audit due date, the client's certificate is suspended. Program Management has the authority to make a decision not to suspend in exceptional circumstances.
- 6.1.3 The maximum suspension time is six months. The audit must be conducted within six months of the suspension decision date. (Note: The six-month suspension period may be cut short in some situations, e.g. due to the requirement to have an audit conducted once per calendar year or certificate expiration falling before the end of the six-month suspension period.) If the audit is scheduled, the Scheduler must notify the Front Office Supervisor.
- 6.1.4 If the required audit is not scheduled and conducted within the allotted six months while under suspension (or prior to certificate expiration or before the end of the calendar year), then the certificate is withdrawn.
- 6.1.5 If the required audit is not scheduled and conducted because the client is seeking to transfer to another certification body, PJR will not suspend the certificate in an effort to facilitate the transfer process as long as there is evidence demonstrating that the requirement to have one audit per calendar year can be met.
- 6.1.6 If the client expresses a desire not to continue certification but requests to keep the

certificate active for as long as permitted by requirements, the one audit per calendar year requirement must still be met. If the calendar year has ended and the client has not conducted an audit, the certificate will be cancelled at the end of that calendar year, prior to the actual certificate expiration date.

- 6.1.7 If the client has multiple standards and intends to drop one, a Dead File (F-186) must be initiated for the standard that they intend to drop.
- 6.1.8 A Cancelled Audit Report is run once per month (on the 16<sup>th</sup> of a given month for the prior month) to identify cancelled but not yet rescheduled audits. A multi-disciplinary team consisting of the Scheduling Supervisor, International Client Services Manager and the Administrative Supervisor will meet on a monthly basis to reconcile this report.

## 6.2 Failure to Schedule the ANS1 after the Stage 2 Certification Decision

- 6.2.1 If the first annual surveillance (ANS1) is not conducted within one year of the certificate issue date, the client's certificate is suspended, effective immediately. If the audit is scheduled, the Scheduler must notify the FRONT DESK SUPERVISOR.
- 6.2.2 If the client has not had an audit conducted 30 days past their audit due date, the client's certificate is withdrawn. (Note: The requirement to have one audit per calendar year must still be met.
- 6.2.3 PJR's Program Management has the authority to determine whether the client's certificate will not be withdrawn.

## 7 Voluntary suspension

- 7.1 Clients may voluntarily request a suspension. The maximum suspension time is six months (Note: the once per calendar year audit requirement must still be met.) A special audit equivalent in duration to a recertification audit is required to lift suspension and does not result in issuance of a new three-year certificate.

## 8 Immediate Suspension or Withdrawal

- 8.1 Under certain circumstances, an organization's certificate can be suspended or withdrawn immediately. These circumstances can include:

- 8.1.1 Partial or complete withdrawal of PJR's accreditation by an Accreditation Body. In this case, the organization's certificate would be withdrawn, unless special arrangements were made with the affected accreditation body.
- 8.1.2 Client fabricates data/evidence. In this case, the client's certificate would be suspended, unless sector-specific rules call for immediate withdrawal. Client would be given a chance to dispute/appeal. If a dispute/appeal is not filed, then the certificate will be withdrawn.
- 8.1.3 Declining an audit selected by an Accreditation Body and/or Standard Licensing Body for the purpose of witnessing PJR's audit team. Client's certificate would first be suspended in the hopes that the client will then agree to the witness audit. If they do not agree, then the certificate will be withdrawn.
- 8.1.4 Poor performance by the organization, when substantiated by objective evidence from a customer or other interested party. Client's certificate will be suspended until PJR completes its investigation. At the conclusion of the investigation, client's certificate will be reinstated or withdrawn.
- 8.1.5 Declining an internal witness audit of a PJR auditor. Client's certificate will be suspended.
- 8.1.6 No evidence of audit activity in a given calendar year. Client's certificate will be suspended. Client is given one month to complete its audit. If audit is not completed, then the certificate is withdrawn.
- 8.1.7 Failure to make payment for certification services rendered. Client's certificate is first suspended and then withdrawn, if payment isn't received.
- 8.1.8 **For R2V3:** SERI may notify the CB when license fee payment is not received from the R2 Facility by the license/payment due date. The R2 certificate shall be suspended by the CB upon notification from SERI and effective the day the CB has been informed. The R2 Facility name will be removed from the SERI directory during the suspension period. Failure to make payment of license fees to SERI and/or sign the license within 30 days shall result in the withdrawal of the R2 Facility(s) certification.

- 8.1.9 **For R2V3:** A spot inspection is an unannounced or announced assessment conducted by SERI or its designee of an R2 Facility. As part of SERI's quality control program and authorized in the R2 Certified Facilities Agreement, SERI may periodically conduct spot inspections of R2 certified facilities. Spot inspections are a proactive measure to verify conformity as part of the quality control program and not always in response to a complaint or concern. If any concerns arise from the inspection, they will be communicated to the R2 Facility's CB. The CB shall be responsible for managing the concerns through its complaint process, and any NCs issued by the CB be closed and verified. Appropriate actions may be taken based on the quantity and severity of any NCs identified up to possible suspension or revocation of the R2 Certificate and/or R2 Certified Facilities Agreement.
- 8.1.10 **For R2V3:** Following executive committee approval for continued certification, in cases where a new certificate or updated certificate is required, organization has 5 days for the final certificate to be issued. Organization shall ensure that all balances are paid. If there are open invoices at the 5 day requirement, the certificate shall be submitted to the SERI database and certification shall be immediately suspended. Suspension duration shall be determined using the date of invoice issuance to the client.
- 8.1.11 **For R2v3:** Withdrawal of R2 certification is required if the R2 Facility was found conducting fraudulent activities with the intent to deceive, such as:
- 8.1.11.1 Falsifying or altering records and documents;
  - 8.1.11.2 Withholding information;
  - 8.1.11.3 Failing to disclose regulatory enforcement actions

## **9 Facility Moves, name changes, and scheme changes in the R2V3 scheme**

- 9.1 The client is to notify PJR in advance of a facility move, name change, or scheme/structure change. The Scheduler is to initiate the F-157. The F-157 will indicate the effective date and other required details/evidence. The F-157 is forwarded to Amendments (as applicable) and [R2changes@pir.com](mailto:R2changes@pir.com) (which includes the Client Services Associate/Document and Data Control, who is responsible for initiating the suspension if an audit is not conducted within 60 days of the effective date of the change).
- 9.2 The Client Services Associate/Document and Data Control enters the process end date as a G-Alert in PJView, so that the Scheduler is aware of the deadline.
- 9.3 If the revised certificate cannot be issued within 6 months of the effective date of the change, the R2 certificate is required to be withdrawn.

## **10 Method of client notification**

Warning, suspension, withdrawal letters are sent to clients via certified mail or equivalent traceable methods.

- 10.1 For clients in Italy, certified e-mail notification is an acceptable method.
- 10.2 For clients in Mexico and Canada, warning, suspension, or withdrawal notices are first sent via e-mail with a request for a read receipt. Then, a letter is sent via certified mail.
- 10.3 The persons responsible for updating the OASIS database, IATF database and QuestForum are copied on the monthly Dead File report. These individuals will use this report to ensure that all certificates that should have been withdrawn or cancelled are reflected as such in the respective databases.

## **11 Dispute Procedure**

- 11.1 Registrants have the right to dispute any certification status change decision. The Dispute Procedure (PRO-10) will be followed.

## **12 Informing the Public**

- 12.1 PJR will inform the public of the organization's suspended/withdrawal/cancellation status, if so requested. Organization is responsible for following industry-specific and/or contractual requirements for timely notification of their customers of the suspended/withdrawal/cancellation status of the certificate
- 12.1.1 For R2 and R2V3 certificates, the suspended status must be reflected on PJR's website, and SERI must be notified within five days of the suspension decision. The Audit Logistics Manager (ALM) or designee must e-mail this to SERI.
  - 12.1.2 For R2 and R2v3 certificates, the withdrawn status must be reflected on PJR's website, and SERI must be notified within five days of the withdrawal decision. The ALM or designee

must e-mail this to SERI.

- 12.1.3 For AS91XX certificates, the OASIS database will be updated within 14 calendar days of the certification status change.

### 13 Reinstatement

13.1 Where the client remedies the suspension situation, PJR reinstates the certificate in its client software management system, PJView, changes the certificate back to “certified”, updates applicable sector-specific databases to reflect the changed status, and notifies the client.

13.2 In order to be reinstated after withdrawal, the client will have to undergo a new registration audit. The PAM must approve any exceptions to this rule.

In this case, the previously revoked certificate will be revised:

- the revision date must correspond to the date of the decision to restore the certificate;
- there must be a wording that highlights the invalidity period of the certification (the period that elapses from the date of revocation to the date of restoration);
- the remaining dates will be the same as those reported on the revoked certificate.

13.3 **For R2V3:** The CB shall only re-instate an R2 Facility’s R2 Certification once evidence of implementation of corrections or corrective action(s) have been submitted by the R2 Facility and verified as effective in accordance with the COP. Or, in the case of facility moves, the certificate suspension is to be lifted in conjunction with issuance of a revised certificate reflective of the new address(es). CB shall inform SERI of notification of reinstatement.