

# National Board Certificate of Accreditation/Acceptance Revision Request Application

Certificate Type bei	ng revised: NB-360	NB-369	NB-371	NB-390
Certificate Number	(when applicable):			
Company name ar	nd address as it appears o	n your <u>CURRENT</u> (	Certificate of A	Accreditation/Acceptance:
Company Name:				
Company Address				
	ncludes company name and/or divi			
enanging co.				
Scope Change Changing to:				
Address Change	e (a review at your new location ma	ay be required)		
Distance from	previous location (in miles):		-	
Changing to:	Physical Address:		Mailing Addres	ss (if different from physical address)



## National Board Certificate of Accreditation/Acceptance Revision Request Application

## **Conditions**

### **Applicant agrees:**

- To meet the requirements of NB-381, Quality Program for Inspection Organizations.
- To meet the requirements of NB-263, RCI-1, Rules for Commissioned Inspectors.
- That the *Certificate of Accreditation/Acceptance* will be used only by the named certificate holder and in the manner prescribed in NB-381.
- To notify the National Board of any organizational name or address changes (physical or mailing).
- That the National Board may perform audits or unannounced visits, at the certificate holder's expense, as deemed necessary to assure compliance with the rules of the National Board and the certificate holder's quality program.
- To surrender the certificate should the certificate holder discontinue the scope of activities, or at the request of the National Board.
- When applicable, to be authorized by a jurisdictional authority that has responsibility for administering the boiler and pressure vessel laws in one jurisdiction in which the AIA is operating (with the exception of NB-360's).

By signing this form, you agree that the information on page 1 of this form is correct, and you acknowledge you have read and understand the conditions listed above.					
X Signature of Authorized Company Representative	Date				
Printed Name of Authorized Company Representative	Printed Title of Authorized Company Representative				
Phone: Email: _					

NOTE: You should continue using the company name that appears on your current *Certificate of Accreditation/Acceptance* until the revised Certificate is issued. Upon issuance you will receive an emailed copy of the revised Certificate.

### Along with this form you must also submit:

#### For NB-369, NB-371 & NB-390:

- A CONTROLLED copy of your revised QC Manual
- \$50 revision fee (proforma invoice will be emailed upon receipt of this application)

#### For NB-360:

- A CONTROLLED copy of your revised QC Manual
- A copy of the revised ASME QAI-1 Certificate

If you have any questions please contact the Accreditation Department at 614.888.8320

**Submit completed form to:**Accreditation@nationalboard.org

The National Board r 1055 Crupper Avenue Columbus, Ohio 43229-1183 Please Note: An incomplete/improperly completed application may delay the processing of this request. Please be sure your form is complete before submitting.