This Manual is a part of the Contract for Certification.

Abbreviations used:
Body – Management System Certification Body within Alpha Quality Certification Ltd.
MD – Managing Director
MS – Management System

Table of Contents
0. TYPES OF MANAGEMENT SYSTEMS AND STANDARDS
1. REVIEW OF THE APPLICATION AND SIGNING A CONTRACT
2. AUDIT
3. AUDIT PROGRAM AND TYPES OF AUDITS
4. TRANSFER
5. CERTIFICATION DECISION AND ISSUANCE OF A CERTIFICATE
6. MAINTENANCE. EXPANSION. TRANSITION.
7. LIMITATION. TEMPORARY SUSPENSION. RESTORATION. REVOCATION.
8. OBJECTIONS. CLAIMS
9. RIGHTS AND OBLIGATIONS OF THE PARTIES
10. IMPARTIALITY POLICY

0. TYPES OF MANAGEMENT SYSTEMS AND STANDARDS

Quality management systems in accordance with the requirements of ISO 9001:2015
The ISO 9001:2015 Certificate is the most common and recognizable way to present our company as a reliable business partner that follows the requirements of an international quality management system standard. The application of the ISO 9001 standard leads to improving the organization's performance in terms of customer satisfaction, improving its reputation and competitiveness. The standard is equally applicable both for manufacturing companies and for companies in the service sector and non-profit organizations.

Environmental management systems in accordance with the requirements of ISO 14001:2015
The standard is focused on the opportunity to organizations to identify, monitor, and manage their environmental aspects by maintaining and continuously improving an environmental management system, thereby reducing the risk to the environment to acceptable levels. The standard has the same structure and has the same idea of continuous improvement as applicable to ISO 9001.

Occupational health and safety management systems in accordance with the requirements of ISO 45001:2018
ISO 45001:2018 is the standard for a health and safety management system designed to ensure that organizations monitor and improve safe and healthy working conditions. It can be applied by any organization that wants to demonstrate a commitment to health and safety, manage and minimize risks to the health of its employees and of those targeted by its activities.

Food safety management systems in accordance with the requirements of ISO 22000:2018
ISO 22000:2018 is an international food safety management standard. The standard is applicable to companies involved in the entire chain: from manufacturers, processors, including packaging, transportation to the point of sale. The standard is successfully applied by suppliers of non-food products and services, such as cleaning, storage, disinsection and deratization, equipment manufacturing. Through the ISO 22000 certification, each organization can guarantee that it does not allow food products (including packaging, fodder, pet food, additives, etc.) that are dangerous to health to enter the market and that it maintains a system for identifying and solving food safety problems.

Information security management systems in accordance with the requirements of ISO 27001:2017 / ISO/IEC 27001:2022

The standard aims at ensuring information security by protecting information assets. It is based on accepted principles, goals, policies, and assessment of the risks that may negatively affect the business. The standard is applied not only to and not primarily by IT organizations – almost any organization, regardless of what business it develops, can work with sensitive information that concerns customers, partners, other stakeholders, and in some cases even society in general. The protection created during the implementation of ISMS increases the level of security and, first of all, aims at ensuring and maintaining the confidentiality, availability, and integrity of information.

Energy management systems in accordance with the requirements of ISO 50001:2018
ISO 50001 aims at systematically reducing energy costs in order to ensure a financially more efficient and sustainable business in the long run. ISO 50001 certified organizations benefit from energy cost savings and invest in new technologies that are more environmentally friendly and more productive. The standard is applicable both to production facilities and to other enterprises and institutions that have energy costs.

Road Traffic Safety Management Systems (RTS) according to the requirements of ISO 39001: 2012
ISO 39001 aims to ensure road safety when using the road network by employees traveling to and from work, or during work, in public transport or private vehicles as passengers or drivers, and as pedestrians or cyclists; in the transport of goods and passengers, when this is the main activity of the company; when the company generates traffic to and from itself (eg schools, hospitals, shops); when the company creates services and products for the road traffic system, such as management, planning, design, construction and maintenance of infrastructure, vehicles and related products, rehabilitation, control, and legislative activities, design and production/maintenance and repair of vehicles, production of vehicles and motorcycles.

Anti-bribery management systems, according to the requirements of ISO 37001:2016
ISO 37001 is an international standard for management systems aimed at preventing corruption in organizations. It provides a framework of clear rules and procedures to help businesses identify, reduce and manage corruption risks. ISO 37001 certification not only strengthens reputation and trust, but also helps organizations maintain effective anti-corruption measures in their operations.

Each customer of an ISO 37001 must immediately inform the CB when involved in a critical situation that may compromise the certified management system (eg information in the public domain, involvement in legal proceedings regarding bribery/corruption or similar).
The organization must also inform the CB immediately of any event related to the possibility that any of its employees may have participated in bribery and the subsequent actions taken to limit its effects, the analysis of the root causes and the corresponding corrective actions.

When the CB receives information directly from the organization or from other sources that the same organization is involved in corrupt practices or legal proceedings for corrupt practices, the CB immediately conducts specific studies to continue the certified organization's compliance with the requirements.

In such cases, it is recommended that the CB informs the market of the fact that measures have been taken to analyze and evaluate these occurrences and take appropriate action.

1. REVIEW OF THE APPLICATION AND SIGNING A CONTRACT

In order to be able to initiate a certification procedure, the Body must be provided a fully completed application for certification. It is available for download at www.aqcert.org. A Body’s employee in change reviews the application and confirms whether the certification scope requested by the client falls within the scope of accreditation of the Body. Based on the declared standards, worksites, personnel, risk level, and other factors, the audit time is determined, which forms the financial parameters.

The Body enters into a contract for certification with each of its clients, which clearly indicates the scope of the certification requested by the client for the relevant standards and sites. The contract is sent to the client by courier service in two counterparts. As soon as we receive a signed and sealed counterpart, the Body can proceed to planning and conducting an Audit.

Important: The scope of application of the management system must not be misleading. It cannot contain claims of compliance with criteria other than applicable contract standards. For FSMS, it is not allowed to include trademarks in the scope of application.

2. AUDIT

An audit is an activity to establish the degree of compliance. It is carried out by a competent team according to a preliminary plan provided. It is held at the client's site, and the audit team collects information through interviews, review of documented information, and monitoring activities. The audit is conducted under a sampling method, and the purpose is to find evidence of compliance. Each audit results in a report.

3. AUDIT PROGRAM AND TYPES OF AUDITS

The initial certification procedure is three years. It consists of an initial certification audit (Stage 1 + Stage 2) in the first year, a Supervisory Audit after the first year (Supervision 1), and a Supervisory Audit after the second year (Supervision 2).

Stage 1

At the first stage of the certification audit, the management system documentation is reviewed and the readiness of the system for carrying out the Stage 2 audit is verified on the client's site.

If during the audit, omissions are identified that could be classified as non-conformities in Stage 2, the Lead Auditor, together with the client, determines the time for conducting the second stage of the audit so that the omissions can be corrected.

The period between Stage 1 and Stage 2 audits cannot be longer than 6 months.

Stage 2

The Stage 2 audit is generally carried out by the same audit team that has participated in the Stage 1 audit. The Stage 2 audit is conducted at the client's site. During the audit, information and evidence of compliance with all requirements of the standard applicable to the management system and the legal and other requirements relevant to the scope of the MS are collected. After Stage 2, the client's record is referred for a certification decision. Following a positive decision, a certificate is issued with conditional validity of three years.

Supervisory Audit (Supervision 1 and Supervision 2)

The certificate is conditionally valid for three years from the date of issuance. Verification for successful maintenance of the certification is made by supervisory audits. They are conducted to assess the current state of the system, changes entered, improvements or variations (if any). A supervisory audit is carried out every twelve months, a total of two times over the three-year period of validity of the certificate.

The supervisory audit is conducted on-site. It is documented in a supervisory audit report, which is provided for making a decision on maintaining (or making changes to) the certification. Upon a positive decision, an annex to the certificate is issued, which confirms its validity for 1 year. The annex is sent to the client electronically.

During a supervisory audit, changes may be made to the certification parameters, such as changes in the scope or adding, deleting or changing sites. For the purpose of proper planning of the audit, the client is obliged to notify the Body about the changes in advance. If the changes do not increase the audit time, the client is not charged any additional fees. If necessary, an annex to the contract is signed.

In case of critical non-conformities that are not eliminated in due time, in case of failure to conduct the audit in due time or in case of default of payment, the Body temporarily suspends the certification for up to six months. After the expiry of this period, if the problem persists, the certification is revoked and the contract is terminated. In case of unpaid audits, the amounts remain due.

Extraordinary Audit

An extraordinary audit is initiated for 2 possible reasons. First, if the client wants to enter a change before the time for conducting a supervisory audit, an extraordinary audit is conducted to reflect the change and a decision is made to enter the change. Typically, the cost of such an audit is 2/3 of the cost of the supervisory audit. If there are significant changes in the certification parameters and/or if the changes lead to an increase in the audit time, an annex to the contract is signed. The second case is where an extraordinary audit is initiated by the Body in connection with a problem – accident investigation, complaints, closure on critical NCs that cannot be closed by documents. The cost of this audit is determined by the Body based on the time needed.

Renewal/Recertification

The certification renewal procedure is automatically initiated before the expiration of the validity period of the certificate. The Body communicates with the client about possible changes and sends an offer for certification renewal. Thereafter, a Contract for Renewal/Recertification is signed for a new, conditional period of three years.

The purpose of the certification renewal audit is to confirm that compliance with the relevant standard is maintained and that the management system as a whole is efficient. If there are no significant changes in the

client's MS, the renewal/recertification audit consists of Stage 2 only. Following a positive decision, a certificate is issued, which includes the initial approval of the Client.

The special thing about certificates issued during renewal/recertification is that their expiration date is not exactly 3 years after issuance, but 3 years after expiration of the previous valid certificate, i.e. if a certificate is renewed earlier, the client does not lose from overlapping validity periods, but if it is renewed after the previous one expires, the time that passes until renewal is not transferred to the new period.

An integrated audit is an audit for multiple standards at the same time. More information is available here Corporate/multi-site audit is an audit of multiple companies/sites operating under one common management system and certified as one whole. More information is available here

4. TRANSFER

The certification transfer is recognition of an existing valid certificate of an organization that is issued by another accredited management system certification body and based on this recognition, the new Body issues a certificate on its own behalf.

A Body may carry out certification transfer only of valid certificates issued under accreditation with IAF MLA and/or EA/ MLA.

Usually, the transfer is made before a renewal audit or a supervisory audit.

For the purpose of completion of the transfer, in addition to a copy of its valid certificate, the applicant organization must further provide information about the presence or absence of non-conformities from a previous audit (and if available, information about their closure). The Body reviews such provided information in accordance with IAF MD 2, and the usual practice is to make a pre-transfer visit.

The Body can offer a contract after a positive assessment of the pre-transfer review. The transfer can be completed at any stage of the certification procedure.

More information is available here

5. CERTIFICATION DECISION AND ISSUANCE OF A CERTIFICATE

After the audit, the Lead Auditor prepares a report with findings. The decision on certification is made by an independent person (veto person). The veto person reviews and evaluates the documentation provided, having the right to request additional information. If there is a critical non-conformity for a positive decision to issue a certificate or annex, data about its closure will not be provided. If there is sufficient, satisfactory evidence of each activity from the scope applied for, a positive decision will be taken. The veto person drafts a protocol for the decision. Upon a positive decision, a certificate or annex for maintenance is prepared. Once a decision is made, changes and arrangements in the scope can no longer be entered without an extraordinary audit.

When issuing a certificate (initial certification, renewal, change, transition), the certificate is first sent to the client electronically, and the client has 5 days to report if there is an inaccuracy in spellings. After the lapse of these 5 days, the text of the certificate is considered agreed upon.

If requested, the client's logo can be placed on the certificate free of charge, but only if approved by the Body.

6. MAINTENANCE. EXPANSION. TRANSITION.

The certification activities in the first year of each three-year certification cycle (after making a positive decision on certification) end with the issuance of a certificate that is conditionally valid for 3 years and its validity is confirmed only up until the expiration of the first year. At the end of the first year of certification, the first supervisory audit (Supervision 1) is to be conducted to confirm the certification for one more year. After successfully conducted Supervision 1 (and a positive decision to maintain the certification status), an annex is issued to extend the validity of the issued certificate until the next scheduled supervisory audit. During Supervision 2, the audit activities are repeated. The annex for maintenance of the certification is sent to the client electronically.

At the client's request, the scope of certification can be expanded, worksites can be changed or new ones can be added. To do so, a Request for Change is to be completed. An extension is usually carried out during a Supervisory Audit or, if necessary, with an Extraordinary Audit.

When introducing a new version of a standard, it replaces and/or cancels the existing version of the standard. In previous periods (usually 3 years), clients of the Body that are certified under the old version of the standard must transfer/migrate to the new one, in accordance with the announced migration policy. The transition/migration of an already certified management system can be carried out during a supervisory or a

recertification audit at no additional cost to the client. If desired, the transition/migration can also be performed by conducting an extraordinary audit, but with an additional fee. Certificates issued under the expiring version during the transition period have limited validity (expiration date), but after completing the transition, their validity period is extended until the end of the three-year certification cycle. Data about current transition periods you may find at www.aqcert.org

7. LIMITATION. TEMPORARY SUSPENSION. RESTORATION. REVOCATION.

The scope of an issued certification can only be limited if this does not violate the integrity and effective functioning of the management system. Limitation can result from identified omissions during a regular audit, and it can also be applied for by the client. When applying for limitation, it is possible for the Body to limit the scope without an audit, if appropriate.

Temporary termination of certification or the so-called suspension of a valid certificate is a step in which its validity period is terminated for a period of up to 6 months. The reasons for suspension are: violation of a clause of the contract for certification, for example, denial, failure to carry out or delayed by more than a month surveillance or failure to pay amounts due to the Body, as well as claims filed to the Body; unclosed critical non-conformities or unclosed non-conformities from the previous year. Temporary suspension can also happen at the client's request, for example, if the Body's client is unable to accept the audit with the set deadline. During a temporary suspension period, the client has no right to refer to (or use) the issued certificate and use the certification symbol on the Body.

Recovery of the certification after temporary suspension (up to 6 months) can be carried out by conducting the postponed supervisory audit or an extraordinary recovery audit. After conducting the audit and issuance of a report by the Body's audit team, and once a positive decision is made, the status of the issued certificate is restored. Conducting an extraordinary recovery audit does not affect the final expiration date of the issued certificate and the opened three-year certification procedure.

The Body proceeds to revocation of a certification, in case of:

- expiry of 6 months after temporary suspension (see reasons for temporary suspension)
- breach of the contract for certification, the provisions for the logo and/or this manual
- application on the part of the client.

The client is obliged to return the certificate provided (if such is provided on paper).

8. OBJECTIONS. CLAIMS.

Objections. In cases where the applicant wishes to object a refusal, revocation of certification or assessments made at any stage of a certification audit, it can file a written objection. The deadline for filing objections is up to 10 (ten) business days from the date of notification about the issued decision or serving a report, where it concerns findings in the report. Objections to the activity of the Body filed by its clients are considered by a team of the Decision Committee, which does not include persons involved in the certification activities (both audit and decision). The Body must confirm receipt of the objection and provide the lodger of the objection an opinion on the results of the consideration of the objection within 1 month. The Managing Director is obliged to protect the rights of the client, as well as to not allow any kind of discrimination against the client.

Claims can be filed in writing by clients of certified organizations or by other parties interested in the certification. Filing claims, considering and deciding on claims does not result in any discriminatory actions against the lodger of the claim. After receiving the claim, the Body must confirm whether the claim is related to the certification activities for which the body is responsible and if so, to review it. The Body is obliged to keep the secret of the lodger when communicating with the client, subject to the complaint.

The Body's Managing Director sends a Notification Letter to the certified organization about the claim lodged. Within a period of up to 5 (five) business days after notification of the certified organization, it has the right to submit to the Body a written opinion, accompanied by evidence in connection with the subject of the claim. In order to collect additional information, the Body may initiate an extraordinary audit.

Depending on the validity of the reasons for the claim and the results of the audit, the Body informs the interested parties within one month from the date of receipt of the claim.

9. RIGHTS AND OBLIGATIONS

The client has the right to:

- object to the audit team members and/or audit dates proposed by the Body, providing arguments thereof
- receive the audit report
- make adjustments and corrective actions in case of detected non-conformities
- get a certificate if the certification decision is positive

- use the certificate according to the provisions of PD2 “Certificate and logo usage rules”
- use the certification symbol according to the provisions of PD2 “Certificate and logo usage rules”
-object to the decisions of the Body

The client is required to:
- inform the Body in case of changes in: a) legal, commercial, and organizational status or changes in ownership, b) organizational structure and management (for example the key personnel – managers, decision-makers or technical personnel), c) contact address and locations, d) range of activities provided within the scope of the certified management system, e) significant changes in the management system and in processes, and f) the existence of a serious incident or breach of legal requirements for OHS requiring the involvement of the competent regulatory authority.
- accept observers from the accreditation body when conducting audits of its management system, if this is needed for maintaining and/or expanding of the Body’s accreditation
- keep track of any changes made to this Manual and to PD2 “Certificate and logo usage rules”
- not disrupt or refuse access to information, incl. documentation, workplaces, personnel, etc. included in the scope of certification, except documents identified as confidential in advance
- not leave the identified non-conformities without consequences, i.e. plan and/or take corrective action to eliminate them
- not use the certificate and/or certification symbol and not refer to the certification, unless it already has a valid one, and/or in connection with activities/sites/standards outside of the scope of certification, as well as in cases of temporary suspension and revocation.
- strictly adhere to PD2 “Certificate and logo usage rules”
- inform the Body (no later than 3 days) of any situation of established legal violations related to the management systems, as well as any serious incidents related to health and safety at work.

The Body has the right to:
- publish the information entered in the certificate of its clients
- change this Manual according to the current certification and accreditation requirements
- revoke the certificate in case of breach of the contractual obligations by the client
- receive payments in accordance with the contracts for certification.

The Body is required to:
- agree with the client on the audit dates and teams.
- perform certification activities in an open manner, competently, impartially, unbiased.
- protect before third parties the commercial and production secrets of the client.
- inform the parties interested in the client’s certification regarding the validity and scope of the certificate.
- announce amendments to certification requirements via its website www.aqcert.org.
- provide upon request information about its clients to accreditation bodies with which it collaborates, and also to empowered governmental bodies upon authorized request.

10. IMPARTIALITY POLICY

The Management System Certification Body within Alpha Quality Certification Ltd. declares to its clients and stakeholders that ensuring impartiality is its first and foremost priority. The Body takes measures and spares no effort to ensure the objectivity of the certification process and effective control over all aspects of ensuring impartiality in accordance with the applicable criteria and best practices.

The Body is fair and independent. It meets the requirements for confidentiality. The Body has established requirements for objectivity and impartiality for all elements of the certification process and for the prevention of the occurrence of conflicts of interest. Its services are equally available to all clients, without discrimination of any kind.

The Body is constantly improving its performance in order to increase efficiency and meet as much as possible the criteria of AB, EA, IAF, ISO applicable to its activities, as well as the expectations of all of its stakeholders.

The Body’s employees, depending on their functions, sign declarations and assume obligations for impartiality and absence of conflict of interest. Each certification procedure undergoes an independent review. Independence is ensured for both client’s audit teams and audit team decisions. The Body manages the risks associated with ensuring impartiality.

The Body does not provide certification services to other certification bodies. The Body does not offer or perform an internal audit of its clients. In its certification activities, the Body does not use personnel who has

performed an internal audit over the last two years from the date of the application for the particular client. The Body does not certify management systems whenever there is an unacceptable risk to impartiality.

The Body does not offer its services as services associated with the ones of consultancy organizations. It is also unacceptable for a consulting organization to state or imply that the certification process will be easier, simpler, faster or cheaper if this Body is chosen. The Body does not state and persuade that the certification process will be easier, simpler, faster and cheaper if the services of a particular consulting organization are used.

The Body does not allow any commercial, financial or other pressure on its personnel which could threaten impartiality. The Management System Certification Body, as a fully autonomous part of the company for certification services Alpha Quality Certification Ltd. – Sofia, is financed only by its activities; it has no other revenues.

Boris Stoyanov,
Managing Director of the Management System Certification Body within Alpha Quality Certification Ltd.

Kiril Kehayov,
Manager of Alpha Quality Certification Ltd.

11. ISO/IEC 27001:2022 Certification Transition Policy

SCOPE
This Transition Policy is applicable to all clients of the Management Systems Certification Body (MSCB) at Alpha Quality Certification Ltd. having EN ISO/IEC 27001:2017-certified Information Security Management Systems (ISMS) as accredited by the Executive Agency "Bulgarian Accreditation Service", and to new clients applying for ISMS certification.

BACKGROUND
This Policy is a part of the PD1 CLIENT MANUAL document, which in turn, is a part of the Certification Agreement.

REFERENCE DOCUMENTS

1) ISO/IEC 27001:2022, as published by the International Organization for Standardization (ISO) on 25 October 2022.
2) IAF MD 26:2022 – mandatory document of the International Accreditation Forum (IAF) which outlines the requirements and deadlines for transition of certification from the old to the new version of the standard.

DEADLINE FOR TRANSITION

1) The deadline for transition is set by IAF to three years after the date of publication of ISO/IEC 27001:2022, i.e. by 31 October 2025.
2) After 31 October 2025, Certificates issued under the old version (EN ISO/IEC 27001:2017) will no longer be valid.

TRANSITION RULES FOR EXISTING CLIENTS

1) Transition to the new version can take place during a regular supervision audit or a certification renewal audit (recertification), or by means of an extraordinary audit.
2) No additional audit time will be added for transition purposes in the event of a transition during a certification renewal audit.
3) At least 0.5 days will be added to the planned audit time for transition purposes in the event of a transition during a regular supervision audit.
4) In the event of a transition by means of an extraordinary audit, such audit will be planned to last at least 0.5 days.
5) When carrying out a transition under the conditions of a regular supervision audit or an extraordinary audit, an Annex to the Certification Agreement will have to be signed.
6) Transition in the form of a "remote audit" is also possible, provided that the objectives of this extraordinary audit are achieved.
7) Following a positive decision on successful transition to the new version of the standard, the client's Certificate will be reissued under ISO/IEC 27001:2022, keeping the original validity of the Certificate.
8) All existing clients must undergo a transition audit and their Certificates must be reissued to comply with ISO/IEC 27001:2022 no later than 31 October 2025.

9) After 31 October 2025, Certificates issued under EN ISO/IEC 27001:2017 will no longer be valid.

NEW CLIENTS

1) Up to 30.04.2024 (inclusive), the Certification Body will accept applications for new certification under both versions of the standard.
2) After 30.04.2024, only applications for certification under the new version of the standard, ISO/IEC 27001:2022, will be accepted.
3) All Certificates issued under the old version of the standard in the period up to 31 October 2023 will be valid until 31 October 2025, regardless of the date of expiration of the three-year certification cycle, and once the client successfully completes a transition audit to the new version, the Certificate will be reissued until the end of the full three-year validity period.

Date: 15.12.2023

Approved by: Boris Stoyanov

Certification Body Managing Director