



DESK REVIEW REPORT (Version 01.1)

Entity name and address:	
UNFCCC entity ref. no.:	
Sectoral scopes applied for:	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 30px; text-align: center;"><input type="checkbox"/></div> <div>1. Energy industries (renewable - / non-renewable sources)</div> <div style="width: 30px; text-align: center;"><input type="checkbox"/></div> <div>2. Energy distribution</div> <div style="width: 30px; text-align: center;"><input type="checkbox"/></div> <div>3. Energy demand</div> <div style="width: 30px; text-align: center;"><input type="checkbox"/></div> <div>4. Manufacturing industries</div> <div style="width: 30px; text-align: center;"><input type="checkbox"/></div> <div>5. Chemical industry</div> <div style="width: 30px; text-align: center;"><input type="checkbox"/></div> <div>6. Construction</div> <div style="width: 30px; text-align: center;"><input type="checkbox"/></div> <div>7. Transport</div> <div style="width: 30px; text-align: center;"><input type="checkbox"/></div> <div>8. Mining/Mineral production</div> <div style="width: 30px; text-align: center;"><input type="checkbox"/></div> <div>9. Metal production</div> <div style="width: 30px; text-align: center;"><input type="checkbox"/></div> <div>10. Fugitive emissions from fuels (solid, oil and gas)</div> <div style="width: 30px; text-align: center;"><input type="checkbox"/></div> <div>11. Fugitive emissions from production and consumption of halocarbons and sulphur hexafluoride</div> <div style="width: 30px; text-align: center;"><input type="checkbox"/></div> <div>12. Solvents use</div> <div style="width: 30px; text-align: center;"><input type="checkbox"/></div> <div>13. Waste handling and disposal</div> <div style="width: 30px; text-align: center;"><input type="checkbox"/></div> <div>14. Afforestation and reforestation</div> <div style="width: 30px; text-align: center;"><input type="checkbox"/></div> <div>15. Agriculture</div> <div style="width: 30px; text-align: center;"><input type="checkbox"/></div> <div>16. Carbon dioxide capture and storage in geological formations</div> </div>
A6.4-AT leader's name:	
A6.4-AT members' names:	

NOTE:

1. This form is relevant to the Article 6.4 accreditation standard and the Article 6.4 accreditation procedure.
2. The following tables are only checklists, refer to the A6.4 accreditation standard for the detailed requirements.
3. Substantiate and explain, in the comments column, compliance (or lack thereof) with each of the requirements.

Criteria Requirement	Initial Desk Review		Final Desk Review	
	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)
4.3 Principle of risk-based approach				
1. Does the entity has a principle of risk-based approach to ensure that the risks associated with providing competent, consistent and impartial validation and/or verification/certification are taken into account throughout the accreditation term? (Para 9)				
6. Legal status and matters				
1. Describe the supporting documents provided by the entity to establish its legal status (e.g. registration documents, memorandum and articles of association, etc.). Do the provided documents establish the legal status of the entity? (Para 11)				
2. Has the entity documented a procedure for handling of judicial processes and maintained a record of all the judicial processes pending against it as well as information of any judicial cases held in the past (Paras 12-13).		(Please describe how the documented procedure covers judicial process as described as per paragraph 12 and steps as per paragraph 13.)		

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	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)
3. Does the entity have any pending judicial processes? (Paras 14-15)				
7. Liability and finance				
1. Has the entity provided documentation demonstrating its financial stability? (Para 16)				
2. Has the entity documented a procedure for monitoring its income and expenditure to determine the financial stability and financial resources required for its operation of A6.4 related activities at least annually? (Para 17)				
3. Does the entity have a system for analysis of potential risks arising out of its A6.4 activities (validation, verification & certification)? Has the entity provided a documented analysis of potential liabilities arising out of its A6.4 activities (validation, verification & certification)? (Para 18)		(Describe how the arrangements covers the identified risks arising from its VVC activities in the geographic areas it operates as per paragraph 18.)		
4. Does the entity have a system to ensure that potential liabilities are assessed and adequate arrangements to cover liabilities are provided? (Para 19)		(Provide information as referred to in the footnotes 11 and 12 of the standard.)		

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	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)
8.Entity's management				
<p>1. Does the documented management structure/chart include lines of authority, responsibilities and allocation of functions stemming from top management (e.g. management personnel, responsibility for final decision making, validation and verification/certification (VVC) personnel, operational and supervisory committees etc.)?</p> <p>Does the documented management structure and authority and responsibility include all functions described in paras 24 and 25? (Paras 20-21)</p>				
<p>2. Are the names, qualifications, experience and terms of reference of the top management personnel and other management personnel documented? (para 22) Has this been documented for all management and top management functions? (paras 24-25)</p>		(Please refer to paragraph 72 while reviewing paragraphs 24 and 25.)		

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	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)
3. Ha the entity documented a procedure for allocation of responsibilities? (para 23)				
4. Is here a documented procedure to cover appointment, terms of reference and operation of any committees that are involved in A6.4 policy making and operational functions? (Para 26)				
9. Safeguarding impartiality				
1. Has the entity documented a policy on safeguarding impartiality and a system of ensuring that this policy is understood at all levels? (Paras 30-31)				
2. Has the entity enclosed a statement that describes its understanding of the necessity of impartiality in validation and/or verification/certification functions, how it manages conflict of interest, and how it ensures the objectivity of validation and/or verification/certification functions? (Para 32(b))				

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	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)
3. Does the documented structure to safeguard impartiality of the entity's operations include the Impartiality Committee and the impartiality committee's reporting to top management? Are the terms and reference of the impartiality committee documented? (Paras 33-35)				
4. Has the entity established a documented procedure for analyzing potential threats against impartiality and is this reviewed at least annually? (Paras 38-39)				
5. Has the entity enclosed a documented analysis of all potential conflicts of interests? (Paras 40-42)				

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6. Has the entity established a documented procedure for the mitigation of threats against its impartiality? Does the procedure describe mitigation strategies and actions? Does the procedure ensure coverage of situations referred to in para 47? (Paras 43-45)		(Describe how the documented procedure covers the situation whenever a change in the conflict of interest analysis has occurred or in a case where a potential or actual conflict of interest has materialized as per paragraph 44.) (Check if the document procedure covers aspect for its management personnel, top management personnel and validation and verification/certification personnel amongst others to reveal required information as per paragraph 45(f).)		
7. Does the entity's system include an annual analysis and review of all data relevant to impartiality? (Paras 46-48)				
10. Human resources and competence				
1. Does the entity have a system to determine human resource requirements related to the type, range and volume of estimated/planned workload for each TA in which the entity intends to operate and in the sectoral scopes in which the entity has applied for accreditation or has been accredited? (Paras 49-50)				

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2. Does the entity have internal resources to perform management functions as described in paras 24 and 25? (Para 51)				
3. Describe which of these two options (internal and/or outsourcing) are used by the entity to fulfill the requirement of sufficient resources for the functions other than management functions. (Para 52) Does the entity have a system to evaluate the sufficiency of competent resource availability at least annually? (Para 53)				
4. Are the personnel carrying out VVC functions, including full-time/part-time/internal/external resources (i.e. outsourcing to an external individual), under the supervision of a responsible senior executive of the entity? (Para 54)				

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	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)
5. Has the entity got at least one person qualified in the technical area to participate in the VVC and at least one person qualified to participate in technical review, in at least one technical area for each sectoral scope it intends to get accredited for and for each technical area it intends to operate in? (Para 55)				
6. Has the entity documented a procedure for recruitment of personnel? (Para 56)				
7. Does the documented procedure to outsource functions require (i) outsourcing to legal entities only (ii) take full responsibility for all outsourced activities, (iii) contractual agreement with outsourced body to (a) perform VVC activities in accordance with A6.4 rules and requirements (b) comply with applicable requirements of the accreditation standard, and the entity's policies/procedures including provisions related to confidentiality and impartiality? (Paras 57-59)		(Review if the central office and related body are as per the definition specified in the paragraphs 8(d) and 8(o) respectively.)		

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<p>8. Does the documented procedure to use outsourcing to an external individual (i.e. external resources) require:</p> <p>(i) the entity to establish a contract with the external individual or its company,</p> <p>(ii) external individuals to comply with the entity's policies and procedures, including confidentiality and impartiality/independence.</p> <p>(iii) external individuals to notify the entity of any actual/potential impartiality issues?</p> <p>Do the requirements with respect to competence, evaluation and qualification, monitoring of performance, maintenance of competence, training as well as personnel records, as defined in sections 10.2.2 and 10.3.1–10.3.3 apply to external individuals? (Paras 63-65)</p>				
<p>9. Has the entity established a procedure for determining the required competence? Has the entity documented the initial competence analysis and competence criteria for top management, management and VVC personnel? (Paras 66-68)</p>		(Review whether the initial competence analysis provides competence criteria for to management personnel, management personnel and VVC personnel as per paragraph 68.)		

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	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)
10. Is the documented competence criteria in compliance with accreditation standard requirements for the: (Paras 69, 71 and appendixes 2 and 3)		(Refer the technical knowledge related to methane monitoring technologies and oil and gas reporting and mitigation framework as per the appendix 2 for TA10.1, if the entity includes TA10.1.) (Refer competence requirement including SD tool amongst others as per appendix 3, table 1, No: 1, 3), a) and b) and table 2, No: 1.)		
i. management personnel (Para 24)				
ii. top management (para 25)				
iii. VVC teams (Para 71)				
iv. validation team (Para 71)				
v. verification team (Para 71)				
vi. validator/verifier (Para 71)				
vii. team leader (Para 71)				
viii. technical expert (Para 71)				
ix. technical review team (Para 71)				

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	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)
11.Has the entity established a system to evaluate adequacy of its competence criteria taking into account performance of VVC functions as well as technological and scientific developments the knowledge of and skill in which may be required in order to maintain competence in sectoral scopes and technical areas in which the DOE operates or intends to operate? (Para 70)		(Refer to the definition of skill as per paragraph 8(r).)		
12.Has the entity documented a procedure for evaluation, demonstration and qualification of personnel? Does this procedure include the competence criteria as determined in paragraphs 66-70 and provisions in appendixes 2 and 3 for all its functions? (Paras 72-73)		(Review the documented procedure covers the provisions related to evaluating its management personnel and top management personnel for demonstrating that they have appropriate competence and meet applicable requirements and for qualifying and authorizing them before performing such activities as per paragraph 72.) (Review how the documented procedure addresses the qualifications of personnel for management and top management functions as per paragraph 73(b)(i).)		

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	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)
13.Does this documented procedure include evaluation and demonstration of competence in accordance with the A6.4 accreditation standard? (Paras 74-76)				
14.Has the entity documented a procedure for monitoring the performance of VVC personnel? Does the documented procedure for performance monitoring include on the job performance evaluation, subsequent continuous monitoring, ensure maintenance and update of competence of its personnel, monitoring processes, and monitoring method? (Paras 77-81)				
15.Does the documented procedure for training include identification of training needs, evaluation of effectiveness of training provided, and maintenance of records for both qualified personnel and to-be qualified personnel? (Paras 82-83)				
11. Information management				
1. Does the entity have a system to maintain publicly available information on its website as required under para 85? (Para 85)		(Refer to information related to accreditation and allocation of responsibilities amongst others as per paragraph 85 (a) and (c).)		

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	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)
2. Has the entity documented the confidentiality policy and mechanism to safeguard the confidentiality of information obtained from project participants? (Para 86)				
3. Does the mechanism require the entity personnel to be bound by the confidentiality requirements, and obtain written consent of the project participants for any information which may be made public prior to any such information being disclosed except for information which is required to be made publicly available by the CMP? (Paras 87-88)				
12. Validation and verification/certification process				
1. Does the documented procedure for contract review include proposal/quotation submission after conduct of contract review, attaining necessary information, approval of contract review before entering into a contract, establishing legally enforceable contract with client, and maintaining records of contract review? (Paras 89-94)		(Review information related to SD tool and outcome of the local stakeholder consultation amongst others as per paragraph 91.)		

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	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)
2. Does the documented procedure include selection of the VVC team ensuring team competence, impartiality etc.? (Paras 95-99)				
3. Does the documented procedure for performing VVC ensure that these activities are carried out in accordance with the requirements in CMA decisions, the VVS, the PCP and other A6,4 Supervisory Body decisions? Does the procedure have the provision to ensure that the VVC plan is prepared, tasks for the team are defined, and that a qualified team leader and technical expert participate in the site visit? (Paras 100-101)				
4. Does the documented procedure include a technical review process prior to issuance of the final VVC certification opinion and report? (Paras 102-103)				
5. Does the documented procedure require that a successful technical review be carried out before management approval of the final VVC certification opinion and report? (Paras 104-106)				

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	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)
6. Does the documented procedure for the conduct of VVC functions include other relevant processes? (e.g proposing new methodologies, requests for clarifications and post registration changes).				
7. Does the documented procedure for the conduct of VVC functions include responding to requests for review from the A6.4 Supervisory Body?				
8. Does the documented procedure for the conduct of VVC functions include submission of requests for registration and issuance?				
13. Quality management system				
1. Does the entity have a documented quality management system, policies and objectives? Do the documents of the entity specify who is responsible to establish the above? Has the entity put measures in place to ensure that the policies and objectives are understood, implemented and maintained? (Paras 107-110)				
2. Is there a person designated as A6.4 quality manager who has direct access to top management of the entity, for example chief executive, board members, etc.? (Para 111)				

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	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)
3. Is there a documented procedure for the control of documents which sufficiently covers the control of documents as per the A6.4 accreditation standard? (Paras 112-113)				
4. Is there a documented procedure for defining the controls needed for the entity's records, and maintenance and management of records including records pertaining to the entity's validation and/or verification/certification functions? (Paras 114-119)		(Describe which records are categorized as permanent and which records are to be disposed and their retention time as per paragraph 116.)		
5. Does the documented procedure for internal audit specify that the internal audit shall be carried out at least annually for both the entity and any outsourced entity, conducted independently by the DOE's own qualified personnel or an external qualified expert addressing all A6.4 requirements, adequately recorded, and implementation and effectiveness of corrective actions? (Paras 120-122)		(Describe the predetermined schedule and procedure as per paragraph 121.)		

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	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)	Complies (Yes/No)	Comments (substantiate the compliance or non-compliance)
6. Does the documented procedure for corrective actions include identification and management of non-conformities (for the entity and outsourced entity), recording, monitoring effectiveness of corrective actions etc.? (Paras 123-126)				
7. Does the documented procedure for preventive actions include identification of potential sources of non-conformities/improvement opportunities (for entity and outsourced entity), and for taking preventive actions? (Paras 127-128)				
8. Does the entity address the management reviews as part of the procedures at least annually? (Para 129)				
9. Do the management reviews sufficiently cover the requirements with regard to VVC functions? (Para 130)				
10. Do the procedures require that the decisions taken in the management reviews are recorded and followed up for sustained improvement? (Paras 131-132)				

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14. Complaints, dispute and appeal process				
1. Is the documented procedure for handling of complaints, disputes and appeals, adequate to effectively handle complaints, disputes and appeals? Are the personnel involved in investigating the complaint/disputes/appeals independent of the personnel involved in the A6.4 validation/ verification certification activities? Does the appeal process require establishment of an independent appeal panel responsible for the appeal process? (Paras 133-140)				
Has a provision been made to make the procedure for handling disputes available to the client upon request or if a dispute occurs? (Para164)				

RECOMMENDATION OF THE A6.4-AT AFTER INITIAL DESK REVIEW		
The A6.4-AT conclusion	Yes/No	Comments
The documentation is complete and adequate		
Any additional information required for on-site assessment (if not referred to under comments)		
The A6.4-AT recommends to proceed with the on-site assessment		
General Comments:		
Signature by A6.4 AT leader	Date:	
RECOMMENDATION OF THE A6.4-AT AFTER FINAL DESK REVIEW		
The A6.4-AT conclusion	Yes/No	Comments
The documentation is complete and adequate		
Any additional information required at on-site assessment (if not referred to under comments)		
Any other comments:		
Signature by A6.4-AT leader	Date:	

Document information

<i>Version</i>	<i>Date</i>	<i>Description</i>
01.1	9 October 2024	Editorial improvement to the table, along with additional instructions for assessing the A6.4 accreditation standard requirements.
01	24 April 2024	Initial publication.
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Business Function: Accreditation		
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