Governing Requirements for Certification Programs

Purpose

These governing requirements are provided to identify the activities required to demonstrate that the participating company’s management system fulfills the requirements for certification to the selected standard(s) and other normative documents. Governing requirements provide for the administration of the audit program from application to certification. They also contain clarifications, explanations, and additional requirements to those found in the certification standard(s) and are also used to provide modifications to the requirements in the standards until a formal revision to the standard(s) can be made.

The document pyramid shown in the image below, illustrates the hierarchy. The governing requirements sit at the top of the pyramid as the governing document. They are supported by the applicable “certification standard”. Within the certification standard there are references to “other referenced industry documents”. These include documents such as the AISC Code of Standard Practice, ASTM Specifications, AWS Welding resources, etc. Finally the “contract referenced specifications and codes” provide for job/project specific needs. These may require a specific version of an industry document or require the use of a specific manufacturer’s product. There may also be unique requirements of the job/project that are specific to the customer.
Preface

The 2019 revision is not a complete revision of the Program Requirements for Fabricator, Erector and Manufacturer Certifications but does add important changes and updates. The following changes have been made in this revision:

- Document Title - Revised
- Purpose - Revised
- Preface - New Section Added
- Table of Contents - New Section Added
- Scope - Revised
- Intent of Use - New Section Added
- Certification Programs - Editorial

Section 1 General Requirements
- PR1.2 - Editorial
- PR1.3 - Editorial
- PR1.8 - Editorial
- PR1.11 - New Requirement
- PR1.12 - New Requirement

Section 2 Applying for Certification
- PR2.1 - Revised
- PR2.2 - Revised
- PR2.3 - Editorial
- PR2.5 - Editorial

Section 3 Document Audit - Stage 1
- PR3.3 - Revised

Section 4 Planning for the Site Audit
- PR4.1 - Revised
- PR4.3 - Editorial
- PR4.7 - Revised
- PR4.9 - Revised
- PR4.13 - Revised

Section 5 During the Site Audit
- PR5.5 - Editorial
- PR5.5.1 - New Requirement
- PR5.8 - Revised
- PR5.8.1 - New Requirement
- PR5.9 - New Requirement

Section 6 Corrective Action Request Process
- PR6.1 - Revised
- PR6.2 - Editorial
- PR6.2.1 - Revised former PR6.2
- PR6.3 - Revised

Section 7 Certification Decisions
- PR7.1 - Revised
- PR7.2 - Revised
- PR7.3 - Editorial
- PR7.3.1 - New Requirement
- PR7.4 - Editorial

Section 8 Making changes to the Certification Scope
- PR8.1 - Revised
- PR8.3 - Revised

Section 9 Complaints, Allegations and Appeals
- PR9.1 - Editorial

Supplemental Requirements
- See each Supplement for a list of revisions.
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Scope

This document (hereinafter referred to as the Requirements) governs the AISC Certification Programs. All Applicants and continuing Participants are required to have available and comply with these Requirements. An Applicant is a company that is requesting certification for a facility that does not hold a current AISC certification. A Participant is a company that holds a current AISC certification and is seeking to continue the certification for that facility. A Participant that is applying for additional certifications or endorsements, a Scope Change, is also considered an Applicant. The words shall, must or will denote a mandatory requirement. The word should or could denotes a guideline or recommendation. The words may or can denote an opportunity to make a choice.

Intent of Use

Regardless of whether individual contracts specify AISC Certification, certified companies are required to apply their Quality Management Systems (QMS) and Safety Management Systems (SMS) to all work meeting the scope of their certification(s) and endorsement(s), as described in Section 1. Any contract can be used during the site audit to demonstrate the capability of the company to meet these Requirements.

Certification Programs

AISC offers and issues certifications for the steel industry. It also offers endorsements that can be added to the certification scope. The certification programs are described in Section 1. Available endorsements are provided in the Supplemental Requirements (hereinafter referred to as the Supplements) for each certification.

Section 1 General Requirements

PR1.1 Certification Program for Fabricators of Steel Buildings (BU) applies to Fabricators who fabricate and supply, via bolting and/or welding, structural steel frames for buildings and similar structures. See Section 2.1 of AISC 303 Code of Standard Practice for Steel Buildings and Bridges for the definition of structural steel. Applicants and Participants of this program are required to adhere to these Requirements and to the Supplemental Requirements for Fabricators of Steel Buildings.

PR1.2 Certification Program for Manufacturers of Bridge and Highway Components (CPT) applies to Metal Component Manufacturers who manufacture and supply components that include bracing not designed for primary loads (diaphragms, cross frames, and lateral bracing); camera, light, sign and signal support structures; bridge rails; stairs; walkways; grid decks; drains; scuppers; expansion joints; bearings; ballast plates; and mechanical movable bridge equipment. Applicants and Participants of this program are required to adhere to these Requirements and to the Supplemental Requirements for Manufacturers of Bridge and Highway Components.
PR1.3 **Certification Program for Fabricators of Steel Bridges (SBR, IBR, ABR)** applies to Bridge Fabricators who fabricate and supply steel highway and railroad bridges. Applicants and Participants of this program are required to adhere to these **Requirements** and to the **Supplemental Requirements for Fabricators of Steel Bridges**.

The categories for types of bridge fabrication all require the same level of QMS but differ in fabrication capability. Three categories are available:

- SBR: Certified Bridge Fabricator – Simple
- IBR: Certified Bridge Fabricator – Intermediate (Major)
- ABR: Certified Bridge Fabricator – Advanced (Major)

PR1.4 **Certification Program for Structural Steel Erectors (CSE)** applies to Erectors who erect, via bolting and/or welding, structural steel frames for buildings and similar structures. See Section 2.1 of the AISC 303 *Code of Standard Practice for Steel Buildings and Bridges* for the definition of *structural steel*. Applicants and Participants of this program are required to adhere to these **Requirements** and to the **Supplemental Requirements for Structural Steel Erectors**.

PR1.5 **Certification Program for Fabricators of Hydraulic Steel Structures (HYD)** applies to Fabricators who fabricate and supply hydraulic steel structures. Applicants and Participants of this program are required to adhere to these **Requirements** and to the **Supplemental Requirements for Fabricators of Hydraulic Steel Structures**.

PR1.6 The applicable AISC Certification Standard (hereinafter referred to as the **Standard**) is identified in the **Supplements**. Whenever there is a conflict between the **Requirements** or **Supplements** and the **Standard**, the **Requirements** and **Supplements** govern.

PR1.7 **Requirements** and **Supplements** are included in the site audit scope, and a nonconformance would result in a Corrective Action Request being issued by the auditor.

PR1.8 Supplemental Program Requirements include a Commentary section that provides clarification and further explanation of criteria found in the **Standard**.

PR1.9 Falsification of records or attempts to influence an auditor or the certification process in any manner by employees or other representatives of the Participant or Applicant, deemed to be a fraud or attempted fraud on the certification process, is not permitted. If this occurs at any time during the application or renewal process prior to a final determination by the AISC Certification Review Group (CRG), the certification process will be suspended and the case referred to the CRG for determination. Any existing certifications remain valid until the CRG has made its determination.

PR1.10 The Fee Schedules are provided at [www.aisc.org/certification](http://www.aisc.org/certification) and are subject to change.

PR1.11 AISC relies on email to communicate with Applicants and Participants. Any changes to contact information MUST be provided to AISC. See PR4.9 concerning Company Profile. It is the Participant/Applicant’s responsibility to ensure communications are being received.
If a Participant/Applicant opts out of receiving email communication from AISC or AISC Certification, important program information may be missed, such as bulletins, newsletters and other emailed mass communications. AISC Certification is not responsible for the consequences from missed emails.

Section 2 Applying for Certification (For Applicants; Participants should refer to Section 8, Scope Changes)

Application begins by submitting the online application. Within the following seven days, applicants must then submit the Extended Application. Once the extended application has been submitted an applicant will have an additional 14 days to submit the completed Application Document Submittals along with full payment. These documents will be used for the eligibility and document review. Full payment must be received before the application will be reviewed. More information on applying for certification, including the online application, can be found at www.aisc.org/certification/applicants.

An eligibility review is the first step in the application review process. This review will confirm that the applicant meets the necessary prerequisites for certification. This step will also confirm whether the applicant will have work in the shop or active jobsite (see Supplemental Requirements for more information) during a future site audit to demonstrate capability to meet the program requirements. If work in shop or field will not be available, mock exercises may be allowed if provided by AISC. If an Applicant does not meet the requirements of the application and eligibility review process, the original payment less the Application Review Fee will be refunded, and the application process will be terminated.

Initial audits for applicants are performed in two stages. Stage 1 is a Documentation Audit of the applicant’s Quality Management System (QMS). For erector applicants, their Safety Management System (SMS) is also included. All Stage 1 reviews follow the process described in Section 3. After Stage 1 is satisfactorily completed, the Stage 2 (Site Audit) will be scheduled.

Following the successful completion of a Stage 1 document audit, the Stage 2 site audit must be completed within one year. If the Stage 2 site audit does not occur within one year, the application will be terminated, and the application fee will not be refunded.

If the Applicant cannot complete the Stage 1 document audit in the allotted time, the Stage 1 process will be terminated and the application fee refunded less the Documentation Audit Fee. The applicant must wait at least three months from the date of Stage 1 termination before reapplying.

An Expedited Application Process (EAP) is available on the Fee Schedule for domestic applicants. The EAP places a priority on the Stage 1 document audit, and the Stage 2 Site Audit will be scheduled within the timing indicated on the Fee Schedule. The success of this process relies on timely responses from the Applicant during the Stage 1 documentation audit, availability of work in the field or shop, and the scheduling of an auditor.
Section 3 Document Audit—Stage 1  (required for Applicants and may be required for Scope Change Applications or as directed by Certification Review Group)

PR3.1  Following the first review of the Stage 1 or other document audit, an Applicant or Participant will be issued a Document Deficiency Audit Request (DDAR). All deficiencies noted on the DDAR must be responded to within 30 days of receipt, or the Stage 1 process will be terminated and the application fee refunded less the Documentation Audit Fee.

PR3.2  If revised DDARs are issued, they must be responded to within 15 days of receipt, or the Stage 1/Scope Change process will be terminated and the application fee refunded less the Documentation Audit Fee.

PR3.3  The resolution process for the DDAR will continue for up to 90 days after the date of the initial DDAR. If the Stage 1 audit is not completed within 90 days, then the process will be terminated and the application fee refunded, less the Documentation Audit Fee. If the Stage 1 audit is terminated, the applicant must wait at least three months from the date of Stage 1 termination before reapplying.

PR3.4  All documents required for the Stage 1 document audit shall be submitted in English.

Section 4 Planning for the Site Audit  (Applicants and Participants)

PR4.1  The current fee schedule is posted on the AISC website and is subject to change.
   ●  Applicants: Refer to PR2.1 concerning payment of fees.
   ●  Renewing participants: Invoices will be delivered by email prior to the renewal audit. Failure to pay an invoice by its due date will result in audit cancelation and non-renewal of certification.
   ●  Cancellations occurring after the renewal invoice has been paid are subject to a cancellation fee - see Fee Schedule.

PR4.2  Applicants and Participants are eligible to apply for as many AISC certifications and endorsements as provided by these Requirements. Separate certificates are issued for fabricator/manufacturer and erector programs and require separate applications, documentation audits, and site audits. Refer to Section 8 to add programs to an existing certificate, or see Section 2 if not currently certified.

PR4.3  The Participant/Applicant will be notified of the assigned audit date via email. Any requests to reschedule a site audit will be assessed the Rescheduled Site Audit Fee per the Fee Schedule.

PR4.4  Any requests from AISC to confirm the site audit date must be responded to within the prescribed time frame, or the audit may be cancelled and Rescheduled Site Audit Fee will be assessed.
PR4.5 When rescheduling occurs, the site audit must be completed a minimum of 45 days prior to expiration of the certificate to avoid the expiration of the certificate before a renewal is issued.

PR4.6 AISC reserves the right to reschedule a site audit due to circumstances beyond its control (i.e., weather, flight cancellations, political environment changes, unexpected auditor unavailability, etc.). If this occurs, no rescheduling fees will be assessed, and every attempt will be made to reschedule the audit as soon as possible.

PR4.7 AISC Certification conducts periodic auditing. A typical three-year Certification Cycle consists of the following, at a minimum:
- Initial Certification (RFN) or a Recertification (RF)
- First Renewal (R1)
- Second Renewal (R2)

The last characters of the audit number indicate the certification cycle, not the scope of the site audit. The scope of the site audit, which are the activities to be audited, is indicated in the audit plan.

PR4.8 A quality manual, documented procedures, and records shall be available upon request by AISC and provided in English.

PR4.8.1 During the Recertification audit (RF), the auditor will perform an Onsite Documentation Audit of the quality manual and procedures to assess their ongoing compliance.

PR4.9 Company Profile includes company information and contact information, Refer to PR1.11. Failure to provide timely notification of changes to the Company Profile may result in a canceled or incomplete site audit or suspension of certification. Changes in ownership, location, and company name may require additional audits. Therefore, the Participant is required, within 30 days of the change, to complete the Company Profile form on the AISC website to inform AISC of changes to any of the following:

Facility: Company name, physical address of facility, mailing address, and ownership

Contacts: The names, telephone, and email of the following designated individuals:
- Principal Officer
- Marketing Representative
- Certification Contact or Management Representative (may be the same person)
- Accounts Payable

While positions identified above may be combined, a minimum of TWO unique email addresses for two DIFFERENT employees is required to ensure proper communication. The Participant’s continued certification is at risk if proper email addresses are not provided.
PR4.10 Applicants must submit the record of the internal audit and management review as required by the Application Document Submittal process. Records of the internal audit and management review must include evidence of the audit results, when these activities took place, the person(s) performing the audit/review, and evidence that all applicable certification programs and endorsements were audited.

PR4.11 For Participants seeking renewal of certification, the internal audit must include all required certification programs and any endorsements. The internal audit and management review must be completed at least 30 days prior to, but not greater than, 12 months before the site audit. Records of the internal audit and management review must include evidence of the audit results, when these activities took place, the person(s) performing the audit/review, and evidence that all applicable certification programs and endorsements were audited. Participants may perform a single audit or perform several audits throughout the year, as long as all applicable certification programs and endorsements are audited.

PR4.12 The designated Management Representative may perform the entire internal audit, including endorsements. It is preferred to use other personnel to perform the internal audit so that independence from the function being audited can be maintained.

PR4.13 International Travel Advisory: If the Participant/Applicant company is located in a country for which the U.S. Department of State has issued a “Travel Alert” or “Travel Warning” advising U.S. citizens against travel, the AISC certification site audit may not be conducted. In that case, a current certificate may not be renewed before the expiration date. For Applicants, the application process cannot proceed.

**Section 5 During the Site Audit**

PR5.1 To ensure that the audit maintains impartiality and avoids any conflicts of interest, Participants/Applicants cannot have used the auditor assigned to them as a consultant in the two years prior to the audit date, nor can the auditor have been an employee of or contracted by the Participant/Applicant within the previous five years. If either conflict of interest exists with the assigned auditor, the Participant/Applicant is obligated to notify AISC Certification within five business days of receiving the auditor assignment, and the audit will be reassigned to a different auditor at no expense to the Participant/Applicant. If notification is not received within this time frame, the audit reassignment will be at the Participant’s/Applicant’s expense.

PR5.2 All correspondence, discussions and interviews will be conducted directly with or in the presence of the Participant's/Applicant’s designated representative (normally the management representative or certification contact). Consultants may be present during the site audit as an observer, but they cannot participate in the audit nor can they be named as a designated representative.
Consultants include those who have participated in the establishment and implementation of the quality management system through activities such as preparing/producing manuals and procedures or who give specific advice, instruction or solutions toward development and implementation of the quality management system. Consultants who are under contract to provide ongoing, specific services such as safety management, NDE inspection, translators, etc. may participate during the site audit as determined by the auditor.

PR5.3 Observers may be present during the site audit but shall not participate in or influence the audit process or the outcome of the audit, as determined by the auditor. At the auditor’s discretion, observers may be asked to leave the audit. Noncompliance will result in the audit being suspended, and an Additional Site Audit Fee will be assessed to complete the audit at a later date.

PR5.4 AISC retains the right to send observers to any site audit for the purpose of monitoring program compliance, internal audits, or third-party audits. AISC will provide advance notification of the observer and the purpose of the observation to the Participant/Applicant.

PR5.5 All references of Section 3 of the Standard and the quality manual procedures and forms required in Section 1.5 of the Standard, must be available in English.

PR5.5.1 Participants are required to have the 2016 or 2019 version of Selected ASTM Standards for Structural Steel Fabrication, as published for AISC, or equivalent content to satisfy Section 1.3.c. of the Standard.

PR5.6 Interpreters must be provided by the Participant/Applicant for the auditor’s communication during the site audit, as necessary. Interpreters must be knowledgeable of the appropriate industry terminology.

PR5.7 All personnel involved in the quality management system may be either employees of or contracted by the Participant/Applicant. In the case of the latter, contract status and qualifications must be demonstrable.

PR5.8 During the site audit, the auditor will identify and document in the Site Audit Findings report, five audit findings described below and summarized in Table 1. Audit findings can indicate conformity meeting or exceeding requirements, or an audit finding can indicate nonconformity where requirements are not met. These audit findings and the needed action for each is:

- **Identified Strengths.** Functions or processes that could represent process excellence, unique ability, or potential competitive advantage. These are to be reviewed during the management review meeting, and no further action is required.

- **Opportunities for Improvement.** Suggestions or opinions based on the auditor’s experience that could add value to the QMS or the erector’s safety management systems. These are to be reviewed during the management review meeting, and no action is required.
Areas of Concern. Used to inform participants of recent changes to required references, Requirements and/or Standard. They require the Participant to engage its Quality Management System or the erector Quality/Safety Management Systems, to review, evaluate and implement correction of the items listed. Areas of concern will be reviewed at the next site audit for effective implementation. Any found to be not effectively implemented will be viewed as a breakdown of the Quality/Safety Management System, and a Corrective Action Request will be issued.

Audit Nonconformances. Written to indicate that a nonconformity has been observed that is found to be a single lapse in the QMS or an omission of a requirement that does not indicate a failure of the QMS to control products and processes. Audit Nonconformance requires the Participant/Applicant to use their corrective action system to document the nonconformance, identify the root cause and implement actions to prevent recurrence. The Nonconformance will be reviewed during the next site audit. If, during the next site audit the actions taken are observed to be ineffective, a Corrective Action Request will be issued.

Corrective Action Requests (CAR). When a nonconformity is observed that indicates a breakdown in the QMS that may result in the release of nonconforming product, result in the failure of the QMS to meet its objectives, or a nonconformance has been found to be repetitive indicating a systemic issue then a CAR will be issued. See Section 6.

<table>
<thead>
<tr>
<th>Description</th>
<th>Identified Strengths</th>
<th>Opportunities for Improvement (OFI)</th>
<th>Areas of Concern (AoC)</th>
<th>Audit Nonconformances</th>
<th>Corrective Action Requests (CAR)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Include in Management Review Meeting?</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
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<td>Engages the corrective action system?</td>
<td>n/a</td>
<td>n/a</td>
<td>Maybe. The QMS shall define if so per Section 16 of the Standard</td>
<td>Yes</td>
<td>Yes</td>
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<tr>
<td>When will QMC review the results?</td>
<td>n/a</td>
<td>n/a</td>
<td>At the following audit</td>
<td>At the following audit</td>
<td>Immediately per the CAR process of Section 6</td>
</tr>
</tbody>
</table>
PR5.8.1 Repetitive CAR. Failure to effectively implement corrective action for a previous CAR will result in a new CAR being marked “Repetitive”. Repetitive CAR(s) indicate a breakdown of the management system and will affect the decision made by the Certification Review Group and may put the certification at risk. See section 7.

PR5.9 At the conclusion of the site audit, the Site Audit Scope sheet will be signed by the Management Team Representative and the auditor. Signing this form indicates that the audit has been completed as described on the form and that the Participant/Applicant understands the audit results and requirements for completing any Corrective Action Requests. It also indicates that there were no conflicts of interest between the auditor and the company and that any changes needed to the Company Profile have been discussed.

Section 6 Corrective Action Request Process

PR6.1 An auditor may issue Corrective Action Requests (CARs) during the site audit. If so, the Participant/Applicant has 30 calendar days from the last day of the site audit to respond to each CAR. Failure to respond by the Evidence Due Date indicated on the Site Audit Scope Sheet will result in the certification(s) being Withdrawn or Denied.

PR6.2 Each CAR response must include the completed CAR form which contains:

- Actions to immediately correct or contain the nonconformance
- Result of root cause analysis
- Actions taken to correct root cause and prevent recurrence
- Supporting evidence files that verify the planned actions have been implemented

PR6.2.1 The CAR form and evidence will be reviewed by QMC. The reviewer may make a request for more information, in which case, the Participant/Applicant has 14 days to respond. The reviewer may make a second request for further information, in which case, the Participant/Applicant has seven days to respond. Failure to respond to a CAR within the stated timeframes will trigger an “unsatisfactory” result. Any CAR that is not satisfactorily responded to after the three attempts will be marked “unsatisfactory”. All reviews of corrective action, whether satisfactory or unsatisfactory, are forwarded to AISC. An unsatisfactory recommendation may put the certification at risk.

PR6.3 If the Participant/Applicant chooses to dispute or “challenge” the issuance of a CAR, a challenge may be submitted by emailing QMC at cars@qmcauditing.com with the reason(s) for the challenge within 30 days of the conclusion of the site audit.

Challenging a CAR does not negate a participant’s obligation to resolve all other CARs within the required timeframe.
The Participant/Applicant will then be contacted by AISC concerning the challenge, and
an investigation will follow. The investigation concludes with a decision by AISC on the
challenge, and the Participant/Applicant will be advised of the results and any additional
actions needed.

PR6.4 All documents required for the corrective action process, including evidence, shall be
submitted in English.

Section 7 Certification Decisions

PR7.1 The AISC Certification Review Group (CRG) makes decisions concerning certification.
This group consists of four voting members:
- Director of Certification
- Manager of Technical Services
- Certification Program Analyst
- Program Manager
- Subject Matter Experts, as needed (non-voting)

PR7.2 After each site audit is completed and any corrective action requests have been
reviewed, the results will be forwarded to the CRG. The CRG will also consider the prior
three-year certification history and audit findings, and any complaints or allegations that
have been received by AISC, to review as part of the basis for determining certification.

Audit findings from an individual audit may not lead to a negative decision. However, if
the audit findings reveal a pattern of repetitive non-conformances over the past
three-years, it may indicate a breakdown in the participant’s quality management
system. Repetitive non-conformances, especially non-conformances that reflect
management disregard for their own quality management system are grounds for a
withdrawal of certification.

PR7.3 It is the role and responsibility of the CRG to deny, grant, renew, expand, reduce,
suspend, or withdraw certification to a Participant/Applicant based on objective evidence
of an applicant’s or participant’s ability to satisfy these Requirements.

PR7.3.1 The following definitions apply to CRG decisions:

Deny - CRG has determined that the Applicant’s QMS or portion of the QMS has failed
meet the Requirements and the requested certification(s) or endorsements will not be
granted.

Grant - CRG has determined that the Applicant has successfully demonstrated the
capability to meet the Requirements and certification will be approved.
Expand - Following an application to add another certification or endorsement to an existing participant’s certification scope, the CRG has determined that the additional requirements have been met and the certification scope includes new certification(s) and/or endorsement(s).

Renew or Renewal - CRG has reviewed the results of the renewal audit and has approved the continued certification as stated on the Site Audit Scope.

Reduce - Upon review of the audit results, the CRG has determined that one or more certifications or endorsements will not be approved and the scope of the certification will reflect the removal of those certifications or endorsements.

Withdraw - CRG has made the decision to no longer continue the certification process and any issued certificates will expire on the date indicated.

Suspend - The current certification is still valid but will not be renewed until further actions are successfully completed. This may occur as a result of a CRG decision or as part of the Appeal process.

PR7.4 CRG may choose to grant certification for less than one year if it is determined that an additional site audit is needed to provide evidence of an effectively functioning QMS. When this occurs, any associated costs will be assessed according to the current fee schedule for the Additional Site Audit. No additional scope(s) will be considered in this site audit. AISC also reserves the right to conduct short-notice or unannounced audits, if required.

PR7.5 CRG may require a Supplemental Audit to be conducted. This will be coordinated with the participant, and all costs associated with the Supplemental Audit will be incurred by AISC.

PR7.6 AISC will make information concerning certification status publically available on its website. The information disclosed includes company name, location, contact name, email and phone number, certifications held, and status of certification.

PR7.7 Participants who hold a current valid certificate are eligible to use and display the Certified Fabricator/Manufacturer logo or Certified Erector logo, as applicable.

PR7.8 Multiple fabricator/manufacturer certifications and endorsements are included on a single certificate. Erector certification and endorsements are included on a single certificate.

PR7.9 For Participants/Applicants of the Erector Certification Program, the certificate will cover their regional office(s) or operation(s) only if all of the following conditions are met:
   A. The regional office(s) or operation(s) is doing business under the same company name.
   B. The Executive Management is the same as for the main office.
   C. The same Quality and Safety Management Systems were audited for the main office and project site.
PR7.10 The Certificate contains the following information:

- Name of the company holding the certification
- Address of the certified facility which is the address where the site audit occurs (for Erectors, this is the address of the office)
- Listing of the certification(s) and endorsement(s) held
- Date certificate was issued
- Date certificate expires
- Signature of AISC officer
- Unique identification number

Certificates are non-transferable, and only one facility address will be listed on a certificate.

Section 8 Making changes to the Certification Scope (for Participants changing a current certificate)

PR8.1 A Participant may request changes to its certification. All forms are found at www.aisc.org/certification.

- **Expanding the scope of certification.** Participant must complete the AISC Certification Scope Change Application when they wish to apply to add additional certification(s) or endorsements to a current certificate
- **Reducing the scope of certification.** The Participant may reduce scope prior to or during the site audit. Reducing the scope of the certification is completed when a Participant no longer desires to be audited to a certification(s) or endorsement(s) that is on the current certificate
- **Withdrawing certification.** The Participant may withdraw certification by completing a Certification Withdrawal Request found at www.aisc.org/certification. Upon the decision to withdraw from the certification process, the current certificate will expire on the date indicated. Participants that withdraw their certification will be required to follow the application process to regain certification.

PR8.2 Changes to the certification scope may require additional submittals, document audits, site audits, mock exercises, and fees. All scope change requests shall be submitted to AISC for review.

PR8.3 For a scope change to be considered at a Participant's next renewal audit, the Scope Change Request must be received within two weeks of from the issued invoice date for renewal audits. The initial requests must include a completed scope change application sent to application@aisc.org. Scope change application documents and payment must be sent within 30 days from the date of invoice. Additionally, the scope change application eligibility review and documentation audit both must be completed 60 days prior to the next scheduled site audit. Requests not received within these deadlines will
not be considered for the Participant’s next regularly scheduled renewal audit. Additional fees will be applied for scope changes that are requested to be completed prior to the next site audit.

Section 9 Complaints, Allegations and Appeals

PR9.1 Participants/Applicants that have their certification withdrawn/denied/reduced may reapply six months after the date of notification by AISC. Alternatively, the decision may be appealed using the AISC Appeal Policy. Certification fees will not be refunded.

PR9.2 Participants will, at all times, abide by the AISC Progressive Action Policy for Certification Complaints and Allegations (Complaint Policy) and the AISC Appeal Policy for Certification Determination (Appeal Policy). Both policies are available at www.aisc.org/certification.

PR9.3 The Complaint Policy establishes the process for resolving allegations and complaints involving Participants that have been certified by AISC through any of the certification programs. Investigations and resulting actions will follow a prescribed series of progressive steps to evaluate the information provided and determine the appropriate course of action.

An “Allegation” is an informal request for action from any party with knowledge of activities by an AISC Certification Program Participant that are alleged to be in violation of these Requirements. Submission of written substantiating information is not required.

A “Complaint” is a formal request for action from a party involved in the contract of a construction project for which an AISC Certification Program Participant has provided materials or services. Submission of written substantiating information is required along with adequate supporting documentation.