



SRCC DOCUMENT TPA-1

Accreditation Policy For Testing Programs Evaluating Solar Components, Subsystems, and Systems

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SRCC Laboratory Testing Program Accreditation Policy

1.0 Policy Purpose.

- 1.1 This document sets forth the Solar Rating and Certification Corporation (SRCC) Laboratory Testing Program Accreditation Policy (the Policy). SRCC certifies solar collectors based on: appropriate standards; and, testing information received from laboratories operating SRCC Accredited Testing Programs, and with the cooperation of solar product manufacturers and suppliers.
- 1.2 SRCC certifies complete solar energy systems based on safety, design, and performance criteria, as set forth in this Policy, including Section 7.0 Test Methods.
- 1.3 The provider of the solar component to be tested provides physical product and product information to the testing laboratory. Upon completion of laboratory testing according to the criteria set forth in this Policy, and any other requirements identified by the Laboratory Testing Program Accreditation Committee (Accreditation Committee), the laboratory shall transmit completed documentation directly to SRCC for product review and certification.
- 1.4 SRCC does not provide product or laboratory testing services.
- 1.5 This Policy is intended to:
 - 1.5.1 Implement appropriate review and accreditation requirements for laboratory testing of certain solar equipment;
 - 1.5.2 Adopt appropriate standards for such accreditations; and,
 - 1.5.3 Establish an appropriate accreditation system for laboratory evaluation and testing of solar equipment.

2.0 Policy Scope.

- 2.1 The criteria, requirements, and procedures contained in this Policy serve as the primary means for evaluating an applicant's Laboratory Testing Program to assure, at a minimum, the laboratory's ability to conduct specific tests of solar products in accordance with SRCC certification requirements, as set forth in Policy Section 7.0 Test Methods and other SRCC policies. Among other conditions of SRCC accreditation, each applicant laboratory must adhere to the following requirements:

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- 2.1.1 All product evaluation and testing shall be conducted in a technically competent and professional manner;
- 2.1.2 All product evaluation and testing shall be free from influence or conflicts of interest that could affect the laboratory's objectivity or ability to provide unbiased test results; and,
- 2.1.3 All product evaluation and testing shall be in compliance with the requirements and procedures of the test methods authorized by this Policy and accepted scientific practice.
- 2.1.4 All product evaluation and test reports shall be transmitted directly to SRCC for evaluation. No product evaluation or test reports will be accepted unless transmitted directly from the laboratory or testing facility which conducted the tests or evaluation of the product for which SRCC certification is sought.
- 2.2 SRCC certifies solar equipment of various types, which are tested under several different protocols, as identified in Policy Section 7.0 Test Methods and other SRCC policies.
- 2.3 A laboratory may apply for accreditation of one (1) or more specific Testing Programs to conduct solar equipment evaluations according to the applicable Test Method, or any combination of Test Methods, so long as all Test Methods are identified and accredited pursuant to the laboratory's ISO/IEC Standard 17025 accreditation. Accreditation is granted based on the laboratory's ability to conduct one (1) or more of the Test Methods identified in Section 7.2 of this Policy.
- 2.4 Any laboratory, regardless of its geographic location, may apply for SRCC accreditation of its Testing Program, so long as it meets the requirements of this Policy.
- 2.5 The applicant laboratory must demonstrate, and provide evidence, that it has been accredited under ISO/IEC Standard 17025 by an authorized ISO accreditation authority.

The SRCC Laboratory Testing Program Accreditation Committee may consider other factors relevant to laboratory accreditation when reviewing an application, including, but not limited to, the following: geographic location; weather conditions; facility conditions; and, personnel availability at the laboratory location. SRCC may, at its sole discretion, choose to limit, place conditions on, or deny SRCC accreditation for a laboratory's Testing Program.

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3.0 Policy Definitions.

- 3.1 Accreditation: Formal evaluation and notification by the SRCC that a Testing Program operated by a laboratory has met the criteria and standards set forth in this Policy to perform the specific tests identified in the SRCC accreditation for the purpose of providing test data to support requests for solar equipment certification.
- 3.2 Accredited Testing Program: A Laboratory Testing Program that has been granted SRCC accreditation.
- 3.3 Product Certification: A formal, written notice issued by SRCC, representing that the identified Solar Collector, Solar System, or other solar product has been certified to be in compliance with all applicable SRCC certification standards and specifications. SRCC certification includes the determination that the required product testing information was obtained from a laboratory operating an SRCC Accredited Testing Program, pursuant to this Policy.
- 3.4 Accreditation Committee: The Laboratory Testing Program Accreditation Committee of the Solar Rating and Certification Corporation. This Committee is an SRCC Standing Committee, whose members are appointed by the SRCC Chair, and which has the responsibility of evaluating laboratory testing program accreditation applications, granting testing program accreditation, and determining the disposition of Laboratory Testing Program Accreditation matters.
- 3.5 Laboratory: An organization or part of an organization engaged in the activities of solar equipment testing and/or inspection, and accredited under ISO/IEC Standard 17025.
- 3.6 Quality: The totality of features and characteristics of a product or service which bear on its ability to satisfy a given need.
- 3.7 Test: The measurement of physical, chemical, or functional characteristics of materials, systems, or components under a predetermined set of conditions, to a specific standard and/or procedure as specified by SRCC.
- 3.8 ISO/IEC Standard 17025: International Organization for Standardization (ISO) Standard 17025 establishes appropriate operational criteria for testing laboratories. The Standard is intended to implement a quality system for improving a laboratory's ability to consistently produce valid results, and serves as the basis for ISO accreditation by an authorized ISO accrediting body. Like other ISO Standards, Standard 17025 provides technical specifications and other specific criteria for the operation of laboratories, in order to ensure that materials, products, processes, and services are fit for the intended purpose.

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- 3.9 IEC: The International Electrotechnical Commission (IEC) is the primary global organization responsible for the preparation and publication of international standards for electrical, electronic, and related technologies. IEC Standards serve as a basis for national standardization, and as important industry references.

4.0 SRCC Laboratory Testing Program Accreditation.

- 4.1 In addition to other Policy requirements, a laboratory testing program must satisfy the following conditions of SRCC accreditation:
- 4.1.1 Laboratory Accreditation to the most current version of ISO/IEC Standard 17025; “*General requirements for the competence of testing and calibration laboratories*,” by an entity recognized as an ISO/IEC accrediting organization in the laboratory’s sphere of influence where testing services are offered to SRCC certification applicants. Such ISO accrediting organization must be authorized to conduct accreditation audits by the applicable country’s ISO representative organization.
 - 4.1.2 Appropriate documentation evidencing that the laboratory’s current Scope(s) of Accreditation to ISO/IEC Standard 17025 include the tests for which the laboratory seeks SRCC accreditation.
 - 4.1.3 Complete and accurate Accreditation Application information and materials;
 - 4.1.4 All other documentation required in, or related to, the Accreditation Application;
 - 4.1.5 All applicable Accreditation Application fees and other charges;
 - 4.1.6 Satisfaction of all SRCC Laboratory Testing Program criteria as determined by SRCC; and,
 - 4.1.7 Completion and submission of all SRCC Testing Program Accreditation documentation as required by this Policy or the SRCC Accreditation Committee.

5.0 Application for Accreditation.

- 5.1 A laboratory seeking Testing Program Accreditation must submit a complete SRCC Laboratory Testing Program Accreditation Application to the Accreditation Committee, and satisfy all requirements of SRCC policies. An application for accreditation is provided on the SRCC Internet site, located at www.solar-rating.org.

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- 5.2 Among other information, a complete Accreditation Application must include the following:
 - 5.2.1 A valid and current copy of the laboratory's ISO/IEC Standard 17025 accreditation documentation; and,
 - 5.2.2 The accurate identification of the individual tests for which the laboratory is seeking SRCC accreditation.
- 5.3 Upon receipt of an Accreditation Application, SRCC shall perform a preliminary review of the Application and notify the applicant of any identified or potential deficiencies. SRCC reserves the sole and exclusive right and discretion to determine whether an applicant has satisfied the applicable standards and requirements necessary for SRCC Laboratory Testing Program Accreditation.
- 5.4 A laboratory may reapply for testing program accreditation where: an Accreditation Application has been rejected or denied; or, and Application has been withdrawn.

6.0 Fees and Charges.

- 6.1 The SRCC Board of Directors shall establish and regulate all fees and charges related to the Laboratory Testing Accreditation Program, which may be modified from time to time as appropriate.
- 6.2 In order to be processed and reviewed, an Accreditation Application must be accompanied by the complete payment of all application fees and related SRCC charges, as set forth in the SRCC Testing Laboratory Program Accreditation Application.
- 6.3 Accreditation Application fees and charges are not refundable to the applicant laboratory.

7.0 Test Methods For Which Accreditation May Be Granted.

- 7.1 The SRCC Board of Directors, in consultation with the Laboratory Testing Program Accreditation Committee, shall determine and identify each Test Method for which SRCC will grant Testing Program accreditation. In its sole discretion, the SRCC Board may add or remove Accredited Test Methods.
- 7.2 The following Test Methods are eligible for Laboratory Testing Program Accreditation.

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- 7.2.1 ISO Standard 9806-1: “Test methods for solar collectors – Part 1: Thermal performance of glazed liquid heating collectors including pressure drop.”
 - 7.2.2 ISO Standard 9806-2: “Test methods for solar collectors – Part 2: Qualification test procedures.”
 - 7.2.3 ISO Standard 9806-3: “Thermal performance of unglazed liquid heating collectors (sensible heat transfer only) including pressure drop.”
 - 7.2.4 ASHRAE Standard 93: “Methods of testing to determine the thermal performance of solar collectors,” only as it applies to air-heating collectors.
 - 7.2.5 SRCC TM-1 Standard: “SDHW system and component test procedures.”
- 7.3 A SRCC Accredited Laboratory Testing Program shall conduct tests in accordance with one (1) or more Test Methods identified in Section 7.2. Accredited Laboratory Testing Program Reports shall not be accepted by SRCC unless the Test Method protocols set forth in the Laboratory’s SRCC Testing Program Accreditation Application are followed in their entirety.

8.0 Accreditation Conditions and Maintenance.

- 8.1 Evidence of Accreditation: SRCC Accreditation of a Laboratory Testing Program shall be evidenced by a letter or certificate of accreditation from the Accreditation Committee, which shall be posted in the laboratory.
- 8.2 ISO Accreditation Maintenance: SRCC Laboratory Testing Program Accreditation shall terminate in the event that the laboratory’s ISO/IEC Standard 17025 accreditation expires or is otherwise terminated.
- 8.3 Compliance with Legal Requirements: A laboratory providing accredited SRCC Testing Program services shall satisfy all local, state, and federal legal requirements pertaining to the operation and administration of such services and other laboratory activities.
- 8.4 Period of Accreditation/Fees: An SRCC Testing Program Accreditation shall remain in force as long as the laboratory complies with the conditions of this Policy, and remits all annual accreditation and any site inspection fees and charges.
- 8.5 Inspection of Laboratories: In order to assure initial compliance with the conditions of Testing Program Accreditation, SRCC will conduct a laboratory site inspection. In order to assure continued compliance with the requirements for

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accreditation, a laboratory providing SRCC accredited testing programs shall grant the Accreditation Committee, or its authorized representative, the right to conduct subsequent inspections of the laboratory and record-keeping facilities, subject to the provisions of this Section. The laboratory shall cooperate with any SRCC inspection in all aspects.

8.5.1 SRCC shall provide a four (4) calendar day minimum notice of inspection to the laboratory holding the Testing Program Accreditation.

8.5.2 During an inspection, a laboratory providing SRCC accredited testing program services shall make available all records as described in the notice of inspection, including, but not limited to:

8.5.2.1 Equipment calibration records;

8.5.2.2 Solar collector efficiency test records; and,

8.5.2.3 Personnel records regarding responsibility for tests.

8.5.3 During an inspection, the laboratory shall be represented by the Laboratory Director or Testing Laboratory Supervisor.

8.5.4 During the inspection, the laboratory shall make available individual testing personnel, as requested by the SRCC.

8.6 Use of Authorized SRCC Marks: An authorized SRCC mark and/or logo may be used by a laboratory conducting an SRCC Accredited Testing Program, as long as all current accreditation fees and charges owed by the laboratory have been paid when due, and the Laboratory Testing Program Accreditation by SRCC has not been revoked, suspended or terminated by SRCC, and all terms of this Policy are met.

8.7 Termination or Suspension of Accreditation: In the event that a laboratory fails to satisfy the accreditation requirements of this Policy, or other SRCC policies, the accreditation of the Laboratory Testing Program may be terminated, revoked, or suspended at the sole discretion of SRCC.

9.0 Renewal of Accreditation.

9.1 Accreditation renewal may be granted by the Accreditation Committee if the applicant continues to satisfy all of the requirements and conditions of accreditation set forth in this Policy, and otherwise directed by SRCC. Among other conditions of accreditation renewal:

9.1.1 The laboratory must submit to the Accreditation Committee evidence of renewal of its accreditation to ISO/IEC Standard 17025 within thirty (30) calendar days of expiration of such ISO accreditation.

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- 9.1.2 The laboratory must comply with all SRCC policies and procedures regarding Accredited Testing Programs;
 - 9.1.3 The laboratory must make payment of Laboratory Accredited Testing Program fees and charges when due, as billed by SRCC, and;
 - 9.1.4 The laboratory must demonstrate compliance with any other specific requirements set forth in the letter or certificate of accreditation, or otherwise directed by SRCC.
- 9.2 In order to be eligible for Testing Program Accreditation renewal, a laboratory must provide to SRCC all requested verifications of compliance with any legal or organizational requirement which may affect the laboratory's ability to safely and legally continue business operations.

10.0 Voluntary Termination of Testing Program Accreditation.

- 10.1 A testing laboratory may voluntarily terminate an SRCC Testing Program Accreditation by providing written notice of its intent to the Accreditation Committee. The notice shall state the effective termination date and the reasons for the termination.
- 10.2 Any SRCC Testing Program fees and charges paid by a laboratory are non-refundable in the event of a voluntary termination of SRCC accreditation.

11.0 Accredited Testing Program Deficiencies, Violations, and Sanctions.

- 11.1 Notice of Deficiency and Resolution Process: In the event that a laboratory operating an Accredited Testing Program violates, or otherwise does not comply with, the provisions of this Policy or other SRCC requirements, the Accreditation Committee shall issue a Notice of Deficiency and Violation (Notice) to the laboratory. Upon receipt of such Notice, the laboratory shall: respond to each identified deficiency and/or violation; provide all relevant information and materials; and, otherwise satisfy all requirements set forth in the Notice. Following the timely submission of such response to the Notice, all deficiency and violation matters shall be resolved pursuant to the SRCC Certification and Accreditation Appeal Policy (Appeal Policy) and this Policy Section.
- 11.2 Failure to Respond: In the event that the laboratory does not provide a timely and complete response to a Notice, the Accreditation Committee may issue any sanction(s) or corrective action(s) authorized by this Policy, the Grievance Policy, or other applicable SRCC Policy. The laboratory shall comply fully with all sanctions and/or corrective actions issued by the Committee.

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- 11.3 Grounds for Sanction and Corrective Actions: Among other grounds, the Accreditation Committee may issue accreditation sanctions and/or corrective actions under the following circumstances:
- 11.3.1 An Accreditation Application contains a material misrepresentation;
 - 11.3.2 A laboratory makes a public misrepresentation concerning its activities, operations, or a tested product;
 - 11.3.3 A laboratory fails to comply with a condition of the accreditation;
 - 11.3.4 A laboratory violates an SRCC Policy;
 - 11.3.5 A laboratory fails to remit required accreditation fees and charges to SRCC consistent with the terms; or,
 - 11.3.6 Where other good and reasonable cause exists and supports the issuance of sanctions or corrective actions.
- 11.4 Deficiency and Violation Decision: Based on the information available, the Accreditation Committee, in its sole discretion, shall determine whether a deficiency or violation exists, or dismiss the Notice. Upon the finding of any deficiency or violation, the Accreditation Committee shall review the record, determine the severity of such deficiency(ies) or violation(s), and issue a Deficiency/Violation Decision. In its sole and exclusive discretion, the Committee may issue one or more of the following actions:
- 11.4.1 Private or Public Reprimand.
 - 11.4.2 Conditions of Continued Accreditation.
 - 11.4.3 Accreditation Probation. The term of a probationary period shall be in one (1) month increments through an initial six (6) months. The Committee may determine the duration of the Probationary Period within this six (6) month time frame.
 - 11.4.4 Accreditation Suspension. The term of a suspension shall be in six (6) month increments, as determined by the Committee.
 - 11.4.5 Accreditation Revocation. After revocation of accreditation by SRCC, a laboratory may apply for accreditation after two (2) years following the date of the revocation.

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12.0 Deficiency and Violation Decision Appeals.

A laboratory may appeal an adverse Deficiency Violation Decision, or any part thereof, to the SRCC Appeals Committee, pursuant to the terms of SRCC Appeal Policy.

13.0 Reinstatement and Reapplication Procedures Following Probation, Suspension, and Revocation.

13.1 Probation/Reinstatement: Following the expiration of a final probation decision issued under this Policy, the Accreditation Committee shall determine whether the laboratory has satisfied the terms of the probation, including any related conditions. If the laboratory has satisfied the terms of probation in full, the Committee shall verify that the probation has been completed and reinstate the laboratory to active accreditation status. If the laboratory has not satisfied the terms of probation in full, the Committee shall notify the laboratory of the failure to satisfy the terms of probation and may take the following actions: continuation of the probation; and/or, issuance of additional disciplinary or remedial actions concerning the probation terms.

13.2 Suspension/Reinstatement: Following the expiration of a final suspension decision issued under this Policy, the Accreditation Committee shall determine whether the laboratory has satisfied the terms of the suspension, including any related conditions. If the laboratory has satisfied the terms of the suspension in full, the Committee shall verify that the suspension has been completed and reinstate the laboratory to active accreditation status. If the laboratory has not satisfied the terms of the suspension in full, the Committee shall notify the laboratory of the failure to satisfy the terms of the suspension and may take the following actions: continuation of the suspension; and/or, issuance of additional disciplinary or remedial actions concerning the suspension terms.

13.3 Revocation/Reapplication: Two (2) years after the issuance of a final termination issued under this Policy, the laboratory may submit to the Accreditation Committee a Request for Permission to Reapply for Accreditation status (Reapplication Request). Subject to the time restriction above, the Committee shall consider a Reapplication Request from a laboratory whose status has been terminated. Reapplication Requests must include the following information: (a) The date that the final Deficiency Violation Decision was issued; (b) A statement of the reasons that the laboratory believes support or justify the acceptance of the Reapplication Request, including a statement explaining why the laboratory should now receive accreditation status and why the compliance action no longer applies to the laboratory; and, (c) Copies of any relevant documents or other materials upon which the laboratory relies in support of the Reapplication Request. Within ninety (90) days after the submission of a complete Reapplication Request, or as soon after as practical, the Accreditation Committee

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shall review the information presented by the laboratory and any other relevant information. The Committee shall then determine the final outcome of the Reapplication Request by majority vote in closed session.

- 13.4 Accreditation Committee Reapplication Request Decisions: Following the Accreditation Committee's review of a Reapplication Request, or as soon as practical, the Committee, by the Committee Chair, shall transmit its decision with respect to the Reapplication Request. The final Committee decision shall indicate whether the Request is granted, denied, or continued to a later date. If appropriate, the decision may include any Program participation conditions that the Committee has required. Copies of the Accreditation Committee decision shall be sent to the parties, via U.S. mail, return receipt requested, or other appropriate delivery method. While no appeal of the Committee decision is permitted, the laboratory may submit a new Reapplication Request pursuant to this Section, one (1) year or more after the issuance of a Committee decision denying a Reapplication Request.

14.0 Policy Purpose.

- 14.1 This document sets forth the Solar Rating and Certification Corporation (SRCC) Laboratory Testing Program Accreditation Policy (the Policy). SRCC certifies solar collectors based on: appropriate standards; and, testing information received from laboratories operating SRCC Accredited Testing Programs, and with the cooperation of solar product manufacturers and suppliers.
- 14.2 SRCC certifies complete solar energy systems based on safety, design, and performance criteria, as set forth in this Policy, including Section 7.0 Test Methods.
- 14.3 The provider of the solar component to be tested provides physical product and product information to the testing laboratory. Upon completion of laboratory testing according to the criteria set forth in this Policy, and any other requirements identified by the Laboratory Testing Program Accreditation Committee (Accreditation Committee), the laboratory shall transmit completed documentation directly to SRCC for product review and certification.
- 14.4 SRCC does not provide product or laboratory testing services.
- 14.5 This Policy is intended to:
- 14.5.1 Implement appropriate review and accreditation requirements for laboratory testing of certain solar equipment;
 - 14.5.2 Adopt appropriate standards for such accreditations; and,

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14.5.3 Establish an appropriate accreditation system for laboratory evaluation and testing of solar equipment.

15.0 Policy Scope.

15.1 The criteria, requirements, and procedures contained in this Policy serve as the primary means for evaluating an applicant's Laboratory Testing Program to assure, at a minimum, the laboratory's ability to conduct specific tests of solar products in accordance with SRCC certification requirements, as set forth in Policy Section 7.0 Test Methods and other SRCC policies. Among other conditions of SRCC accreditation, each applicant laboratory must adhere to the following requirements:

15.1.1 All product evaluation and testing shall be conducted in a technically competent and professional manner;

15.1.2 All product evaluation and testing shall be free from influence or conflicts of interest that could affect the laboratory's objectivity or ability to provide unbiased test results; and,

15.1.3 All product evaluation and testing shall be in compliance with the requirements and procedures of the test methods authorized by this Policy and accepted scientific practice.

15.1.4 All product evaluation and test reports shall be transmitted directly to SRCC for evaluation. No product evaluation or test reports will be accepted unless transmitted directly from the laboratory or testing facility which conducted the tests or evaluation of the product for which SRCC certification is sought.

15.2 SRCC certifies solar equipment of various types, which are tested under several different protocols, as identified in Policy Section 7.0 Test Methods and other SRCC policies.

15.3 A laboratory may apply for accreditation of one (1) or more specific Testing Programs to conduct solar equipment evaluations according to the applicable Test Method, or any combination of Test Methods, so long as all Test Methods are identified and accredited pursuant to the laboratory's ISO/IEC Standard 17025 accreditation. Accreditation is granted based on the laboratory's ability to conduct one (1) or more of the Test Methods identified in Section 7.2 of this Policy.

15.4 Any laboratory, regardless of its geographic location, may apply for SRCC accreditation of its Testing Program, so long as it meets the requirements of this Policy.

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- 15.5 The applicant laboratory must demonstrate, and provide evidence, that it has been accredited under ISO/IEC Standard 17025 by an authorized ISO accreditation authority.
- 15.6 The SRCC Laboratory Testing Program Accreditation Committee may consider other factors relevant to laboratory accreditation when reviewing an application, including, but not limited to, the following: geographic location; weather conditions; facility conditions; and, personnel availability at the laboratory location. SRCC may, at its sole discretion, choose to limit, place conditions on, or deny SRCC accreditation for a laboratory's Testing Program.

16.0 Policy Definitions.

- 16.1 Accreditation: Formal evaluation and notification by the SRCC that a Testing Program operated by a laboratory has met the criteria and standards set forth in this Policy to perform the specific tests identified in the SRCC accreditation for the purpose of providing test data to support requests for solar equipment certification.
- 16.2 Accredited Testing Program: A Laboratory Testing Program that has been granted SRCC accreditation.
- 16.3 Product Certification: A formal, written notice issued by SRCC, representing that the identified Solar Collector, Solar System, or other solar product has been certified to be in compliance with all applicable SRCC certification standards and specifications. SRCC certification includes the determination that the required product testing information was obtained from a laboratory operating an SRCC Accredited Testing Program, pursuant to this Policy.
- 16.4 Accreditation Committee: The Laboratory Testing Program Accreditation Committee of the Solar Rating and Certification Corporation. This Committee is an SRCC Standing Committee, whose members are appointed by the SRCC Chair, and which has the responsibility of evaluating laboratory testing program accreditation applications, granting testing program accreditation, and determining the disposition of Laboratory Testing Program Accreditation matters.
- 16.5 Laboratory: An organization or part of an organization engaged in the activities of solar equipment testing and/or inspection, and accredited under ISO/IEC Standard 17025.
- 16.6 Quality: The totality of features and characteristics of a product or service which bear on its ability to satisfy a given need.

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- 16.7 Test: The measurement of physical, chemical, or functional characteristics of materials, systems, or components under a predetermined set of conditions, to a specific standard and/or procedure as specified by SRCC.
- 16.8 ISO/IEC Standard 17025: International Organization for Standardization (ISO) Standard 17025 establishes appropriate operational criteria for testing laboratories. The Standard is intended to implement a quality system for improving a laboratory's ability to consistently produce valid results, and serves as the basis for ISO accreditation by an authorized ISO accrediting body. Like other ISO Standards, Standard 17025 provides technical specifications and other specific criteria for the operation of laboratories, in order to ensure that materials, products, processes, and services are fit for the intended purpose.
- 16.9 IEC: The International Electrotechnical Commission (IEC) is the primary global organization responsible for the preparation and publication of international standards for electrical, electronic, and related technologies. IEC Standards serve as a basis for national standardization, and as important industry references.

17.0 SRCC Laboratory Testing Program Accreditation.

- 17.1 In addition to other Policy requirements, a laboratory testing program must satisfy the following conditions of SRCC accreditation:
- 17.1.1 Laboratory Accreditation to the most current version of ISO/IEC Standard 17025; "*General requirements for the competence of testing and calibration laboratories*," by an entity recognized as an ISO/IEC accrediting organization in the laboratory's sphere of influence where testing services are offered to SRCC certification applicants. Such ISO accrediting organization must be authorized to conduct accreditation audits by the applicable country's ISO representative organization.
 - 17.1.2 Appropriate documentation evidencing that the laboratory's current Scope(s) of Accreditation to ISO/IEC Standard 17025 include the tests for which the laboratory seeks SRCC accreditation.
 - 17.1.3 Complete and accurate Accreditation Application information and materials;
 - 17.1.4 All other documentation required in, or related to, the Accreditation Application;
 - 17.1.5 All applicable Accreditation Application fees and other charges;
 - 17.1.6 Satisfaction of all SRCC Laboratory Testing Program criteria as determined by SRCC; and,

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17.1.7 Completion and submission of all SRCC Testing Program Accreditation documentation as required by this Policy or the SRCC Accreditation Committee.

18.0 Application for Accreditation.

18.1 A laboratory seeking Testing Program Accreditation must submit a complete SRCC Laboratory Testing Program Accreditation Application to the Accreditation Committee, and satisfy all requirements of SRCC policies. An application for accreditation is provided on the SRCC Internet site, located at www.solar-rating.org.

18.2 Among other information, a complete Accreditation Application must include the following:

18.2.1 A valid and current copy of the laboratory's ISO/IEC Standard 17025 accreditation documentation; and,

18.2.2 The accurate identification of the individual tests for which the laboratory is seeking SRCC accreditation.

18.3 Upon receipt of an Accreditation Application, SRCC shall perform a preliminary review of the Application and notify the applicant of any identified or potential deficiencies. SRCC reserves the sole and exclusive right and discretion to determine whether an applicant has satisfied the applicable standards and requirements necessary for SRCC Laboratory Testing Program Accreditation.

18.4 A laboratory may reapply for testing program accreditation where: an Accreditation Application has been rejected or denied; or, and Application has been withdrawn.

19.0 Fees and Charges.

19.1 The SRCC Board of Directors shall establish and regulate all fees and charges related to the Laboratory Testing Accreditation Program, which may be modified from time to time as appropriate.

19.2 In order to be processed and reviewed, an Accreditation Application must be accompanied by the complete payment of all application fees and related SRCC charges, as set forth in the SRCC Testing Laboratory Program Accreditation Application.

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- 19.3 Accreditation Application fees and charges are not refundable to the applicant laboratory.

20.0 Test Methods For Which Accreditation May Be Granted.

- 20.1 The SRCC Board of Directors, in consultation with the Laboratory Testing Program Accreditation Committee, shall determine and identify each Test Method for which SRCC will grant Testing Program accreditation. In its sole discretion, the SRCC Board may add or remove Accredited Test Methods.
- 20.2 The following Test Methods are eligible for Laboratory Testing Program Accreditation.
- 20.2.1 ISO Standard 9806-1: “Test methods for solar collectors – Part 1: Thermal performance of glazed liquid heating collectors including pressure drop.”
- 20.2.2 ISO Standard 9806-2: “Test methods for solar collectors – Part 2: Qualification test procedures.”
- 20.2.3 ISO Standard 9806-3: “Thermal performance of unglazed liquid heating collectors (sensible heat transfer only) including pressure drop.”
- 20.2.4 ASHRAE Standard 93: “Methods of testing to determine the thermal performance of solar collectors,” only as it applies to air-heating collectors.
- 20.2.5 SRCC TM-1 Standard: “SDHW system and component test procedures.”
- 20.3 A SRCC Accredited Laboratory Testing Program shall conduct tests in accordance with one (1) or more Test Methods identified in Section 7.2. Accredited Laboratory Testing Program Reports shall not be accepted by SRCC unless the Test Method protocols set forth in the Laboratory’s SRCC Testing Program Accreditation Application are followed in their entirety.

21.0 Accreditation Conditions and Maintenance.

- 21.1 Evidence of Accreditation: SRCC Accreditation of a Laboratory Testing Program shall be evidenced by a letter or certificate of accreditation from the Accreditation Committee, which shall be posted in the laboratory.
- 21.2 ISO Accreditation Maintenance: SRCC Laboratory Testing Program Accreditation shall terminate in the event that the laboratory’s ISO/IEC Standard 17025 accreditation expires or is otherwise terminated.

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- 21.3 Compliance with Legal Requirements: A laboratory providing accredited SRCC Testing Program services shall satisfy all local, state, and federal legal requirements pertaining to the operation and administration of such services and other laboratory activities.
- 21.4 Period of Accreditation/Fees: An SRCC Testing Program Accreditation shall remain in force as long as the laboratory complies with the conditions of this Policy, and remits all annual accreditation and any site inspection fees and charges.
- 21.5 Inspection of Laboratories: In order to assure initial compliance with the conditions of Testing Program Accreditation, SRCC will conduct a laboratory site inspection. In order to assure continued compliance with the requirements for accreditation, a laboratory providing SRCC accredited testing programs shall grant the Accreditation Committee, or its authorized representative, the right to conduct subsequent inspections of the laboratory and record-keeping facilities, subject to the provisions of this Section. The laboratory shall cooperate with any SRCC inspection in all aspects.
- 21.5.1 SRCC shall provide a four (4) calendar day minimum notice of inspection to the laboratory holding the Testing Program Accreditation.
- 21.5.2 During an inspection, a laboratory providing SRCC accredited testing program services shall make available all records as described in the notice of inspection, including, but not limited to:
- 21.5.2.1 Equipment calibration records;
 - 21.5.2.2 Solar collector efficiency test records; and,
 - 21.5.2.3 Personnel records regarding responsibility for tests.
- 21.5.3 During an inspection, the laboratory shall be represented by the Laboratory Director or Testing Laboratory Supervisor.
- 21.5.4 During the inspection, the laboratory shall make available individual testing personnel, as requested by the SRCC.
- 21.6 Use of Authorized SRCC Marks: An authorized SRCC mark and/or logo may be used by a laboratory conducting an SRCC Accredited Testing Program, as long as all current accreditation fees and charges owed by the laboratory have been paid when due, and the Laboratory Testing Program Accreditation by SRCC has not been revoked, suspended or terminated by SRCC, and all terms of this Policy are met.

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- 21.7 Termination or Suspension of Accreditation: In the event that a laboratory fails to satisfy the accreditation requirements of this Policy, or other SRCC policies, the accreditation of the Laboratory Testing Program may be terminated, revoked, or suspended at the sole discretion of SRCC.

22.0 Renewal of Accreditation.

- 22.1 Accreditation renewal may be granted by the Accreditation Committee if the applicant continues to satisfy all of the requirements and conditions of accreditation set forth in this Policy, and otherwise directed by SRCC. Among other conditions of accreditation renewal:
- 22.1.1 The laboratory must submit to the Accreditation Committee evidence of renewal of its accreditation to ISO/IEC Standard 17025 within thirty (30) calendar days of expiration of such ISO accreditation.
 - 22.1.2 The laboratory must comply with all SRCC policies and procedures regarding Accredited Testing Programs;
 - 22.1.3 The laboratory must make payment of Laboratory Accredited Testing Program fees and charges when due, as billed by SRCC, and;
 - 22.1.4 The laboratory must demonstrate compliance with any other specific requirements set forth in the letter or certificate of accreditation, or otherwise directed by SRCC.
- 22.2 In order to be eligible for Testing Program Accreditation renewal, a laboratory must provide to SRCC all requested verifications of compliance with any legal or organizational requirement which may affect the laboratory's ability to safely and legally continue business operations.

23.0 Voluntary Termination of Testing Program Accreditation.

- 23.1 A testing laboratory may voluntarily terminate an SRCC Testing Program Accreditation by providing written notice of its intent to the Accreditation Committee. The notice shall state the effective termination date and the reasons for the termination.
- 23.2 Any SRCC Testing Program fees and charges paid by a laboratory are non-refundable in the event of a voluntary termination of SRCC accreditation.

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24.0 Accredited Testing Program Deficiencies, Violations, and Sanctions.

- 24.1 Notice of Deficiency and Resolution Process: In the event that a laboratory operating an Accredited Testing Program violates, or otherwise does not comply with, the provisions of this Policy or other SRCC requirements, the Accreditation Committee shall issue a Notice of Deficiency and Violation (Notice) to the laboratory. Upon receipt of such Notice, the laboratory shall: respond to each identified deficiency and/or violation; provide all relevant information and materials; and, otherwise satisfy all requirements set forth in the Notice. Following the timely submission of such response to the Notice, all deficiency and violation matters shall be resolved pursuant to the SRCC Certification and Accreditation Appeal Policy (Appeal Policy) and this Policy Section.
- 24.2 Failure to Respond: In the event that the laboratory does not provide a timely and complete response to a Notice, the Accreditation Committee may issue any sanction(s) or corrective action(s) authorized by this Policy, the Grievance Policy, or other applicable SRCC Policy. The laboratory shall comply fully with all sanctions and/or corrective actions issued by the Committee.
- 24.3 Grounds for Sanction and Corrective Actions: Among other grounds, the Accreditation Committee may issue accreditation sanctions and/or corrective actions under the following circumstances:
- 24.3.1 An Accreditation Application contains a material misrepresentation;
 - 24.3.2 A laboratory makes a public misrepresentation concerning its activities, operations, or a tested product;
 - 24.3.3 A laboratory fails to comply with a condition of the accreditation;
 - 24.3.4 A laboratory violates an SRCC Policy;
 - 24.3.5 A laboratory fails to remit required accreditation fees and charges to SRCC consistent with the terms; or,
 - 24.3.6 Where other good and reasonable cause exists and supports the issuance of sanctions or corrective actions.
- 24.4 Deficiency and Violation Decision: Based on the information available, the Accreditation Committee, in its sole discretion, shall determine whether a deficiency or violation exists, or dismiss the Notice. Upon the finding of any deficiency or violation, the Accreditation Committee shall review the record, determine the severity of such deficiency(ies) or violation(s), and issue a Deficiency/Violation Decision. In its sole and exclusive discretion, the Committee may issue one or more of the following actions:

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24.4.1 Private or Public Reprimand.

24.4.2 Conditions of Continued Accreditation.

24.4.3 Accreditation Probation. The term of a probationary period shall be in one (1) month increments through an initial six (6) months. The Committee may determine the duration of the Probationary Period within this six (6) month time frame.

24.4.4 Accreditation Suspension. The term of a suspension shall be in six (6) month increments, as determined by the Committee.

24.4.5 Accreditation Revocation. After revocation of accreditation by SRCC, a laboratory may apply for accreditation after two (2) years following the date of the revocation.

25.0 Deficiency and Violation Decision Appeals.

A laboratory may appeal an adverse Deficiency Violation Decision, or any part thereof, to the SRCC Appeals Committee, pursuant to the terms of SRCC Appeal Policy.

26.0 Reinstatement and Reapplication Procedures Following Probation, Suspension, and Revocation.

26.1 Probation/Reinstatement: Following the expiration of a final probation decision issued under this Policy, the Accreditation Committee shall determine whether the laboratory has satisfied the terms of the probation, including any related conditions. If the laboratory has satisfied the terms of probation in full, the Committee shall verify that the probation has been completed and reinstate the laboratory to active accreditation status. If the laboratory has not satisfied the terms of probation in full, the Committee shall notify the laboratory of the failure to satisfy the terms of probation and may take the following actions: continuation of the probation; and/or, issuance of additional disciplinary or remedial actions concerning the probation terms.

26.2 Suspension/Reinstatement: Following the expiration of a final suspension decision issued under this Policy, the Accreditation Committee shall determine whether the laboratory has satisfied the terms of the suspension, including any related conditions. If the laboratory has satisfied the terms of the suspension in full, the Committee shall verify that the suspension has been completed and reinstate the laboratory to active accreditation status. If the laboratory has not satisfied the terms of the suspension in full, the Committee shall notify the laboratory of the failure to satisfy the terms of the suspension and may take the

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following actions: continuation of the suspension; and/or, issuance of additional disciplinary or remedial actions concerning the suspension terms.

- 26.3 Revocation/Reapplication: Two (2) years after the issuance of a final termination issued under this Policy, the laboratory may submit to the Accreditation Committee a Request for Permission to Reapply for Accreditation status (Reapplication Request). Subject to the time restriction above, the Committee shall consider a Reapplication Request from a laboratory whose status has been terminated. Reapplication Requests must include the following information: (a) The date that the final Deficiency Violation Decision was issued; (b) A statement of the reasons that the laboratory believes support or justify the acceptance of the Reapplication Request, including a statement explaining why the laboratory should now receive accreditation status and why the compliance action no longer applies to the laboratory; and, (c) Copies of any relevant documents or other materials upon which the laboratory relies in support of the Reapplication Request. Within ninety (90) days after the submission of a complete Reapplication Request, or as soon after as practical, the Accreditation Committee shall review the information presented by the laboratory and any other relevant information. The Committee shall then determine the final outcome of the Reapplication Request by majority vote in closed session.
- 26.4 Accreditation Committee Reapplication Request Decisions: Following the Accreditation Committee's review of a Reapplication Request, or as soon as practical, the Committee, by the Committee Chair, shall transmit its decision with respect to the Reapplication Request. The final Committee decision shall indicate whether the Request is granted, denied, or continued to a later date. If appropriate, the decision may include any Program participation conditions that the Committee has required. Copies of the Accreditation Committee decision shall be sent to the parties, via U.S. mail, return receipt requested, or other appropriate delivery method. While no appeal of the Committee decision is permitted, the laboratory may submit a new Reapplication Request pursuant to this Section, one (1) year or more after the issuance of a Committee decision denying a Reapplication Request.