# **QUALITY CONTROL SELF-ASSESSMENT FORM**

In keeping with accreditation requirements that apply to the ICC-SRCC™ certification programs, listees are required to complete and sign this quality control assessment form for each manufacturing location recognized under your ICC-SRCC OG-100, OG-300, OG-400 and Solar Heating & Cooling Listings. The form will be used to verify continued implementation of quality control procedures, and that the product originally recognized has not changed. **This document must be completed and returned to ICC-SRCC at** **SRCC@solar-rating.org** **within 30 days of receipt. Separate forms are required for each manufacturing location.**

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| **ICC-SRCC Certification Programs (select those used for products produced at this facility)** |
|  [ ]  OG-100 – Solar Thermal Collectors [ ]  OG-300 – Solar Water Heating Systems [ ]  OG-400 – Solar Pool Heating Systems | [ ]  Solar Heating & Cooling Listings[ ]  ENERGY STAR® Certifications |
| **Listee Name (should match the name on the ICC-SRCC Certification(s)/Listings)** |
|  |
| **Production Facility Address** |
|  |
| **Products Manufactured at the Location (list those recognized in the programs listed above)** |
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| **Since the last inspection of the facility, as regards the product(s) covered by the certification(s):***(Provide explanation for any questions answered “YES”. Attach additional sheets as needed.)* | **YES** | **NO** |
| 1 | Have there been any significant changes in the documented Quality Management System (QMS) used in the production of the products listed above? | [ ]  | [ ]  |
| 2 | Have there been any changes in the production equipment, or significant changes in production methods? | [ ]  | [ ]  |
| 3 | Have there been any changes to the product specifications, assembly methods, or manufacturing tolerances? | [ ]  | [ ]  |
| 4 | Have the designs of the products listed changed from what was originally recognized and/or tested that have not been declared to ICC-SRCC? | [ ]  | [ ]  |
| 5 | Have there been any changes to the specifications for materials, incoming goods, or in providers/suppliers of either that have not been declared to ICC-SRCC? | [ ]  | [ ]  |
| 6 | Have there been any significant changes in the way the product is labeled since the last inspection? | [ ]  | [ ]  |
| 7 | Are you aware of any complaints about the products listed above from customers or end users since the last inspection? | [ ]  | [ ]  |
| 8 | Does the facility produce any of the products above for private label listees? | [ ]  | [ ]  |
| *If you answered “Yes” to any of these questions, please provide an explanation. If more space is needed, please provide additional details on separate sheets.*I attest that the information provided above is true and accurate to the best of my knowledge. |
| **Name** *(type or print)***:** | **Title:** |  |  |
| **Phone:** | **E-mail:** |  |  |
| **Signature:** | **Date:** |  |  |
|  |
| **This box is for ICC SRCC internal use only** |
|  |
| Date Received: |  | Reviewed By: |  |
| Comments: |