USDA ISO Guide 65 Program
Accreditation for Certification Bodies

1 Purpose

This document provides the requirements to be met in designing a USDA ISO Guide 65 Program. It also provides the requirements used for the objective evaluation of programs submitted for accreditation by the Agricultural Marketing Service (AMS), Livestock and Seed (LS) Program, Audit, Review, and Compliance (ARC) Branch.

The USDA ISO Guide 65 Program is a voluntary conformity assessment and accreditation service provided by the ARC Branch under the Quality Systems Verification Program. This Program facilitates the marketing and distribution of certified agricultural products.

2 Scope

This Program is available to U.S. and international certification bodies that perform certification for livestock, meat, seed, and other agricultural products or services.

NOTE: The European Union (EU) designated the ARC Branch as a competent authority for the assessment of organic certification bodies under ISO/IEC Guide 65:1996. Accreditation under the USDA ISO Guide 65 Program allows U.S. organic products to be exported to the EU provided that the products conform to the EU organic standards (ECC 2092/91). With the new EU organic standards (EC No 834/2007 and 889/2008), organic certification bodies accredited under the USDA ISO Guide 65 Program may apply for equivalency in accordance with Article 33(3) of EC No 834/2007. Certification bodies must meet the rules regarding importation of organic products as outlined in Articles 11 and 12 of EC No 1235/2008. Products certified on or after January 1, 2009 must meet the requirements of the new EU organic standards.

3 References

The following referenced documents are used for the application of this document. For dated references, only the edition cited applies. For undated references, the latest edition of the referenced document (including any amendments) applies.

ISO/IEC Guide 65:1995 – General requirements for bodies operating product certification systems
ARC 00 QM Accrediting Conformity Assessment Bodies (ISO 17011)
ARC 1000 Procedure, Quality Systems Verification Programs General Policies and Procedures
ARC 1115 Procedure, Program Review Committee
ARC 1102 Procedure, Selection of Audit Team Members
ARC 1012 Certificate, USDA ISO Guide 65 Program
ARC 1012A Checklist, USDA ISO Guide 65 Program for Clients
ARC 1012B Checklist, USDA ISO Guide 65 Program for Auditors
ARC 1012C Checklist, USDA ISO Guide 65 Program for GOTS
GU7183CCC – USDA ISO Guide 65 Program, Guidance on Requirements

ARC Branch Auditing Services Web site: www.ams.usda.gov/arcaudits
ARC Branch USDA ISO Guide 65 Program Web site: www.ams.usda.gov/lsiso65program
ARC Newsroom Web site: www.ams.usda.gov/arcnewsroom
ARC Branch Questions and Answers Web site: www.ams.usda.gov/lsarcquestionsandanswersmainpage
ARC Branch Official Listing of Certification Bodies Accredited under the USDA ISO Guide 65 Program

4 Definitions

The following definitions apply to this document:

4.1 Foreign Supplier: a supplier who is located outside of the U.S. and its territories, whose products are certified under the USDA ISO Guide 65 Program.

4.2 GOTS: Global Organic Textile Standards

4.3 Key Activities: policy formulation, process and/or procedure development, contract review, planning conformity assessments, review, approval, and decision on the results of conformity assessments.

4.4 Supplier: an entity that is separate from the certification body and is certified to a standard by the certification body. Types of suppliers include, but are not limited to:

a) Crop producers
b) Wild crop producers
c) Livestock producers
d) Processing/Handling operations
e) Mechanical textile processing and manufacturing operations (GOTS)
f) Wet processing and finishing operations (GOTS)
g) Trading operations (GOTS)

4.5 Witness Audit: the witnessing of the certification body's conformity assessment activities during an inspection of a supplier, including an examination of the inspector's preparation for the inspection and the implementation of the certification body's inspection procedures.

5 Responsibilities

5.1 Certification bodies must meet all applicable policies, procedures, and requirements outlined in this document, *ISO/IEC Guide 65:1996*, and *ARC 1000 Procedure.*

5.2 Certification bodies must provide access to information, documents, and records as necessary for the assessment and maintenance of the accreditation.

5.3 Certification bodies must provide access to those documents that provide insight into the level of independence and impartiality of the certification body from its related bodies, where applicable.

5.4 Certification bodies must arrange witness audits when requested by the ARC Branch.

5.5 The ARC Branch must meet all applicable policies, procedures, and requirements outlined in this document, *ARC Branch Quality Manual for Accrediting Conformity Assessment Bodies, ARC 1000 Procedure*, and referenced documents, as applicable.

6 ARC Branch Web Sites

6.1 The *ARC Branch Auditing Services* Web site provides information on all ARC Branch audit and accreditation activities, including:

a) The *USDA ISO Guide 65 Program* Web site. This Web site provides information regarding the USDA ISO Guide 65 Program, including relevant documents and standards, guidance, the *Official Listing*.
b) The *ARC Newsroom* Web site. This Web site provides notice to stakeholders and interested parties regarding the USDA ISO Guide 65 Program including proposed changes, approved changes, and timeframes for implementation of approved changes.
c) The *Questions and Answers* Web site. This Web site provides answers to frequently asked questions regarding various Programs and subjects, including the USDA ISO Guide 65 Program.

7 Accreditation Period

7.1 The accreditation period is a four-year period.

	1st 4-Yr Period				Subsequent 4-Yr Periods			
Year 0	**Year 1**	**Year 2**	**Year 3**	**Year 4**	**Year 1**	**Year 2**	**Year 3**	**Year 4**
Initial	Surv.	Update	Surv.	Reassess	Update	Surv.	Update	Reassess

**Activities are further described below.*

8 Application for Service

8.1 By submitting an application for service, the certification body agrees to meet the requirements outlined in this document, *ISO/IEC Guide 65:1996*, and *ARC 1000 Procedure*.

8.2 Certification bodies must submit an application for service in accordance with the requirements outlined in *ARC 1000 Procedure*.

8.3 In addition, the certification body must submit the following information relevant to the accreditation:

a) A description of the conformity assessment services that the certification body undertakes;
b) A list of standards, methods, or procedures for which the certification body seeks accreditation, including limits of capability where applicable;
c) A hard copy and electronic copy of the certification body's quality manual and relevant associated documents and records. The quality manual and associated documents and records must meet the requirements of *ISO/IEC Guide 65:1996*;
d) A completed *ARC 1012A Checklist*;
e) A completed *ARC 1012C Checklist*, if applicable;
f) A current list of clients certified by the certification body covered under the scope of the assessment, including locations and products certified;

g) Samples of brochures, advertisements, labels, or other publicly available documents describing the certification services offered; and
h) A copy of the most recent internal audit of the certification body's program. If all activities of the certification body's program are not implemented at the time of the internal audit, then the internal audit must cover those activities that are implemented.

8.4 The certification body may also be asked to submit the following information relevant to the accreditation:

a) The standard(s) used to certify product;
b) The source of the standard(s);
c) The names of the members who developed the standard(s) and their qualifications; and
d) The process used to develop the standard(s) if developed by the certification body.

9 Desk Audit

9.1 A desk audit is conducted prior to the initial assessment in accordance with the requirements for desk audits as outlined in *ARC 1000 Procedure*. The certification body may not request to forego this desk audit.

9.2 A desk audit is also conducted prior to each surveillance assessment and reassessment to prepare for the assessment. The scope of the desk audit is based on the scope of the assessment.

10 Preliminary Visit

10.1 Prior to initial assessment, a preliminary visit may be conducted with the agreement of the certification body.

10.2 This visit may result in the identification of deficiencies in the system of the applicant certification body or its competencies.

NOTE: The ARC Branch does not consult and exercises due care to avoid consultancy during such a visit.

11 Initial Assessment

11.1 Initial assessments are conducted in accordance with the requirements for on-site audits as outlined in *ARC 1000 Procedure*.

11.2 Initial assessments include the entire quality management system, including associated documents and records, a review of certification files, and witness audits.

11.3 If the certification body operates a program spread across multiple offices, including its main office, then offices are selected to ensure that sufficient objective information is collected to verify that the documented procedures are implemented and program requirements are met.

11.3.1 In circumstances where the certification body has 3 or less offices, including its main office, the offices from which key activities are performed must be assessed.

Example 1: Certification Body ABC operates from 3 offices, including the main office. All key activities are performed at the main office. As a result, only the main office is assessed.

Example 2: Certification Body XYZ operates from 3 offices, including the main office. All offices are involved in key activities. As a result, all 3 offices are assessed.

11.3.2 In circumstances where the certification body has 3 or more offices, including its main office, the ARC Branch uses a sampling process in order to determine which offices must be visited, based on the following criteria.

a) An obligatory visit to the main office;
b) The 2 offices handling most of the certification body's suppliers; and
c) The 2 offices carrying out the key activities concerning the certification process.

Example 1: Certification Body ABC operates from 5 offices, including the main office. All key activities are performed at the main office. Two offices work directly with 75% of certified suppliers. As a result, the main office and the 2 offices are assessed.

Example 2: Certification Body XYZ operates from 5 offices, including the main office. The main office and 3 other offices perform key activities and work directly with 80% of the certified suppliers. As a result, the main office and the 3 other offices are assessed.

12 Surveillance Assessments

12.1 Surveillance assessments are conducted in accordance with the requirements for on-site audits as outlined in *ARC 1000 Procedure*. The purpose of the surveillance assessment is to verify that the approved quality management system continues to be implemented, to consider the implications of changes to that system, and to confirm continued conformity to the requirements.

12.2 Surveillance assessments are conducted during the four-year accreditation period as follows:

a) After initial accreditation, the first surveillance assessment is conducted within 12 months of the initial accreditation date (Year 1).
b) The second surveillance assessment is conducted during Year 3 during the first four-year accreditation period.
c) During subsequent four-year accreditation periods, the surveillance assessment is conducted during Year 2.
d) Additional surveillance assessments may be conducted (1) if numerous minor non-conformances or major non-conformances were identified during the previous assessment; (2) for failure to submit annual update reports; (3) as the result of complaints; (4) as the result of significant changes that have affected the certification body's operations at any time during the accreditation period; and/or (5) as directed by the ARC Branch Chief.

12.3 In circumstances where the certification body operates a program spread across multiple offices, including its main office, then the ARC Branch uses a sampling process in order to determine which offices must be visited, based on the following criteria:

a) An obligatory visit to the main office;
b) One office that was not assessed during the previous assessment and that either carries out key activities or handles a significant number of the certification body's suppliers;
c) Any offices where major non-conformances were identified during the previous assessment; and
d) Any additional office(s) deemed necessary by the ARC Branch.

12.4 A surveillance assessment includes, at least

a) A review of actions taken on non-conformances identified during the previous assessment;
b) Review of any changes to the documented system;
c) Effectiveness of the management system with regard to achieving the objectives;
d) Continuing operational control;
e) Progress of planned activities aimed at continual improvement;
f) Internal audits;
g) Management reviews;
h) Corrective and preventative actions;
i) Appeals, complaints, and disputes;
j) Use of marks and/or any other reference to approval;
k) A review of the certification process, including applicable certification files; and
l) Witness audits.

12.5 The surveillance assessment may include other areas, as necessary, to verify conformance to the requirements.

12.6 Prior to the surveillance assessment and upon the request of the ARC Branch, the certification body must submit the following information relevant to the accreditation:

a) A hard copy and/or an electronic copy of the certification body's quality manual and relevant associated documents and records, applicable to the scope of the surveillance assessment, and including any changes made since the previous assessment. The quality manual and associated documents and records must meet the requirements of *ISO/IEC Guide 65:1996*;
b) An updated *ARC 1012A Checklist*;
c) An updated *ARC 1012C Checklist*, if applicable;
d) Identification of major changes to the certification body's policies, procedures and protocols, since the most recent assessment or review;
e) Changes in the certification body's information, since the most recent assessment or review;
f) A copy of the most recent internal audit report;
g) A copy of the most recent management review report;
h) The number of complaints, appeals, and disputes, along with a copy of each, since the most recent assessment or review;
i) A copy of corrective and preventative actions taken since the most recent assessment or review that are the result of management reviews, internal audits, complaints, or other means and related to the certification body's program;
j) All reported misuses of logos received by the certification body, since the most recent assessment or review;

k) All changes in the certification body certification personnel that are critical to the operation of its certification activities, since the most recent assessment or review;
l) A current list of suppliers certified by the certification body covered under the scope of the surveillance assessment, including locations and products certified; and
m) Samples of brochures, advertisements, labels, or other publicly available documents describing the certification services offered that reference accreditation by the USDA.

13 Annual Update Reviews

13.1 Annual update reviews are conducted during the four-year accreditation period as follows:

a) During the first four-year accreditation period, and annual review is conducted during Year 2.
b) During subsequent four-year accreditation periods, annual update reviews are conducted during Years 1 and 3.

NOTE: A surveillance assessment may be conducted in lieu of an annual update review.

13.2 To facilitate the annual update review, the certification body must submit an annual update report upon the request of the ARC Branch. The report must include the following:

a) Changes in the certification body's information, since the most recent assessment or review;
b) Major changes to the certification body's policies, procedure and protocols, since the most recent assessment or review;
c) A copy of the most recent internal audit report;
d) A copy of the most recent management review report;
e) The number of complaints, appeals, and disputes, along with a copy of each, since the most recent assessment or review;
f) A copy of corrective and preventative actions taken since the most recent assessment or review that are the result of management reviews, internal audits, complaints, or other means and related to the certification body's program;
g) All reported misuses of logos received by the certification body, since the most recent assessment or review;
h) All changes in the certification body personnel that are critical to the operation of its certification activities, since the most recent assessment or review;
i) The number of certified suppliers per type including location (state/country).

14 Reassessments

14.1 Reassessments are conducted in accordance with the requirements for initial assessments as outlined above in Section 11.

14.2 Reassessments are conducted during Year 4 of the four-year accreditation period. Reassessments should be conducted prior to the expiration date; however, an extension of the accreditation period may be granted to allow for the timely conduct of the reassessment.

14.3 Prior to the reassessment and upon the request of the ARC Branch , the certification body must submit the following information relevant to the accreditation:

a) A hard copy and/or an electronic copy of the certification body's quality manual and relevant associated documents and records. The quality manual and associated documents and records must meet the requirements of *ISO/IEC Guide 65:1996*;
b) An updated *ARC 1012A Checklist*;
c) An update *ARC 1012C Checklist*, if applicable;
d) Identification of major changes to the certification body's policies, procedures and protocols, since the most recent assessment or review;
e) Changes in the certification body's information, since the most recent assessment or review;
f) A copy of the most recent internal audit report;
g) A copy of the most recent management review report;
h) The number of complaints, appeals, and disputes, along with a copy of each, since the most recent assessment or review;
i) A copy of corrective and preventative actions taken since the most recent assessment or review that are the result of management reviews, internal audits, complaints, or other means and related to the certification body's program;
j) All reported misuses of logos received by the certification body, since the most recent assessment or review;
k) All changes in the certification body certification personnel that are critical to the operation of its certification activities, since the most recent assessment or review;
l) A current list of suppliers certified by the certification body covered under the scope of the reassessment, including locations and products certified; and
m) Samples of brochures, advertisements, labels, or other publicly available documents describing the certification services offered that reference accreditation by the USDA.

15 Witness Audit

15.1 Witness audits are conducted during the four-year accreditation period. They are normally conducted in conjunction with an assessment but may be conducted independent of one. The witness audit provides a means of verifying that the accredited certification body is satisfactorily implementing its procedures.

15.2 A sufficient number of witness audits are conducted to ensure that sufficient objective information is collected to verify that documented procedures are implemented and effective. A representative sample of suppliers, including foreign suppliers if applicable, is selected to ensure proper evaluation of the certification body's competence. The number of witness audits is based on the following criteria (excluding GOTS):

15.2.1 During initial assessments and reassessments, a minimum of one witness audit for each type of supplier per standard is conducted. One supplier may be witnessed for multiple standards.

15.2.2 During surveillance assessments, a minimum of three witness audits are conducted. If only two types of suppliers are certified by the client, then a minimum of one witness audit may be conducted. Additional witness audits may be conducted based on the findings of certification file reviews, non-conformances identified during the previous assessment or annual update review, the number of suppliers certified giving consideration to the types and standards, complaints received, or as directed by the ARC Branch.

NOTE: Witness audits may be conducted throughout Years 1, 2, and 3 rather than all during one year.

15.3 For GOTS, a representative sample of suppliers, including foreign suppliers if applicable, is selected to ensure proper evaluation of the certification body's competence. The number of witness audits is based on the following criteria:

15.3.1 During the initial assessment, a minimum of one witness audit for each type of supplier is conducted. The witness audit of the textile manufacturing mill should be a vertical mill including wet processing unit, provided that the certification body has applied for this scope.

15.3.2 During surveillance assessments, at least one witness audit is conducted. Additional witness audits may be conducted based on the findings of certification file reviews, non-conformances identified during the previous assessment or annual update review, the number of suppliers certified, complaints received, or as directed by the ARC Branch.

NOTE: Witness audits may be conducted throughout Years 1, 2, and 3 rather than all during one year.

16 Review of Certification Files

16.1 Certification files are reviewed during the four-year accreditation period. They are normally reviewed in conjunction with an assessment but may be conducted independent of one. The review of certification files ensures that

a) The documentation found in a case file is complete and up to date;
b) The inspection reports include a sufficient quantity of information elements needed to make a certification decision;
c) The decision made is congruous with the evaluation of the production/preparation plan as submitted by the operator and the report resulting from inspection visits to operations sites;
d) The certification body has monitored the implementation of all necessary corrective measures that it requested from each operator having products certified; and
e) The certification body is operating in accordance with the relevant sections of *ISO/IEC Guide 65*.

16.2 A sufficient number of certification files are reviewed to ensure that sufficient objective information is collected to verify that documented procedures are implemented and program requirements are met. Certification files are randomly selected. The quantity and selection of certification files reviewed during initial and reassessments is based on the criteria in the following table (excluding GOTS):

Number of Certified Suppliers	Number of Files Reviewed*
100 or less	Between 7 and 10 files, 6 of which must be full reviews
240 or less	Between 10 and 12 files, 10 of which must be full reviews
400 or less	Between 12 and 15 files, 10 of which must be full reviews
1000 or less	Between 15 and 20 files, 10 of which must be full reviews
More than 1000	Between 20 and 25 files, 10 of which must be full reviews

**In cases where the certification body certifies to multiple standards, a representative sample of files for all standards is selected to ensure proper evaluation of the certification body's competence. One file may be reviewed for multiple standards. In cases where the certification body certifies foreign suppliers, if the reviewed files do not include at least one foreign supplier per type, then additional files of foreign suppliers for that type is selected and a full review is conducted.*

16.3 The quantity and selection of certification files reviewed during surveillance assessments is based on the criteria in the following table (excluding GOTS):

Number of Certified Suppliers	Number of Files Reviewed*
100 or less	Between 5 and 7 files, 5 of which must be full reviews
240 or less	Between 7 and 10 files, 6 of which must be full reviews
400 or less	Between 10 and 12 files, 6 of which must be full reviews
1000 or less	Between 12 and 15 files, 6 of which must be full reviews
More than 1000	Between 15 and 20 files, 6 of which must be full reviews

**In cases where the certification body certifies to multiple standards, a representative sample of files for all standards is selected to ensure proper evaluation of the certification body's competence. One file may be reviewed for multiple standards. In cases where the certification body certifies foreign suppliers, if the reviewed files do not include at least one foreign supplier per type, then additional files of foreign suppliers for that type is selected and a full review is conducted.*

16.4 For GOTS, 1.5% of all certification files, with a minimum of 5, are randomly selected for review. In cases where the certification body certifies foreign suppliers, if the reviewed files do not include at least one foreign supplier, then one additional file of a foreign supplier is selected and reviewed.

17 Extension of Scope

17.1 Assessments for extension of scope requests are conducted in accordance with the requirements for initial assessments as outlined above in Section 11. The scope of these assessments is limited to the extension request.

17.2 The certification body must submit the following information relevant to an extension of scope request:

a) A description of the extension of scope request;
b) A list of new standards, methods, or procedures for which the certification body seeks accreditation, including limits of capability where applicable;
c) A hard copy and/or an electronic copy of the certification body's relevant associated documents that were updated to address the extension of scope ;
d) Evaluation documents used for reviews and inspections;
e) A list of additional locations and the activities conducted at the locations;
f) A list of new certification body personnel, including committees, their qualifications and responsibilities;
g) Records of training and qualifications for current certification body personnel, including committees, involved in activities related to the extension of scope request, including reviews, inspections, and decision making; and
h) Samples of brochures, advertisements, labels, or other publicly available documents describing the new service offered that reference accreditation by the USDA.

18 USDA National Organic Program

18.1 Certification bodies may request accreditation to the USDA National Organic Program (NOP) production standards under the USDA ISO Guide 65 Program. Accreditation to these standards is contingent upon the certification body being in good standing as an USDA NOP accredited certifying agent. If the USDA NOP suspends or revokes a certification body's accreditation, then the ARC Branch

will also suspend or withdraw the certification body's accreditation specific to the NOP production standards. Certification bodies may remain accredited to other Standards.

18.2 The ARC Branch notifies the USDA NOP of any non-compliance to the NOP regulation that is found during USDA ISO Guide 65 Program assessment. This includes any non-compliance that may be identified even though outside the scope of the USDA ISO Guide 65 Program. In addition, the ARC Branch also notifies the USDA NOP of the results of any corrective action audits specific to the NOP regulation. The USDA NOP may choose to take separate action based upon the information provided by the ARC Branch.

18.3 The ARC Branch notifies the USDA NOP when a certification body's accreditation under the USDA ISO Guide 65 Program is suspended or withdrawn as the result of a non-compliance to the NOP regulation.

19 Program Review Committee

19.1 Decisions on accreditation, including approval, disapproval, extension of scope, suspension, and withdrawal are made by the Program Review Committee. Decisions regarding suspension and withdrawal are limited to those based on the findings of the assessment. Decisions regarding reduction of scope may be made by the Program Manager. The review is conducted in accordance to *ARC 1115 Procedure, Program Review Committee*. The Program Review Committee makes the final decision regarding accreditation status.

a) Applications for service and extension of scope requests are reviewed by a Program Review Committee. The purpose of the review is to determine the ARC Branch's capabilities to conduct the assessment by evaluating the ARC Branch's own policies and the availability of suitable auditors and experts with the appropriate competence to perform the assessment in a timely manner.

b) The Program Review Committee reviews the results of initial assessments, reassessments, and extension of scope requests.

c) A Program Review Committee reviews the results of surveillance assessments, annual update reviews, and independent witness audits only when program suspension or withdrawal may be necessary.

20 Listing of Accredited Programs and Programs Under Review

20.1 The ARC Branch provides public information about the current status of accreditation of applicant certification bodies and accredited certification bodies in the *Official Listing of Certification Bodies Accredited under the USDA ISO Guide 65 Program*. In addition, the ARC Branch uses the *Official Listing* to solicit comments regarding the certification bodies' performance and conformance to relevant standards.

20.2 The *Official Listing* is maintained on the *ARC Branch USDA ISO Guide 65 Program* Web site and contains information including:

a) Certification body's name;

b) Certification body's address;
c) Certification body's contact information including telephone number, fax number, and email address when available;
d) Standards applied;
e) Scope of accreditation;
f) Countries of operation;
g) Certificate number, as applicable;
h) GOTS accreditation number, as applicable *(NOTE: this number is based on the date of initial accreditation to GOTS.)*;
i) Issue date and renewal date related to the current accreditation period; and
j) Original accreditation date.

20.3 In addition, the *Official Listing* will also contain the following information if applicable:

a) If the certification body is undergoing an initial assessment, the statement "Under Review" is included.
b) If the certification body is under suspension, the scope of the suspension, the effective date of the suspension and the following statement are included: "Under Suspension – Agricultural products certified under the program prior to suspension remain certified. No additional products may be certified while the suspension is in effect."
c) If the certification body is under withdrawal, the effective date of the withdrawal and the following statement are included: "Under Withdrawal – Agricultural products certified under the program prior to withdrawal are no longer certified. No additional products may be certified."
d) If the certification body has requested to cancel service, the following statement is included: "Requested to Cancel Service – Agricultural products certified under the program are eligible until [date]." The date referenced is the date that cancellation is effective, normally the date that the next surveillance assessment or reassessment was to occur.

21 Certificate of Conformance

21.1 A *Certificate of Conformance* is issued to all accredited certification bodies (hard copy and/or in electronic form). The *Certificate* identifies the following:

a) Identity and logo of the ARC Branch;
b) Certification body's name;
c) All premises from which one or more key activities are performed and which are covered by the accreditation;
d) Certificate number;
e) Issue date and renewal date;
f) GOTS accreditation number, as applicable;
g) Reference to the scope of accreditation;
h) Statement of conformity and a reference to the standard(s) or other normative document(s), including issue or revision used for the assessment;
i) Type of certification;
j) Standards or normative documents, or regulatory requirements or types thereof, to which products, personnel, services, or management systems are certified as applicable;
k) Industry sectors, where relevant;

l) Product categories, where relevant; and
m) Personnel categories, where relevant.

NOTE: Individual certificates for different standards may be issued.

21.2 Certificates are valid for up to four years and may be renewed provided systems are maintained as described in program documentation and subsequent assessments provide objective evidence of ongoing conformance. An extension of the accreditation period may be granted to allow for the timely conduct of the reassessment.

21.3 Companies that are withdrawn from the USDA ISO Guide 65 Program or cancel service must discontinue using the *Certificate of Conformance*.

22 References to Official Certificates and Accreditation

22.1 A certification body with a valid *Certificate of Conformance* may make references to accreditation by the ARC Branch in communication media.

NOTE: Acceptable references may include, for example, "[Certification body's] product certifications are accredited under ISO/IEC Guide 65:1996 by the U.S. Department of Agriculture."

22.2 References must be complete and not misleading or ambiguous.

22.3 References must not imply that a product, process, system, or person is approved by the ARC Branch.

22.4 Certification bodies are responsible for correcting erroneous references in a sufficient manner that is appropriate to the situation.

22.5 If a certification body continuously makes erroneous references, the ARC Branch may not allow the certification body to make any references until such time that the ARC Branch is assured that references will be accurate.