



US Consumer Product Safety Commission

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U.S. Consumer Product Safety
Commission
4330 East West Highway, Bethesda, MD
20814

CPSC Form
#223

Consumer Product Conformity Assessment Body Acceptance

Registration Form

This registration form and all related materials (certificate, scope documents, and training materials, if required) must be submitted electronically and in the English language. Please see the box between sections 9 and 10 below for details.



The information you provide is encrypted for privacy during transit. Clicking on the Verisign logo to the left displays CPSC's specific server ID information and verifies that this is a legitimate Verisign Secure Site.

Please capitalize only the first letter of words and names (except for abbreviations) when filling out this form. Thank you!

1. Legal name of the laboratory:

2. Full address of the laboratory:

Address (Line 1)

Address (Line 2)

City

State/Province:

Country or Administrative Area

Please Select



Postal Code:

3. Registering as a (select one):

- Firewalled Conformity Assessment Body
- Third Party Conformity Assessment Body
- Government Conformity Assessment Body

4. Registration status (select one):

- New Registration
- Increase in scope from prior registration
- Renewal
- Reinstatement

5. Laboratory name as you wish it listed on the CPSC web site, if different than legal name (leave blank if

same):

6. Laboratory's authorized representative:

Family name(s): First (Given) name:

Title: E-mail:

Telephone #: Fax #:

7. Laboratory Accreditation Information:

You must either select an ILAC-MRA member from the drop-down box, or you must enter the ILAC-MRA member providing accreditation in the "Only if Please Select/Other" box. If **neither** or **both** of these choices are made, the form will not work. If you need to enter more than one ILAC-MRA member, enter both in the "Only if Please Select/Other" box.

Name of ILAC-MRA member providing accreditation Please Select/Other

Only if "Please Select/Other": Enter ILAC-MRA accreditor information

Date of accreditation to ISO/IEC 17025:2005 (mm/dd/yyyy)

Certificate number

Expiration date (mm/dd/yyyy)

8. Laboratory web site

(optional):

9. Ownership:

Ownership of the applicant laboratory of 10% or more by manufacturers or private labelers of children's products:

Registration as a firewalled conformity assessment body is required if there are ownership interests in this conformity assessment body (laboratory) of 10% or more by manufacturers or private labelers of children's products subject to the safety requirements for which you are applying. These owners must be identified in the boxes below.

If this does not apply to your laboratory, enter "None" in the first box of the column "Name of Owner".

You may request by checking the box below that the CPSC consider this submitted ownership information as confidential and exempt from public disclosure. This request of confidentiality does not relieve the applicant from the obligation to provide CPSC with the required ownership information.

Check this box if you claim that this information should be considered as confidential and exempt from public disclosure.

Name of Owner	Percent Owned (Do not use "%")
a. <input type="text"/>	<input type="text"/>
b. <input type="text"/>	<input type="text"/>
c. <input type="text"/>	<input type="text"/>
d. <input type="text"/>	<input type="text"/>
e. <input type="text"/>	<input type="text"/>
f. <input type="text"/>	<input type="text"/>

g.	<input type="text"/>	<input type="text"/>
h.	<input type="text"/>	<input type="text"/>
i.	<input type="text"/>	<input type="text"/>
j.	<input type="text"/>	<input type="text"/>

Ownership or control, in whole or in part, by a government entity:

Any ownership or control of this conformity assessment body by a government entity requires registration as a government conformity assessment body. If this conformity assessment body is owned or controlled in part or in whole by a government, the government entity(s) must be named in the boxes below. This includes indirect ownership or control through government ownership of interests in any partners of this conformity assessment body.

The phrase "government entity" in this document refers to any government entity in your country or administrative area, whether national, provincial, territorial, local, etc., and includes state-owned entities even if those entities do not carry out governmental functions.

If this does not apply to your laboratory, enter "None" in the first box of the column "Name of Government Entity".

Ownership or control by a government entity may not be considered as confidential and exempt from public disclosure.

Name of Government Entity	Percent Owned or Controlled (Do not use "%")
a. <input type="text"/>	<input type="text"/>
b. <input type="text"/>	<input type="text"/>
c. <input type="text"/>	<input type="text"/>
d. <input type="text"/>	<input type="text"/>
e. <input type="text"/>	<input type="text"/>

All registrants must provide a copy of the laboratory accreditation certificate and relevant scope documents in addition to this registration form.

Firewalled conformity assessment bodies must also submit copies of the training materials noted in section 11.

Please email these materials separately to labaccred@cpsc.gov and be sure to include your Laboratory Name, Accreditation Certificate Number, and Scope (Regulation) in the subject line of your message.

10. Seeking CPSC acceptance for the following (check all that apply; if you have been accepted for one of them previously, please do not check it again):

- Lead Paint, 16 CFR Part 1303
- Small Parts Regulation, 16 CFR Part 1501
- Full-Size Cribs, 16 CFR Part 1508
- Non Full-Size Cribs, 16 CFR Part 1509
- Pacifiers, 16 CFR Part 1511
- Children's Metal Jewelry, CPSC Test Method CPSC-CH-E1001-08 for Determining Total Lead in Children's Metal Products

11. Firewalled conformity assessment body training materials

If any manufacturer or private labeler of children's products, subject to the safety requirements for which you are applying, holding ten percent or greater interest in this conformity assessment body is using this entity for the required testing of their products, the conformity assessment body must submit a copy of the firm's established materials used for training its employees on the process and means by which allegations of any attempt by the manufacturer, private labeler or other interested party to hide or exert undue influence over test results can be immediately and confidentially reported to the Commission

12. Applicant Information:

Family name(s): First (Given) name:

Title: E-mail:

Current Date: (mm/dd/yyyy)

KNOWING AND WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR IN ANY OTHER SUBMITTED MATERIALS ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT FOR UP TO FIVE YEARS (U.S. Code, Title 18, Section 1001) AND/OR WITHDRAWAL OF CPSC ACCEPTANCE OF ACCREDITATION.

If you submit and nothing happens, look for a red asterisk(s) (*) indicating a required entry; please complete the entry by the asterisk and re-submit. If submission is successful, you will get an immediate acknowledgment.

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Revision 4b

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