भारतीय मानक ब्यूरो (हॉलमार्किंग विभाग)

हमारा रेफरी: एचएमडी (14:44)

22 अक्टूबर 2018

विषय: हॉलमार्किंग केंद्रों के अधिग्रहण और संचालन के दिशानिर्देशों के लिए संशोधित अनुबद्ध ए और अनुबद्ध बी ।

एसेइंग और हॉलमार्किंग केंद्रों की अधिग्रहण और संचालन के लिए दिशानिर्देश दिनांक 04.10.2018 एचएमडी के नोट संख्या एचएमडी/14:7 के माध्यम से जारी किए गए थे। उपरोक्त दिशानिर्देशों में अनुबद्ध ए (एसेइंग और हॉलमार्किंग सेंटर की पहचान / नवीनीकरण आकलन पर रिपोर्ट) और अनुबद्ध बी (हॉलमार्किंग सेंटर के निगरानी आकलन पर रिपोर्ट) में कुछ संपादकीय सुधार किए गए हैं। संशोधित प्रारूप संलग्न हैं। भविष्य में इसका इस्तेमाल किया जाएगा। यह तत्काल प्रभाव के साथ लागू होगा।

इंद्रजीत सिंह वैज्ञानिक – सी/ एचएमडी

प्रमुख, हॉलमार्किंग सभी क्षेत्रीय कार्यालय/ शाखा कार्यालय के <u>लिए प्रसारित</u> प्रतिलिपि : आईटीएसडी इंट्रानेट पर होस्टिंग के लिए

Bureau of Indian Standards (Hallmarking Department)

Our Ref: HMD (14:44) 22 October 2018

Subject: Revised Annex-A & Annex-B for GUIDELINES FOR RECOGNITION & OPERATION OF ASSAYING AND HALLMARKING CENTRES

The Guidelines For Recognition & Operation of Assaying and Hallmarking Centres were issued vide HMD note No. HMD/14:7 dated 04.10.2018. Some editorial corrections have been made in the ANNEX A (Report on Recognition / Renewal Assessment of Assaying and Hallmarking Centre) and ANNEX B (Report on Surveillance Assessment of Assaying and Hallmarking Centre) in the above guidelines. The revised formats are attached. The same shall be used in the future. This comes into force with immediate effect.

Inderjeet Singh Scientist C /HMD

Head (HMD)

Circulated to all ROs/BOs

Copy to: ITSD for hosting on the Intranet

DOC:<u>HM/AHC/F 2.1</u> Sep 2018

BUREAU OF INDIAN STANDARDS

REPORT ON RECOGNITION / RENEWAL ASSESSMENT OF ASSAYING AND HALLMARKING CENTRE

| 1 | GENERAL INFORMATION | | | | | | |
|------|---|---|--|-----------------------|----------------------|----------------|---------|
| | Partic | ulars | | | Observation | ns during asse | essment |
| i) | Name & address of the Assaying and Hallmarking Centre with PIN code & complete address including phone and e-mail | | | | | | |
| ii) | Applica | ation No. | | | | | |
| iii) | Date(s |)of Assessmen | t | | | | |
| iv) | | · | ng assessment | | | | |
| 2 | MENT | IONED BELOV | OF IS 15820:2009 V FOR AUDITING | 6) | AUSES OF TH | HE STANDARD |) AS |
| i) | Verification of Centre's Layout: (5.3) (to be verified with documents submitted by the applicant along with the application) | | | | | | |
| ii) | Details of Internal Quality Audit / Management Review meeting (4.1.4 / 4.1.5) | | | | | | |
| iii) | 4.1.10, through | Verification of availability of trained & competent manpower resources: (4.1.7, 4.1.8, 4.1.9, 4.1.10, 4.1.11, 4.1.12, 4.1.13, 5.2.2, 5.2.3, 5.2.4 & 5.2.5) (competency shall be assessed through observations of practical work, namely sample collection, weighing, XRF machine operation, fire assay) | | | | | |
| | <u>Appen</u> | Append details as Annex A in the following format: | | | | | |
| | SI. No. | Name & Designation | Qualification, Academic & Professional | Experience & Training | Competent Yes /No | Remarks | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | 1 |
| iv) | | | ersions* of IS 15 | | | | |
| | | · | 113 (*strike off w | hich | | | |
| | are not applicable) | | | | | | |

| v) | Equipment/ Instrument & Infrastructure (for sampling; assaying; Hallmarking; power, safety & security):(4.1.6, 5.3.2, 5.4.2, 5.4.3, 5.4.4, 5.6) | | | | | | | | | |
|-------|---|---|--|--|------------------|--|--------------------------------|-----------------------|---------|--|
| | Append details as Annex B in the following format: | | | | | | | | | |
| | SI. No. | Clause Ref. of IS 1418 / 2113 | Details of equipment / Instrument | Make & SI. No | Qua in Num | | Range & accuracy (least count) | Calibration status | Remarks | |
| | | | | | | | | | | |
| vi) | | | for sampling, es during assay | | g, | | | | | |
| vii) | Capak Ru in (5.4.2 suppli | oility of XF Gold or 0 & 5.4.3) er certifica | RF tester to detended & Pb in Silvania : Verify manute & report on the for Cd, Ir, F | ect Cd, Ir ver article ufacturer availabili | es / | | | | | |
| | <u>Apper</u> | nd copy a | s Annex C. | | | | | | | |
| viii) | | gements for (5.4.5) | or rejection and | d return (| of | | | | | |
| ix) | Hallma | arking (5.4 | .6) | | | | | | | |
| | Wheth machi | ner acces ne is contr | ss to Laser olled | · Markir | ıg | | | | | |
| | Wheth legible | | arking on artic | les marke | :d | | | | | |
| x) | Availa (5.5.1) | • | vater & other | chemica | ls | | | | | |
| xi) | | bility of ce) (5.6): | ertified reference | ce materi | al | | | | | |
| | <u>Apper</u> | nd copy a | s Annex D | | | | | | | |
| xii) | Arranç | gements fo | or sampling (5.7 | ') | | | | | | |
| xiii) | | handling, | or receiving of storage & of | | | | | | | |

| xiv) | (iv) Whether the applicant has participated in Inter Laboratory Comparison or F Testing Programmes (5.9.1): | | | | | Proficiency |
|------|--|---|-----|--------------|--------|-------------|
| | Append details as Annex E in the following format: | | | | | |
| | SI. Name of Centre & Place | | | Date of Test | Result | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| xv) | | Report proforma developed rs all requirements of 3 (5.10.1) | | | | |
| xvi) | Arrangement for ensuring impartiality, integrity, confidentiality, independence of judgement in relation to XRF testing, assaying and Hallmarking activities | | | | | |
| 3 | TESTING AN | D ASSAYING DURING ASSE | SSN | IENT | | |
| i) | Draw samples randomly from stock of articles available with the applicant and get them tested. | | | | | |
| | a) XRF testing (assess capability of XRF machine for purity, detection of Cd, Ir, Ru and Pb). Check Min. 5 samples each, from two different lots; | | | | | |
| | b) Fire assay : minimum 2 samples(one each from two different lots) in duplicate) | | | | | |
| | | St Report as Annex F AHC / F 2.5 Sep 2018) | | | | |
| 4 | PAST PERFORMANCE (APPLICABLE ONLY IN CASE OF RENEWAL ASSESSMENT) | | | | | SMENT) |
| i) | | formance observed at last udit was satisfactory? | | | | |
| ii) | Whether any | discrepancy was reported? | | | | |
| | | t corrective action taken. action taken has corrected | | | | |
| | the discrepan | | | | | |
| iii) | Has overall | performance in the entire od been satisfactory? | | | | |
| iv) | | aint pending? Report action | | | | |

| 5 | SC | OPE OF RECOGNITION | | |
|---|--|---|---|---|
| | <u>Ap</u> | pend as Annex G | | |
| 6 | DISCREPANCIES, IF ANY, SHALL BE COMMUNICATED THROUGH DISCREPANCY/VARIATION REPORT (DOC.:HM/AHC/F 2.4 Sep 2018) | | | |
| | Ap | <u>pend as Annex H</u> | | |
| 7 | CONCLUSION & RECOMMENDATIONS | | | |
| 8 | ANNEXES (Indicate page nos.) | | | |
| | Α | Details of Managerial & Technical Personnel | E | Details of Inter Laboratory Proficiency Testing |
| | В | List of Equipment/instrument/infrastructure | F | Test Report |
| | С | Manufacturer's certificate on XRF machine | G | Scope of Recognition |
| | D | Certificate on CRMs | Н | Discrepancy/Variation Report |
| | | of Auditor(s) with Date: Designation: | 1 | 1 |

Instruction: i) *Please do not attach any document/record/sheet other than Annexure A – H* ii) All the Annexes shall be signed by the Auditor(s)

Remarks of the Reviewing Officer:

ANNEX B

DOC:<u>HM/AHC/F 2.2</u> Sep 2018

BUREAU OF INDIAN STANDARDS

REPORT ON SURVEILLANCE ASSESSMENT OF ASSAYING AND HALLMARKING CENTRE

| 1 | GENERAL | |
|------|--|---|
| i) | Name & address of the Assaying and Hallmarking Centre | |
| ii) | BIS Recognition No. & Validity Date | |
| iii) | Date of Assessment | |
| iv) | Persons contacted | |
| v) | Last Assessment | Date: |
| | Whether corrective action has been taken on all observed discrepancies. | Yes/No |
| | Verification of corrective actions taken on recorded discrepancies at last audit. | Satisfactory/not satisfactory |
| | Discrepancy(s) is/are persisting. | If yes, give details in the Discrepancy/Variation Report (DOC.: HM/AHC/F 2.4,Sep 2018) |
| vi) | Scope of Recognition - Is working within approved scope? | Yes/No. If no, give details on Discrepancy/Variation Report. |
| 2 | INFRASTRUCTURE, MANPOWER & S | YSTEMS AS PER IS 15820 |
| i) | Whether all test and marking equipment are in working condition., specially with respect to: a) Availability of valid power supply; b) Maintenance and calibration of test equipment, namely XRF machine, weighing balances, furnaces (cupellation, annealing). | |
| ii) | If calibration has been done by non- NABL accredited laboratory, whether the calibration certificate is traceable to national standards. | |

| iii) | Whether security system, like CCTV are in operation. Check records of CCTV and verify receiving and delivery activities. | |
|-------|---|--|
| iv) | Whether distilled water and other consumables available. Check halides in distilled water. | |
| v) | Whether the Professional Indemnity Insurance of high value items are under valid status and these insurances have been done for the minimum amount specified in IS 15820. | |
| vi) | Whether the centre has participated in inter laboratory comparison/proficiency testing programme. | |
| vii) | Whether the centre has carried out the Internal Quality Audit/ Management Review meeting | |
| viii) | Whether the articles accepted for assaying and hallmarking are only from BIS registered jewellers. | |
| ix) | Whether similar articles, segregated lot wise with declared fineness are received from registered jewellers. | |
| x) | Whether undertakings were obtained from jewellers regarding their identification mark. | |
| xi) | Whether Jewellery with prohibited markings is accepted for hallmarking. | |
| xii) | Whether acknowledgement / receipt with time has been issued and jewellers signature obtained. | |
| xiii) | Whether lot wise records of articles received from jewellers are available. Do they tally with records of assaying, hallmarking done and delivery | |
| xiv) | Whether there has been any change in technical manpower or Centre's Management since previous assessment. Verify competency of manpower by actual work performance and report. Report shall include name, qualification, experience and competency. | |
| xv) | Whether XRF testing, fire assay and laser marking are being done by competent personnel regularly. Check records. | |

| xvi) | Whether any of the terms and conditions violated. | |
|------|---|--|
| 3 | RECORDS | |
| i) | Whether following records are maintained on regular basis? > Receipt/Collection Voucher > Record of Jewellers, Respective Registration & Identification Marks > Record of Jeweller& Lot Nos. > Sample Envelope > XRF Card > Stock Register of CRMs • Check Gold • Silver • Copper • Lead | |
| | Assaying Report Assaying Sheet Test Certificate Marking Record Sheet Invoice cum Delivery Challan Jeweller's Feedback | |
| ii) | Whether records indicate traceability of individual lot with times of its receipt and delivery with Hallmark. | |
| iii) | Whether records are maintained on Hallmarking done for each registered jeweller. | |
| iv) | Whether record of XRF testing is up to date. | |
| V) | Whether testing had been for precious metal which was beyond scope of recognition, without seeking formal inclusion of the precious metal in their scope of recognition. | |
| vi) | Whether an article of lower purity had been Hallmarked with higher purity | |
| vii) | Whether Hallmarking done for non- registered jeweller | |
| 4 | XRF TESTING | |
| i) | Whether XRF testing for purity and detection of prohibitive elements are being done. | |
| ii) | Whether XRF machine is checked with certified reference standards of gold/silver. | |

| 5 | SAMPLING FOR FIRE ASSAY | |
|------|--|--|
| i) | Whether sampling plan given in IS 15820 is followed and relevant records are available. | |
| ii) | Whether collection of representative gold/silver portions from each of the sampled article is being done for fire assay. | |
| 6 | ASSAYING | |
| i) | Whether certified reference materials | |
| | (CRMs) with purity certificate from Indian Govt. Mint or NABL accredited lab available. | |
| ii) | Whether CRMs are used in assaying and corresponding receipt, consumption records of CRMs are available. | |
| iii) | Whether specified test methods are being followed. | |
| iv) | Is assay record is maintained as documented in Quality Manual. Check for rough records of fire assay. | |
| v) | Whether proof assay cornets are available. Do they tally with lotwise assay record. | |
| vi) | Is assay record available for hallmarked jewellery ready for delivery. | |
| 7 | HALLMARKING | |
| i) | Whether the markings are Legible. | |
| ii) | Is marking done on all removable / detachable parts. | |
| iii) | Whether the sequence of marking is followed. | |
| iv) | Whether time of laser marking is recorded. | |
| 8 | DELIVERY | |
| i) | Whether articles ready for delivery are all Hallmarked including all removable/ detachable parts. | |
| ii) | Whether cornets of samples of each assayed lot are available and kept ready for delivery. | |
| iii) | Whether proof of delivery indicating details of Hallmarked jewellery and time available. | |
| 9 | IDENTIFICATION & TRACEABILTY | |
| i) | Whether identification and traceability of jewellery maintained at all stages from receipt to delivery. | |

| ii) | Whether each activity completed and | |
|------|---|---|
| | records available before proceeding to | |
| | next activity. | |
| 10 | TESTING DURING ASSESSMENT | |
| I) | Whether random samples drawn from | |
| | the stock of articles available with | |
| | Hallmark during the visit and testing | |
| | done. Give details of samples. | |
| | | |
| | (The test report shall be in the format | |
| | given at DOC.: HM/AHC/F 2.5 | |
| | Sep 2018). | |
| | | |
| | Test Result: Pass/Fail | |
| ii) | Check corresponding test records of | Record Tested Result |
| | XRF and Fire assay and report vis-à-vis | XRF |
| | tested results | i. Fineness |
| | | |
| | | ii. Detection of |
| | | Cd, Ir & RU |
| | | |
| | | Fire Assay (ppt) |
| | | |
| iii) | Whether significant variation is | |
| | observed between obtained result and | |
| | available record. | |
| 11 | COMPLAINT(S) | , |
| i) | Whether the complaints received , if | |
| | any, have been resolved . | |
| 12 | | unicated through Discrepancy/Variation Report |
| | (DOC.:HM/AHC/F 2.4 Sep 2018) | |
| | | |
| 13 | CONCLUSION & RECOMMENDATIONS | 5 |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | Signature of the Auditor (s) with Date | |
| | | |
| | | |
| | Nama & Designation | Į l |

Remarks of the Reviewing Officer: