Notification of Changes (HKAS 009 Annex VI)				
(Please tick the box or boxes below as appropriate and provide the information \slash supporting documents as required.)				
				For Office Use
	(6)		ificant Change in Working Procedures and Resources including Personnel, pment, Facilities, Working Environment	
		6.1	Description of the change	
		6.2	Accredited activities that will be affected by the change	
		6.3	Provide the following information with this form, where relevant:	
			(i) Evaluation/validation report	
			(ii) New procedures	
			(iii) Updated scope	

~ end of this annex ~