

Application for: TÜV SÜD BABT Unlimited AI Essentials Attestation

This form relates to the attestation that an organisation is managing its AI usage in a safe, coma trustworthy, and responsible way.

Please liaise with TÜV SÜD BABT Unlimited if you have any queries regarding this form, prior to completion.

Section A About the Applicant

- A1** Please write here the name and address of the organisation in whose name the Certificate of Attestation document is to be issued (the “Applicant”).

Company Name:	
Address:	
Post Code:	

- A2** Please write here (but not sign) the name and position of the Senior Manager who is authorised on behalf of the Applicant to enter into the agreement (see section D) with TÜV SÜD BABT Unlimited.

Name:	
Position:	
Email:	
Tel:	

- A3** Please write here the name and address of the person who will be responsible for day-to-day liaison with TÜV SÜD BABT Unlimited

Name:	
Position:	
Email:	
Tel:	

- A4** If you wish to authorise TÜV SÜD BABT Unlimited to discuss your application with any other person or organisation acting on behalf of, but not employed by, the applicant, please give their name and address alongside.

Note: By completing this section (A4) you authorise TÜV SÜD BABT Unlimited to discuss confidential aspects of your application with the party named

Name:	
Position:	
Company Name:	
Address:	
Post Code:	
Email:	
Tel:	

- A5** Please select your organisation’s AI areas (select all the are applicable)

AI User ☐
AI Provider ☐
AI Producer ☐

Section B About the Application

- B1** Please indicate (X) the type of Application

New Application ☐ Renewal ☐ Upgrade to AI Essentials Plus ☐ AIE Number

Existing AIE number must be included for Renewals or Upgrades

- B2** Please identify the Attestation Type you require (Select only one).

Note: AI Essentials Plus must already hold AI Essentials and have received that Attestation within the past 6 months.

AI Essentials ☐ AI Essentials Plus ☐

Section C AI System for which attestation is being sought

C1 Please identify use if AI is utilised in relation to this AI Essentials attestation as per your scope declaration.

Identify the activities that AI is used and in what areas of your organisation (e.g. Customer Chatbot for support across the whole organisation, or Microsoft CoPilot to help summarise and reply to emails and organise meetings).

C2 Supporting evidence supplied

Artifact

AI Essentials Self-Assessment Questionnaire
AI Asset Registry
Scope Declaration
Board-Level Risk Briefing
AI Literacy Training Logs/Staff Response Playbook
AI Impact Assessment
Acceptable AI Use Policy
Public AI Transparency Statement
Terms of Service (ToS)

Additional AI Essentials Plus evidence

Screenshots of Global MFA settings for AI Admin consoles
Human-in-the-Loop (HITL) Operating Procedure
Bias Test Report or Bias Risk Assessment
Model Card

Applicability

- | | |
|--------------------------|-------------------------------------|
| ☐ | AI User / AI Provider / AI Producer |
| ☐ | AI User / AI Provider / AI Producer |
| ☐ | AI User / AI Provider / AI Producer |
| ☐ | AI User / AI Provider / AI Producer |
| ☐ | AI User / AI Provider / AI Producer |
| ☐ | AI User / AI Provider / AI Producer |
| ☐ | AI User |
| ☐ | AI User |
| ☐ | AI Provider |
|
 | |
| ☐ | AI User / AI Provider / AI Producer |
| ☐ | AI User / AI Provider / AI Producer |
| ☐ | AI User / AI Provider / AI Producer |
| ☐ | AI Producer |

C3 Exceptions

Identify any AI systems that are excluded from scope of this attestation for AI essentials.

Note all exclusions must have accompanying documentation to justify their exclusion.

Section D Agreement

This section must be completed by an authorised signatory on behalf of the Applicant named in A1

- I hereby apply for Attestation of the Organisation described in section A above; and
- I have read the TUV SUD BABT Testing, Certification, Validation and Verification Regulations, a copy of which can be found here, and agree to abide by them insofar as they relate to a Certified System; and
- I undertake to ensure that TUV SUD BABT UNLIMITED is advised of all material changes to the System (s) forming the subject of this application and of all changes affecting the veracity of any statement in any section of this Application; and
- I (We) declare that we will regularly monitor the TÜV SÜD Certification blog (Link) to be informed of any updates /changes to the certification scheme; and
- *I agree to permit TUV SUD BABT UNLIMITED to place details of my certification on their website.
- (*Delete if not applicable)

Signed for on behalf of the applicant:

(Authorised Signatory)

Please Print name: (block capitals):

Date: DD/MM/YYYY

The following specific conditions also apply:

- Attestations only relate to the organisation and related scope as identified in the certificate.
- Certificates are not transferable.

- Changes to the Holders name or address must be notified to TUV SUD BAPT Unlimited Customer Services in writing.

Please return your application to:	
TUV SUD BAPT UNLIMITED Octagon House Concorde Way Segensworth North Fareham Hampshire PO15 5RL United Kingdom	Tel: +44 (0) 1489 558100 Fax: +44 (0) 1489 558101 Web Address: www.tuvsud.com/en-gb/babt Email: babt@tuvsud.com