

MANUAL OF MELT

USER LOGIN :

Link : <https://nablmelt.qci.org.in/Laboratory/login.php>

[Register](#) [Login](#)



National Accreditation Board for Testing and Calibration Laboratories

(A Constituent Board of Quality Council of India)

NABL Medical Entry Level Testing M(EL)T Labs Program

Sign In

 I'm not a robot 
[Privacy](#) [Terms](#)

[New laboratory register now](#) [User Manual](#)
[Forgot password?](#)

About Scheme

NABL has launched voluntary scheme namely **"NABL Medical Entry Level Testing M(EL)T Labs Program"** for sensitizing the medical testing laboratories performing basic testing to quality practices and access to quality health care for the majority of citizens especially those residing in villages, small towns.

This scheme is an independent quality assurance scheme, which is not covered under APAC & ILAC MRA

The existing scheme has been revised and now this scheme is **based on satisfactory proficiency testing (PT) performance** and valid for one cycle of three years.

Laboratory application will be reviewed by NABL and decision on recognition will be taken based on performance in proficiency testing (PT). During the recognition period (within three years), on-site assessment (surveillance) will be conducted.

NABL will only recommend those tests in the scope of the laboratory which are available in the scope of the NABL accredited PT provider. Further, regarding the calibration certificate of equipment it is recommended to calibrate the equipment from the calibrating laboratory for which it is accredited. The authenticity regarding the scope of calibration laboratory and accredited PT provider to be verified from NABL website. Once Certificate is issued to the laboratory the details will also appear in NABL 900 which is available on NABL website under publication/document which is updated on monthly basis.

Fee Structure

Components	Fee/Charges
Recognition Fee (for three year, payable before issue of certificate)	₹ 15000 /-
Surveillance Charge (the amount needs to pay at onsite at the time of assessment)	On actual basis

Note 1: In addition to the above-mentioned fee, GST @ 18% is to be paid along with said charges/fee.

Note 2: Payment option for Recognition fee will be visible after issue of certificate and payment can be made through the gateway available in the portal.

Contact Us :

nablmelt@nabl.qcin.org
01244594828/825, 01244679750/732

- [Privacy Policy](#)
- [Disclaimer](#)
- [Refund and Cancellation](#)

Designed by 7techies

- First we click on the new laboratory click here to register now.

[Register](#) [Login](#)



National Accreditation Board for Testing and Calibration Laboratories
(A Constituent Board of Quality Council of India)
NABL Medical Entry Level Testing M(EL)T Labs Program

STEPS TO SUBMIT ONLINE APPLICATION FOR NABL RECOGNITION

1. **Minimum Eligibility Criteria to submit Application**
 - The applicant laboratory shall have satisfactorily participated in Proficiency Testing (PT) program conducted by accredited PT provider as per ISO/IEC 17043 before submission of application.
 - Test parameters covered in last six months in PT programs shall be considered for recognition. Six months shall be calculated from date of application submission.
 - PT result / report received date shall be considered for PT participation date
 - Scope once recognized cannot be changed during recognition period. There is no provision for extension in scope in this scheme.
 - Laboratory shall be legally identifiable.
2. **Requirement to submit the Application**
 - Application has to be submitted from Laboratory premises – for geo tagging of laboratory premises and equipment.
3. **Documents to be kept ready (scan copy) before submitting Application**
 - Copy of Legal Identity of Laboratory
 - PT Participation report for the applied scope
 - Calibration Report / AMC of the equipment record required to test the parameters under the applied scope.
4. **Steps to submit the application**

Place of work	Steps
Web based - Through internet in Laptop / desktop / Mobile	<ul style="list-style-type: none"> • Fill the details for registration as asked in form (Laboratory details, Scope for recognition, PT Participation information). Login ID and Password will be generated. • Upload the desired documents (Legal Identity, PT Participation report, Calibration report / AMC record of equipment)
Android Based Mobile	<ul style="list-style-type: none"> • Download the NABL M(EL)T Labs Program App from the play store, download the App. Enter the login ID and Password (created during registration process). Please note App has to be installed through the phone number used for registration. • Click the pictures and enter the desired information in the App (Picture of Lab location, Pictures of equipment entered while uploading documents and other necessary information as asked) Save the information in the App.
Web based - Through internet in Laptop / desktop / Mobile	<ul style="list-style-type: none"> • Go to your registered account. • Enter the mobile number which is used to work on the app. • All the information uploaded in App will automatically be updated in laboratory account. • See the preview of the application. Verify all the information. • Press the submit button • An auto reply will be sent to registered email and phone number.

Note : after completing the above steps application for recognition will be submitted successfully.

[Click here to register](#)

- [Privacy Policy](#)
- [Disclaimer](#)
- [Refund and Cancellation](#)

Designed by [7techies](#)

- We click on the click here to register. And click on the the I accept above terms and conditions, then you will go to the registration form.

LINK : <https://nablmelt.qci.org.in/Laboratory/new-scheme/lab-details.php>

[Register](#) [Login](#)



National Accreditation Board for Testing and Calibration Laboratories
(A Constituent Board of Quality Council of India)
NABL Medical Entry Level Testing M(EL)T Labs Program

New Lab Registration

Laboratory Name* <input type="text" value="Laboratory Name*"/>	Email Address* <input type="text" value="Email address*"/>	Mobile Number* <input type="text" value="Mobile number*"/>
Address* <input type="text" value="Address*"/>	Country* <input type="text" value="India"/>	State* <input type="text" value="Select State*"/>
District* <input type="text" value="Select District*"/>	Zip Code* <input type="text" value="Enter Zip Code Here*"/>	Technical Head/Lab Manager* <input type="text" value="Technical Head/Lab Manager"/>
Are you NACO ICTC Laboratory?* <input type="radio"/> Yes <input type="radio"/> No	Participated in PT program with accredited PTP?* <input type="radio"/> Yes <input type="radio"/> No	

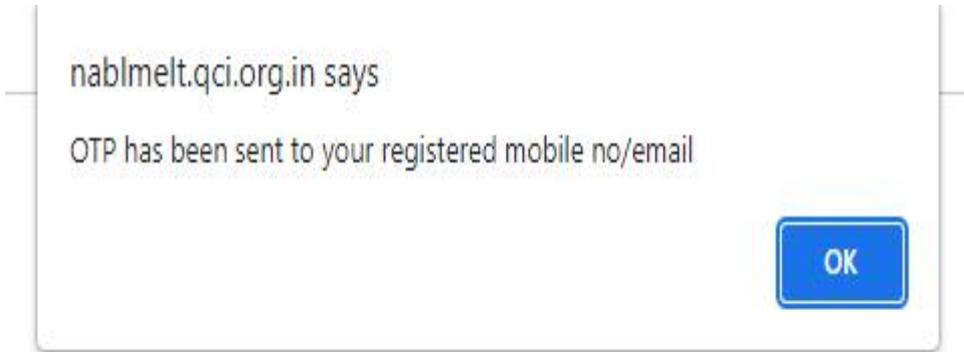
[Verify Contact Details](#)

Already Have an account? [Log In](#)

- [Privacy Policy](#)
- [Disclaimer](#)
- [Refund and Cancellation](#)

Designed by [7techies](#)

- After that we can fill the Laboratory name, Email address , Mobile Number, Address , Country , State, Districts , Zip Code, Technical Head/ Lab Manager, Are you NACO ICTC Laboratory, Participated in PT Program with accredited and click on the verify contact details.
- We will get the email and OTP has been sent to your registered email / Mobile No.



- We click on the ok button and go to the next step.
LINK : <https://nabl melt.qci.org.in/Laboratory/new-scheme/lab-details.php>

[Register](#) [Login](#)

National Accreditation Board for Testing and Calibration Laboratories
 (A Constituent Board of Quality Council of India)
NABL Medical Entry Level Testing M(EL)T Labs Program

New Lab Registration

Laboratory Name*

Email Address*

Mobile Number*

Address*

Country*

State*

District*

Zip Code*

Technical Head/Lab Manager*

Are you NACO ICTC Laboratory?*

 Yes No

Participated in PT program with accredited PTP?*

 Yes No

Scope Details

Medical Microbiology And Immunology ▾

	Name of PTP	Type Of Sample	Specific Tests	Test method/technique	Date of Issue of PT Report	Is Result Satisfactory
<input type="checkbox"/>	Select organizing bod ▾	Serum	HIV	<input type="text"/>	dd-mm-yyyy	<input type="radio"/> Yes <input type="radio"/> No

Already Have an account? [Log In](#)

- [Privacy Policy](#)
- [Disclaimer](#)
- [Refund and Cancellation](#)

Designed by [7techies](#)

- Now we can see the new scope details tab, Medical Microbiology And Immunology, click on the checkbox, select the Name of PTP and fill the Test method / technique, Date of issue of PT Reports, choose the result is satisfactory and click on the Register button. (please make sure the information given in this registration form is correct. after registration you can not change these details.)

Quality Assurance Scheme for Basic Composite Medical Laboratory- Entry Level

[Profile](#) [Log Out](#)

[Home /](#)

Change Password

Password sent to register Email ID/Mobile No *

New Password *

Confirm Password *

[Change Password](#)

[Privacy Policy](#) Designed by [7techies](#)
[Disclaimer](#)
[Refund and Cancellation](#)

- After this the login details has been send to your registered mail id and change your password.

NABL M(EL)T Labs Program Contact Us : nablmelt@nabl.qcin.org [Profile](#) [Log Out](#)

Lab details [Home / lab details](#)

[Laboratory Details](#) [Document upload](#) [Checklist](#) [Final](#)

Entry Level Laboratory Details

Laboratory Details	Document Upload	Checklist	Declaration																
<p>Name of the entry level laboratory *</p> <input type="text" value="Muskan Gupta"/> <p>Mobile No. *</p> <input type="text" value="8279541629"/> <p>Country *</p> <input type="text" value="India"/> <p>District *</p> <input type="text" value="NEW DELHI"/> <p>Name of Technical Head/Lab Manager *</p> <input type="text" value="Lab Manager"/> <p>Participated in PT program with accredited PTP?*</p> <input checked="" type="radio"/> Yes <input type="radio"/> No	<p>E-mail *</p> <input type="text" value="muskan.7t@gmail.com"/> <p>Location and address*</p> <input type="text" value="dummy testing"/> <p>State *</p> <input type="text" value="Delhi"/> <p>Pin Code *</p> <input type="text" value="110085"/> <p>Are you NACO ICTC laboratory?*</p> <input checked="" type="radio"/> Yes <input type="radio"/> No																		
<p>Scope applied</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>S. No.</th> <th>Name of PTP</th> <th>Discipline</th> <th>Type Of Sample</th> <th>Specific Tests</th> <th>Test method/technique</th> <th>Date of Issue of PT Report</th> <th>Is Result Satisfactory</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>CMC EQAS, CLBiochemistry Vellore</td> <td>Medical Microbiology And Immunology</td> <td>Serum</td> <td>HIV</td> <td>Test</td> <td>2022-08-27</td> <td>Yes</td> </tr> </tbody> </table>				S. No.	Name of PTP	Discipline	Type Of Sample	Specific Tests	Test method/technique	Date of Issue of PT Report	Is Result Satisfactory	1	CMC EQAS, CLBiochemistry Vellore	Medical Microbiology And Immunology	Serum	HIV	Test	2022-08-27	Yes
S. No.	Name of PTP	Discipline	Type Of Sample	Specific Tests	Test method/technique	Date of Issue of PT Report	Is Result Satisfactory												
1	CMC EQAS, CLBiochemistry Vellore	Medical Microbiology And Immunology	Serum	HIV	Test	2022-08-27	Yes												
Next																			

[Privacy Policy](#) [Disclaimer](#) [Refund and Cancellation](#) Designed by [7techies](#)

- After change the password we will saw the Laboratory Details, Document Upload, Checklist and Final and when we see about the Entry Level Laboratory Details they automatically fetch the data from the registration page .

Link : <https://nablmelt.qci.org.in/Laboratory/new-scheme/document-upload.php>

NABL M(EL)T Labs Program

Contact Us : nablmelt@nabl.qcin.org
Profile
Log Out

Document upload
Home / document upload

Laboratory Details
Document upload
Checklist
Final

Document upload

Laboratory Details
Document Upload
Checklist
Declaration

Legal Identity Details

Document type

Select document type ▼

File upload

Choose file No file chosen

allowed file type (pdf/jpg/jpeg/png)

Upload file

LAB shall provide photocopy of following appropriate document(s) in support of the legal status claimed:

- Company Act (Copy of Registration under 2013 Act)
- Proprietorship Firm (Bank Passbook, Account statement)
- Government/Autonomous Organization (Copy of Government Notification / Self Declaration etc.)
- Partnership Firm (Copy of Registration under 1932 Act.)
- Societies Registration Act (Copy of Registration under 1860 Act.)
- Indian Trust Act (Copy of Registration under 1882 Act.)
- Limited Liability Partnership (Limited Liability Partnership Act, 2008)

PT Document

Sl No.	Name of PTP	Discipline	Date of issue of PT report	Is result satisfactory	Upload report
1	CMC EQAS CLBiochemistry Vellore	Medical Microbiology And Immunology	2022-08-27	Yes	<div style="display: flex; align-items: center; justify-content: center;"> <div style="border: 1px solid #ccc; padding: 2px 5px; font-size: 0.7em;">Choose file</div> <div style="margin-left: 5px; font-size: 0.7em;">No file chosen allowed file type (pdf/jpg/jpeg/png)</div> </div>
*	<div style="border: 1px solid #ccc; padding: 2px; font-size: 0.7em;">Select organizing bod</div>	<div style="border: 1px solid #ccc; width: 50px; height: 20px;"></div>	<div style="border: 1px solid #ccc; padding: 2px; font-size: 0.7em;">dd-mm-yyyy</div>	<input type="radio"/> Yes <input type="radio"/> No	<div style="display: flex; align-items: center; justify-content: center;"> <div style="border: 1px solid #ccc; padding: 2px 5px; font-size: 0.7em;">Choose file</div> <div style="margin-left: 5px; font-size: 0.7em;">No file chosen allowed file type (pdf/jpg/jpeg/png)</div> </div>

Equipment Document

Sl No.	Discipline	Name of equipment	Calibration certificate of equipment	Image of the equipment via Mobile App
1	Medical Microbiology And Immunology	<div style="border: 1px solid #ccc; width: 80px; height: 20px;"></div>	<div style="display: flex; align-items: center; justify-content: center;"> <div style="border: 1px solid #ccc; padding: 2px 5px; font-size: 0.7em;">Choose file</div> <div style="margin-left: 5px; font-size: 0.7em;">No file chosen allowed file type (pdf/jpg/jpeg/png)</div> </div>	Photograph/S Not Uploaded By Mobile App.
*	<div style="border: 1px solid #ccc; padding: 2px; font-size: 0.7em;">---Select Items</div>	<div style="border: 1px solid #ccc; width: 80px; height: 20px;"></div>	<div style="display: flex; align-items: center; justify-content: center;"> <div style="border: 1px solid #ccc; padding: 2px 5px; font-size: 0.7em;">Choose file</div> <div style="margin-left: 5px; font-size: 0.7em;">No file chosen allowed file type (pdf/jpg/jpeg/png)</div> </div>	<div style="background-color: #007bff; color: white; padding: 5px 10px; border-radius: 3px; width: 20px; height: 20px; margin: 0 auto;"></div>

Back
Next

Privacy Policy
Disclaimer
Refund and Cancellation

Designed by 7techies

- First we will fill the Document upload under the heading of Laboratory Details, we can select the type of the document and choose file and click on the upload file.
- After document upload we can upload the PT Document and the Equipment Document and click on the next button.

Link : <https://nablmelt.qci.org.in/Laboratory/new-scheme/checklist.php>

NABL M(EL)T Labs Program

Contact Us : nablmelt@nabl.qcin.org Profile Log Out

Checklist Home / checklist

Laboratory Details Document upload Checklist Final

Checklist

Laboratory Details Document Upload Checklist Declaration

GET IT ON Google Play

Dear User , Kindly download the NABL M(EL)T Evidence Collection System Android app from Google Play store and proceed to fill the checklist in app. All data submitted from app will be displayed here. To get the link of Android app on phone enter your mobile no. below

Enter Mobile No. Send

Back Next

Privacy Policy Disclaimer Refund and Cancellation

Designed by 7techies

- After click on the next button the new Checklist Page will open and then Enter Mobile No and click on the send button.
- You have got the notification .

nablmelt.qci.org.in/Laboratory/new-scheme/checklist.php

index.html

nablmelt.qci.org.in says

Link has Been sent to your mobile no.

OK

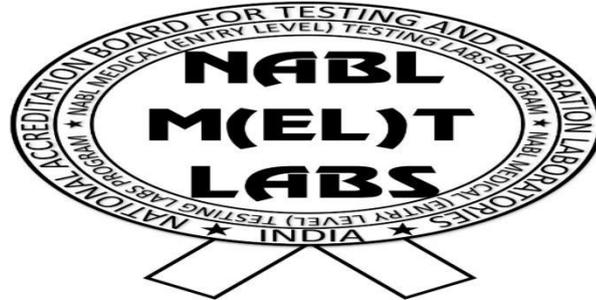
- After this we can click on the next button then the new will open .

Link : <https://nablmelt.qci.org.in/Laboratory/new-scheme/checklist.php>

- You can see the list of Enclosure first two fields updated and the last two details shown cross now we can download the mobile app NABL MELT APP (its available on the playstore) and continue the process.
- After this we will open the app and fill the User Name and Password and click on the Sign In.(allow the permissions and instructions) and click on the proceed button.

APP Process :

User will open the app and fill the Username and password and click on the sign in button .



**Evidence Collection System under NABL
M(EL)T Labs Program**

User Name

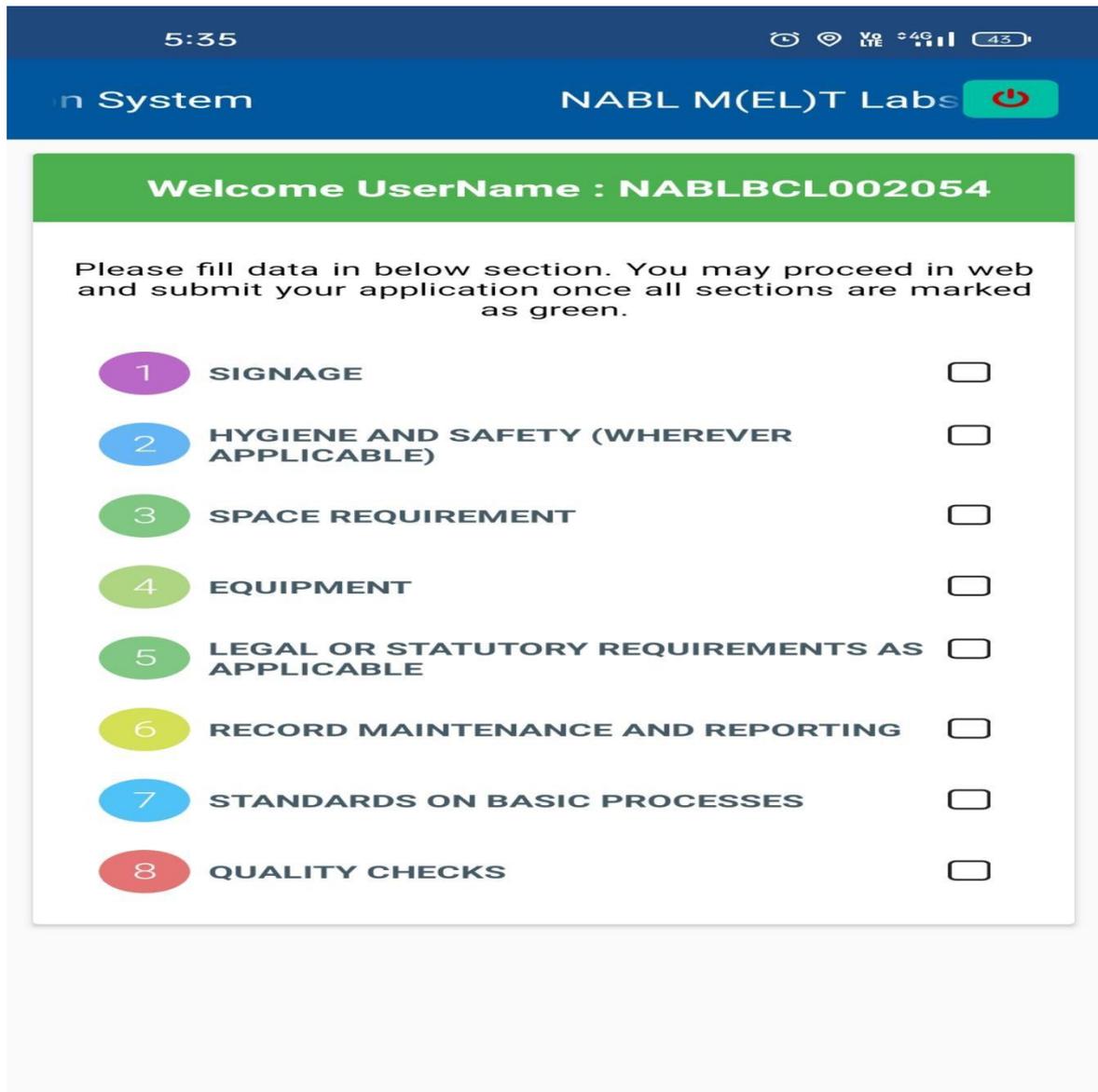
Password

➔ Sign In

Sign In Username and password are same as of your web application.

☰ ◻ ◀

After the sign in process we will directly to the next page . Please fill data in below section.you may proceed in web and submit your application once all sections are marked as green.



User can click on the checkbox of the SIGNAGE and click on the choice (Yes / No),Capture evidence then click on the photo and then save the photo .

5:37 VoLTE 4G 43

SIGNAGE

1 Laboratory Display Board (Outside or on laboratory entrance)

Yes No

Capture Evidence

Save

2 Name of the person-in-charge with qualification

Yes No

Capture Evidence

Save

Next >>

User can click on the checkbox of the HYGIENE AND SAFETY (WHEREVER APPLICABLE) and click on the choice (Yes / No),Capture evidence then click on the photo and then save the photo .

5:38 🕒 📶 4G 🔋 43

← **SPACE AND SAFETY (WHEREVER APPLICABLE)**

1 General Cleanliness (Dust free and Good Housekeeping)

Yes No

 Capture Evidence

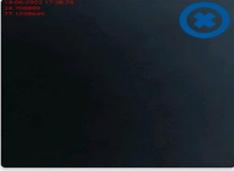


Save

2 Universal standard safety precautions

Yes No

 Capture Evidence



Save

<< Back **Next >>**

☰ □ ◀

User can click on the checkbox of the SPACE REQUIREMENTS and click on the choice (Yes / No),Capture evidence then click on the photo and then save the photo .

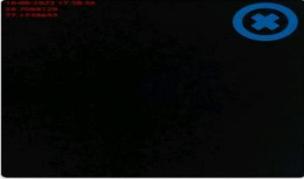
5:40 Vo LTE 4G 42

← SPACE REQUIREMENT

1 Registration, waiting space, public utilities, safe drinking water etc.

Yes No

 Capture Evidence

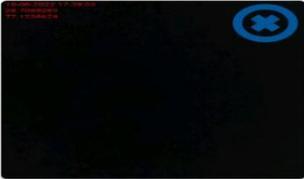


Save

2 Sample collection area

Yes No

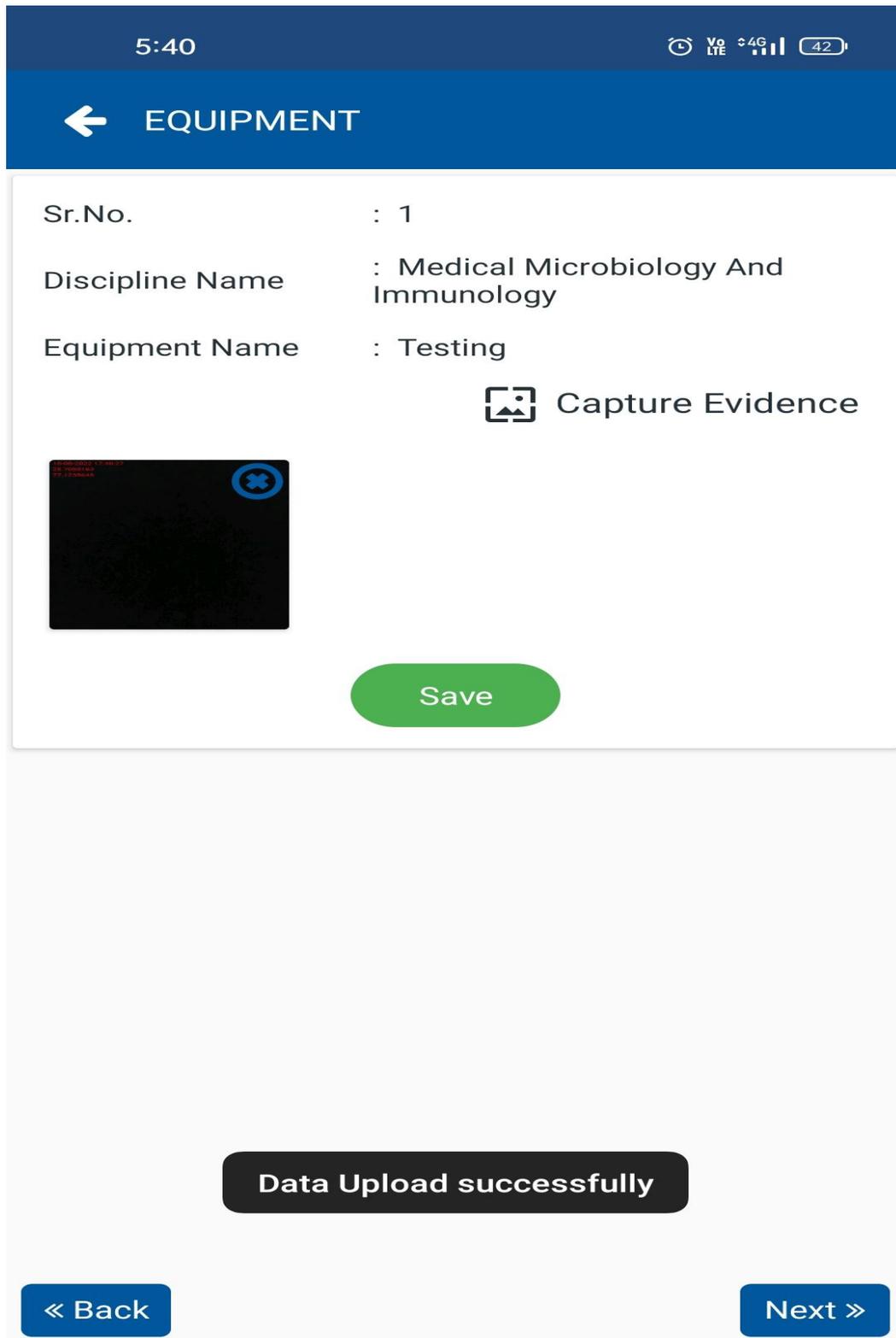
 Capture Evidence



Save

« Back Next »

User we can click on the checkbox of the EQUIPMENTS and click on the choice (Yes / No),Capture evidence then click on the photo and then save the photo .



User we can click on the checkbox of the LEGAL OR STATUTORY REQUIREMENTS AS APPLICABLE and click on the choice (Yes / No),Capture evidence then click on the photo and then save the photo .

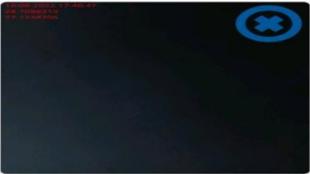
5:40 📶 4G 42

← **STATUTORY REQUIREMENTS AS APPLIC**

1 Valid Registration Certificate for under the provisions of Biomedical Waste Management Attachment

Yes No

 Capture Evidence

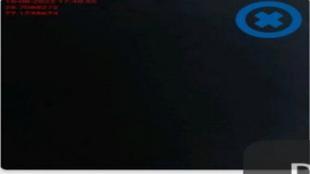


Save

2 Valid Pollution Control Board registration certificate

Yes No

 Capture Evidence



Data Upload successfully

Save

< Back **Next >**

User can click on the checkbox of the RECORD MAINTANCE AND REPORTING and click on the choice (Yes / No),Capture evidence then click on the photo and then save the photo .

5:41 VoLTE 4G 42

← RD MAINTENANCE AND REPORTING

1 Reports of all patient date wise as per regulatory requirement or till next audit, whichever is later.

Yes No

 Capture Evidence

✕

Save

2 Medico legal records, if applicable (as per relevant law).

Yes No

 Capture Evidence

✕

Save

« Back **Next »**



User can click on the checkbox of the STANDARDS ON BASIC PROCESSESS and click on the choice (Yes / No),Capture evidence then click on the photo and then save the photo .

5:42 Vo LTE 4G 42

← STANDARDS ON BASIC PROCESSES

1 Infection Control practices - as per Bio Medical Waste Management Rules

Yes No

 Capture Evidence

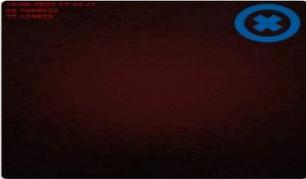


Save

2 Patient Information

Yes No

 Capture Evidence



Save

« Back Next »

At the last point we can click on the checkbox of the QUALITY CHECKS and click on the choice (Yes / No),Capture evidence then click on the photo and then save the photo .

5:43 VoLTE 4G 42

[←](#) **QUALITY CHECKS**

1 Performing internal quality control

Yes No

 Capture Evidence



[Save](#)

2 Participating in proficiency testing programs in every six months

Yes No

 Capture Evidence



[Save](#)

[« Back](#) [Home](#)

After fill data in below section.you may proceed in web and submit your application once all sections are marked as green.



Welcome UserName : NABL BCL002054

Your checklist information is completed. You may login to your web login at nablmelt.qci.org.in for further processing.

Please fill data in below section. You may proceed in web and submit your application once all sections are marked as green.

- | | | |
|---|---|-------------------------------------|
| 1 | SIGNAGE | <input checked="" type="checkbox"/> |
| 2 | HYGIENE AND SAFETY (WHEREVER APPLICABLE) | <input checked="" type="checkbox"/> |
| 3 | SPACE REQUIREMENT | <input checked="" type="checkbox"/> |
| 4 | EQUIPMENT | <input checked="" type="checkbox"/> |
| 5 | LEGAL OR STATUTORY REQUIREMENTS AS APPLICABLE | <input checked="" type="checkbox"/> |
| 6 | RECORD MAINTENANCE AND REPORTING | <input checked="" type="checkbox"/> |
| 7 | STANDARDS ON BASIC PROCESSES | <input checked="" type="checkbox"/> |
| 8 | QUALITY CHECKS | <input checked="" type="checkbox"/> |



Now the App process is complete .

Link : <https://nablmelt.qci.org.in/Laboratory/new-scheme/checklist.php>

NABL M(ELT) Labs Program Contact Us : nablmelt@nabl.qci.org [Home](#) [Log Out](#)

Checklist [Home / checklist](#)

Laboratory Details | Document upload | Checklist | Final

Checklist Laboratory Details | Document Upload | Checklist | Declaration

Laboratory location



Infrastructure

SIGNAGE

(1)	Laboratory Display Board (Outside or on laboratory entrance)	<input type="checkbox"/> Yes <input type="checkbox"/> No
(2)	Name of the person-in-charge with qualification	<input type="checkbox"/> Yes <input type="checkbox"/> No
(3)	Fee structure: To be displayed separately including type of investigation and charges for all routine tests.	<input type="checkbox"/> Yes <input type="checkbox"/> No

HYGIENE AND SAFETY (wherever applicable)

(1)	General Cleanliness (Dust free and Good Housekeeping)	<input type="checkbox"/> Yes <input type="checkbox"/> No
(2)	Universal standard safety precautions	<input type="checkbox"/> Yes <input type="checkbox"/> No

SPACE REQUIREMENT

(1)	Registration, waiting space, public utilities, safe drinking water etc.	<input type="checkbox"/> Yes <input type="checkbox"/> No
(2)	Sample collection area	<input type="checkbox"/> Yes <input type="checkbox"/> No
(3)	Washing area	<input type="checkbox"/> Yes <input type="checkbox"/> No
(4)	Preservation of the specimen and slides	<input type="checkbox"/> Yes <input type="checkbox"/> No
(5)	Temperature control for specialized equipment etc.	<input type="checkbox"/> Yes <input type="checkbox"/> No
(6)	Counselling room for HIV (if HIV test is done)	<input type="checkbox"/> Yes <input type="checkbox"/> No
(7)	Basins	<input type="checkbox"/> Yes <input type="checkbox"/> No

LEGAL OR STATUTORY REQUIREMENTS AS APPLICABLE

(1)	Valid Registration Certificate for under the provisions of Biomedical Waste Management Attachment	<input type="checkbox"/> Yes <input type="checkbox"/> No
(2)	Valid Pollution Control Board registration certificate	<input type="checkbox"/> Yes <input type="checkbox"/> No

RECORD MAINTENANCE AND REPORTING

(1)	Reports of all patient date wise as per regulatory requirement or till next audit, whichever is later.	<input type="checkbox"/> Yes <input type="checkbox"/> No
(2)	Medico legal records, if applicable (as per relevant law).	<input type="checkbox"/> Yes <input type="checkbox"/> No
(3)	Duration of preservation of record (as applicable from time to time)	<input type="checkbox"/> Yes <input type="checkbox"/> No

STANDARDS ON BASIC PROCESSES

(1)	Infection Control practices - as per Bio Medical Waste Management Rules	<input type="checkbox"/> Yes <input type="checkbox"/> No
(2)	Patient Information	<input type="checkbox"/> Yes <input type="checkbox"/> No
(3)	Kit inserts used as SOPs	<input type="checkbox"/> Yes <input type="checkbox"/> No
(4)	Complaints redressal mechanism	<input type="checkbox"/> Yes <input type="checkbox"/> No

QUALITY CHECKS

(1)	Performing internal quality control	<input type="checkbox"/> Yes <input type="checkbox"/> No
(2)	Participating in proficiency testing programs in every six months	<input type="checkbox"/> Yes <input type="checkbox"/> No

[Back](#) [Next](#) Designed by 7techies

[Privacy Policy](#)
[Disclaimer](#)
[Refund and Cancellation](#)

We will click on the submit button and proceed to further.

Link : <https://nablmelt.qci.org.in/Laboratory/new-scheme/finalsubmit.php>

The screenshot displays the 'Finalsubmit' page of the NABL M(EL)T Labs Program. At the top, there is a header with the program name, contact email (nablmelt@nabl.qcin.org), and user options (Profile, Log Out). A breadcrumb trail shows 'Home / finalsubmit'. A progress bar at the top indicates the current step is 'Final', with previous steps being 'Laboratory Details', 'Document upload', and 'Checklist'. The main content area is titled 'Declaration Section' and features a sub-header with tabs for 'Laboratory Details', 'Document Upload', 'Checklist', and 'Declaration'. The 'Declaration' tab is active, showing a list of five terms and conditions. A red note below the list states: 'Note : Preview your application and kindly submit for NABL review.' A green 'Preview Application' button is positioned below the note. A yellow 'Back' button is located at the bottom of the main content area. The footer contains links for 'Privacy Policy', 'Disclaimer', and 'Refund and Cancellation', along with the text 'Designed by 7techies'.

NABL M(EL)T Labs Program Contact Us : nablmelt@nabl.qcin.org Profile Log Out

Finalsubmit Home / finalsubmit

Laboratory Details Document upload Checklist Final

Declaration Section

Laboratory Details Document Upload Checklist Declaration

Declaration

1. We agree to comply with procedure of this scheme, pay charges for assessment irrespective of the result.
2. We agree to co-operate with the assessment team appointed by NABL for examination of all relevant documents by them and their visits to those parts of the laboratory that are part of the applied scope.
3. We satisfy all national, regional and local regulatory requirements for operating a laboratory.
4. We agree to comply with the terms & conditions mentioned in Procedure for **NABL M(EL)T Labs Program**
5. All information provided in this application is true.

Note : Preview your application and kindly submit for NABL review.

Preview Application

Back

Privacy Policy Disclaimer Refund and Cancellation Designed by 7techies

The Declaration Section , you can preview your application .(Preview application and kindly submit for nabl review). You can only read your application .



National Accreditation Board for Testing and Calibration Laboratories (A Constituent Board of Quality Council of India) NABL M(EL)T Labs Program

Laboratory Details

Details	Details Data Fedded by Lab
Name of the Laboratory	Muskan Gupta
Country	India
State/Province	Delhi
District	NEW DELHI

We declare that,

1. We agree to comply with procedure of this scheme, pay charges for assessment irrespective of the result.
2. We agree to co-operate with the assessment team appointed by NABL for examination of all relevant documents by them and their visits to those parts of the laboratory that are part of the applied scope.
3. We satisfy all national, regional and local regulatory requirements for operating a laboratory.
4. We agree to comply with the terms & conditions mentioned in Procedure for NABL M(EL)T Labs Program
5. All information provided in this application is true.

I Lab Manager accept the above term & conditions.

Note : On Submit, Application will be automatically send to NABL for Review.

Submit this application

Back

- [Privacy Policy](#)
- [Disclaimer](#)
- [Refund and Cancellation](#)

Designed by [7techies](#)

Activate Windows

This is the declaration of the form click on the check box (I Lab Manager accept the above term & conditions) and submit this application.

Link : <https://nablmelt.qci.org.in/Laboratory/new-scheme/dashboard.php>



Dashboard

- > [Application](#)
- > [Pending request](#)
- > [Attachments](#)
- > [Payment History](#)
- > [Advisory Attachments](#)

- [Privacy Policy](#)
- [Disclaimer](#)
- [Refund and Cancellation](#)

All Application

Laboratory Name	User Name	Lab Id	Submit Date	Status	Application Preview	Next Action
Muskan Gupta	NABLCL002054	M(ELT)-00448	2022-08-19 11:37:12	Application submitted to NABL	Preview	Please wait your application is under NABL review

Designed by [7techies](#)

After submit this application you can see the Laboratory Name , Username , Lab id , Submit Data , Status , Application Preview and the stage of your application(Please wait your application is under NABL review).