# ESFC EmpCo Certification Scheme Rulebook

*V1.1*

**Disclaimer:** This version has been shared as the basis for first certifications under the ESFC EmpCo Certification Scheme. It is pending formal Working Group approval, which is in progress. Scientific Committee approval is also pending. See the Review Stages on the last page of this document. Working Group approval is expected by 30 October unless objections are raised

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# 1. Scope

## 1.1 Purpose

This document defines the scope of the ESFC EmpCo Certification Scheme: a methodology-neutral framework for the independent substantiation of environmental claims on food and beverage products in the EU under Directive 2024/825 (EmpCo, Empowering Consumers). The scheme is owned and governed by the European Sustainable Food Coalition (ESFC). ESFC publishes the Rulebook and defines the requirements; conformity assessment activities are carried out by independent conformity assessment bodies accepted by ESFC under Section 2.4, which operate to ISO/IEC 17029 + ISO 14065 with ISO 14067 product scope, or to ISO/IEC 17065 where its scope covers LCA/PCF, with or without accreditation under Regulation (EC) No 765/2008. ESFC does not act as the certifier itself.

## 1.2 What the Scheme Certifies

The scheme operates with two certification levels:

### 1.2.1 Provider-Level Certification

A provider is an organisation that operates a calculation system used to produce environmental assessments of food products (e.g. a software platform with an underlying methodology, database, calculation engine, and quality assurance process). Provider-level certification assesses whether the provider's system is sufficiently controlled and auditable to support claims under the Rulebook. The provider completes a Provider Pathway registration (Annex A), which the Conformity Assessment Body evaluates against this scheme. The registration covers, at minimum:

- The methodological basis used for the claim, demonstrating the applicable ISO 14067:2018 product-CFP requirements, including applicable footprint reporting and review provisions , see Section 1.5
- The main data sources (LCI databases, primary data sources)
- The calculation and quality-control process
- Treatment of missing data and gap-filling logic
- Version control and audit trail
- Compliance with framework-level requirements (quality assurance outcomes, evidence file structure, change management)
- Where the pathway distinguishes product categories it treats as methane-rich for characterisation factor purposes, a declaration of which categories are so treated; the Conformity Assessment Body reviews this declaration at validation and at each annual surveillance.

The output of provider-level certification is a certified provider pathway listed on ESFC's public verification portal. Provider-level assessment establishes the scientific basis, correctness and representativeness of the specified system before eligible claim use. Subsequent work reuses suitable accepted evidence and focuses on actual application, changed conditions and risks, while retaining the ongoing-effectiveness, necessary scientific re-evaluation and evidence-sufficiency requirements in Sections 6 and 9. It is not limited in advance to a data-flow check, and the initial conclusion does not verify future individual outputs. This preserves scalable system-based assessment without repeating unchanged, adequately supported scientific work for each claim making the scheme tractable at food-sector scale across the hundreds of thousands of product and recipe-level assessments the sector requires.

### 1.2.2 Trader-Level Certification

A trader is a retailer, brand, or food service operator that uses a certified provider pathway to make environmental claims on its products, menus, or in its communications. A trader that does not use a provider, because it operates and assesses its own calculation system internally, instead falls under the Self-Managed Pathway route described in Section 1.2.3. Trader-level certification assesses whether the trader uses a certified pathway correctly, including:

- Claim wording and display rules (Section 10)
- Evidence availability for the certified claim scope
- Public disclosures (per Section 1.6.2)
- Internal controls and update processes
- Complaint handling

The trader's binding to the scheme depends on the trader's assurance level (Individual or Collective Assurance, see Sections 3.1 and 8.3).

Individual Assurance applies where the trader and the certified provider elect per-trader binding, typically brands and retailers seeking an individual public entry, or traders making high-visibility fixed claims. The trader signs a per-trader licence agreement with the certified provider (or, where the provider does not offer trader licensing, with the scheme owner's licensing organ, never with the conformity assessment body, which must not issue the licences it audits). The licence incorporates the Rulebook pass-through clauses defined in Annex C. The trader is individually listed on the public verification portal (Section 1.6.2) and individually subject to sample-based verification of its claims by the Conformity Assessment Body. No claim surface requires a particular tier: on-pack claims, retail shelf labels, and regulated marketing communications may be made under either tier. For the avoidance of doubt, Individual Assurance is a trader-level certification tier, not a product-level one. A trader under Individual Assurance is individually listed on the portal and individually bound via a per-trader licence; the Conformity Assessment Body verifies a sample of that trader's claims consistent with Sections 1.2.4 and 8.6. Individual Assurance does not require independent certification of each product or claim.

Collective Assurance is the default binding for all traders. Binding is provider-mediated, through the certified provider's standard customer terms. The provider's terms incorporate the Rulebook pass-through clauses (Annex C), so that by accepting the provider's terms, the trader agrees to comply with applicable scheme rules (claim wording, sampling consent, an affirmative duty to furnish the information needed to substantiate its claims on request, complaint cooperation, listing consent, termination authority). The trader's status is recorded in the provider's internal trader register; aggregate statistics are published on the public verification portal per provider, and status confirmation is available on request.

A certified provider does not automatically make every claim by every trader compliant. Provider-level certification confirms eligibility of the calculation system; trader-level certification confirms correct use of the certified pathway in the market, and is enforced at the trader-binding tier regardless of the claim surface or tier.

### 1.2.3 Self-Managed Pathway

A trader with existing internal Life Cycle Assessment capability may operate a self-managed pathway instead of using a technology provider, provided the pathway meets the ESFC minimum normative floor (Section 1.5) and has been independently reviewed under Layer 1 and Layer 2 (Sections 5 and 6), in the same way and to the same standard as any technology-provider pathway. A trader using a self-managed pathway still requires Conformity Assessment Body certification, exactly as any other pathway does. What changes is only that

the trader's own internal team performs the methodology work instead of a commercial technology provider or open-source reference pathway; Conformity Assessment Body certification is required either way.

The minimum floor requirements, ISO 14067:2018 alignment, and scientific review of methodology elements beyond the frameworks, apply equally to a self-managed pathway. Where a trader's existing internal processes and independent methodology reviews already meet some or all of these requirements, that existing work may be recognised under the same recognition criteria used for any other pathway (Layer 2 Recognition Criteria), rather than repeated.

All calculation consistency, documentation, version control, and audit readiness for a self-managed pathway are managed by the trader itself, since there is no technology provider to carry that function.

### 1.2.4 Risk-Based and Sample-Based Verification

The scheme is system-based, risk-based, and sample-based. It does not require every individual product, recipe, or menu item to be certified. Instead, the Conformity Assessment Body assesses the provider's calculation system and the trader's claim-use controls, then verifies selected product claims through sample-based checks.

In addition to the system audit, the Conformity Assessment Body conducts annual sample-based verification of individual claims under each certified pathway. Sample size is risk-based and random sampling per the Conformity Assessment Body's documented procedure, with minima defined in Section 8.6. Risk criteria include new product categories, high gap-filling rates, complaints, borderline cases, new traders, and new enterprise data integrations. Verification scope covers input data accuracy, correct application of the certified pathway, calculation correctness, and claim wording compliance. See Section 9 for detailed sampling procedures.

## 1.3 Current Scheme Limitations

To ensure neutrality between providers and to avoid premature dependency on any one technology stack, the scheme does not currently prescribe a specific calculation engine or software tool, a specific LCI database (Agribalyse, Ecoinvent, proprietary databases, or custom databases may all be used, subject to provider-pathway certification), a specific gap-filling logic (provider-defined and audit-trail documented), a specific quality assurance delivery method (expert review, validated automated pipeline, or hybrid; what matters is meeting the quality assurance outcome requirements), a specific functional unit or rating shape (provider-declared rather than harmonized across pathways), or a specific characterisation factor set (declared in the pathway annex and assessed for scientific defensibility under Layer 2 review, see Section 1.5.1).

The scheme's current scope also has the following limitations. Certified claims currently cover climate impact as the mandatory floor and the categories each pathway declares under Section 10.4a. There is also no harmonized ESFC consumer-facing label, each provider's claim currently uses its own label design within the rating-shape and disclosure requirements above.

All of the above reflects the current stage of methodology development. A globally aligned methodology remains on the roadmap as a future scheme update (Section 13.4), and a harmonized consumer-facing ESFC label remains a separate future workstream with its own member approval process; neither is in place yet. Further impact categories may enter a

pathway's certified scope only under Sections 5.6 and 10.4a and where its validation statement names them.

## 1.4 Out of Scope

This scheme does not cover: environmental claims made by traders outside the scope of a certified provider pathway; carbon offset programmes or carbon neutrality claims; supply chain certifications held under other schemes (these may be recognised as input data but are not themselves certified by this scheme); non-food products; and a consumer-facing ESFC label, planned as a separate, later workstream (see Section 1.3).

## 1.5 Scheme Floor

The scheme defines a normative floor that any certified provider pathway shall meet. 1.5.1 sets out what is mandatory for every pathway, and 1.5.2 defines which indicators the floor currently covers. The floor itself can evolve as the field matures. Any change to the requirements in 1.5.1 is a major scheme change requiring stakeholder consultation under Section 13.4.

### 1.5.1 Uniformly Mandatory

Every certified pathway must meet the following at minimum (each item is a summary; full detail is at the section referenced):

- Layer 1 (framework alignment): the applicable ISO 14067:2018 requirements at product level, including applicable footprint reporting and review provisions (Section 5.2).
- Layer 2 (scientific review of methodology elements beyond the frameworks: database choices, characterisation factors, gap-filling logic, functional unit, primary-data workflows, rating shape derivation) (Section 5.3, with the review process in Section 6).
- Rating shape, where used: published with thresholds or equivalent boundaries, derivation rationale, benchmark or reference dataset, update process, and borderline-handling rules (Section 10.6).
- Required disclosures: claim scope, method version, functional unit used, LCI database used, Conformity Assessment Body, certificate ID, complaint contact (Section 1.6, Section 4.3).
- Permissible claim wording (Section 10).
- Evidence file structure (Section 7).
- Quality assurance outcomes: accuracy, reproducibility, completeness, traceability, outlier detection (Section 7.2).
- Change management: three-tier classification, materiality threshold, regression testing (Section 12).
- AR6 characterisation factor compliance, including the four-level hierarchy and mandatory sensitivity analysis for methane-rich categories (Section 5.5).

Calculation engine architecture and choice of quality assurance delivery method are left to provider discretion, provided the quality assurance outcomes above are met.

### 1.5.2 Claim Type, Scope and Roadmap

The mandatory floor of every certified pathway is climate impact (Section 1.5.1). A pathway may bring further impact categories into its certified scope by declaring them in its pathway annex under Section 10.4a, each assessed by the Conformity Assessment Body as part of the pathway's engagement. An impact category is in certified scope for a given pathway only where

the pathway's validation statement names it. Where a trader makes a market-facing claim about an indicator that the provider's validation statement does not name, that claim is not covered or substantiated by this scheme, and the trader remains responsible for independently ensuring EmpCo compliance for that claim.

## 1.6 Public Verification Portal

The scheme maintains a public transparency portal (currently empco-aeceeb.gitlab.io) that publishes information about certified pathways and the traders using them. The disclosed fields differ by assurance level.

### 1.6.1 Per-Pathway Disclosures (Always Public)

For each certified provider pathway, the portal publishes: provider name and pathway version; framework alignment and methodology version (Section 1.5.1); functional unit used; LCI database(s) used; Conformity Assessment Body and pathway certificate ID; date of certification and last surveillance; complaint contact and access to the complaint procedure (Section 11.4); change log for the pathway; regression test pass/fail status for each release (Section 12.5).

### 1.6.2 Per-Trader Disclosures (Tiered by Assurance Level)

For each trader, the public listing depends on the assurance tier. Traders under Individual Assurance get a full per-trader entry: trader name, certified claim scope, trader certificate ID, validity dates, link to provider pathway, complaint contact, required for each trader. Traders under Collective Assurance are not individually listed. The portal publishes aggregate statistics per provider (active/suspended/terminated counts). Status confirmation for a named trader is available on request via the portal's verification contact. Individual public entries are opt-in and consent-based only. Verifiability of on-pack and shelf claims made under Collective Assurance is provided by status confirmation on request."

For the September 2026 release, the internal trader register mechanism can be operated manually for a small number of pilot pathways. The Collective Assurance roster mechanism is automated from the provider's customer database. Automation of QR-code generation and product-level searchable databases may be added later as claim volumes justify.

## 1.7 Applicability

This certification scheme applies to: food products sold to consumers in the EU and assessed under a certified provider pathway, including packaged food, fresh produce, prepared meals, and retail product portfolios assessed via enterprise data integration; recipes and menus in food service settings, including individual dish ratings; all consumer communication channels, including product packaging, restaurant menus, digital displays, QR codes, and retail shelf labels; all geographic markets where certified claims are used for consumer communication; and all participating company types, including food manufacturers, retailers, and food service operators.

The certified scope of each pathway is climate impact together with the categories it has declared under Section 10.4a (Section 1.5.2). As stated in Section 1.5.2, the trader remains responsible for independently ensuring EmpCo compliance for any claim made on an indicator outside the certified scope.

### 1.8 Change Management

Each certified provider pathway maintains a validated change management process for updates to its calculation engine, database, and gap-filling logic. This allows routine software improvements to proceed without requiring ad-hoc re-certification, while giving the Conformity Assessment Body appropriate oversight of changes that could affect assessment accuracy. Changes are classified into three tiers: non-substantive changes (no impact on assessment outputs) are recorded and reported through the accumulated annual change log; minor changes (impact below the materiality threshold) are notified to the CAB before deployment and reviewed at the next annual surveillance; major changes (impact above the materiality threshold, or a structural change) require Conformity Assessment Body approval before deployment. The complete change management process, including the materiality threshold definition, regression test requirements, and emergency change procedures, is specified in Section 12.

### 1.9 Future Harmonized Methodology

If and once a globally aligned methodology for food and beverage product impact assessment becomes available, has been reviewed for scientific robustness and practical implementation, and has been formally adopted by ESFC members through the coalition's decision-making process, that methodology becomes the long-term reference methodology for the scheme. Certified provider pathways transition to it within a period defined by ESFC at that time. The interim, methodology-neutral framework defined in this document is designed to support compliance readiness from 27 September 2026, while preserving the path to future methodological alignment (see also Section 1.3).

### 1.10 Normative References

The normative references underpinning this scheme are specified in Section 2.

## 2. Normative References

### 2.1 Purpose

This section lists the standards, guidelines, and regulatory frameworks that are normative for the ESFC Environmental Assessment Certification Scheme.

### 2.2 LCA and Carbon Footprint Standards

Providers determine the climate-impact rating through framework alignment with ISO 14067:2018 (Section 2.2.3). Where a full multi-indicator Life Cycle Assessment is conducted, ISO 14040 (Section 2.2.1) and ISO 14044 (Section 2.2.2) apply for indicators outside the scope of ISO 14067. For an impact category declared under Section 10.4a, Layer 1 alignment is assessed against the framework the provider declares, not against a scheme-recognised standard; Section 5.2 applies to the climate floor only. Methodology elements beyond these frameworks, database choices, characterisation factors, gap-filling logic, functional unit, primary-data workflows, rating shape derivation, are subject to Layer 2 scientific review (Sections 5.3 and 6).

### 2.2.1 ISO 14040:2006

Environmental management, Life cycle assessment, Principles and framework. Defines the principles and framework for conducting Life Cycle Assessments, including goal and scope definition, system boundaries, and functional unit selection.

### 2.2.2 ISO 14044:2006 (+ Amd 1:2017 + Amd 2:2020)

Environmental management, Life cycle assessment, Requirements and guidelines. Specifies requirements and provides guidance for Life Cycle Assessment, including life cycle inventory analysis, life cycle impact assessment, and interpretation.

### 2.2.3 ISO 14067:2018

Greenhouse gases, Carbon footprint of products, Requirements and guidelines for quantification. Provides principles, requirements, and guidelines for the quantification of the carbon footprint of products, built on the general LCA framework in ISO 14040/14044.

## 2.3 EU Regulatory Frameworks

### 2.3.1 Directive 2005/29/EC (Unfair Commercial Practices Directive), as amended by Directive (EU) 2024/825 (Empowering Consumers Directive)

Enforcement date: 27 September 2026. Strengthens the rules against misleading environmental claims and sets requirements for sustainability labels based on certification schemes. For claims about future environmental performance, Article 6(2)(d) requires verifiable public commitments supported by a realistic implementation plan with measurable, time-bound targets and regular independent expert verification whose findings are available to consumers. This certification scheme is designed to satisfy the requirements of Article 2 point (r) of Directive 2005/29/EC (as amended by Directive (EU) 2024/825): open access to the scheme (Section 13.5.4), stakeholder consultation (Section 13.4), non-compliance and remedial procedures (Section 11), and independent third-party verification (Sections 2.4 and 9). Both assurance levels, Individual and Collective, are covered under the same system certification.

## 2.4 ISO/IEC 17029:2019 and ISO 14065:2020

Conformity assessment, General principles and requirements for validation and verification bodies. Specifies requirements for the competence, consistent operation, and impartiality of bodies performing validation and verification as conformity assessment activities. The CAB assessing provider pathways and trader compliance shall be accepted by ESFC under Section 2.4a, with the actual activity and programme coverage required below. Eligibility shall be established for the current issuing entity and complete engagement scope, not inferred from a historical register survey.

The primary conformity assessment standards for bodies under this scheme are ISO/IEC 17029:2019 and ISO 14065:2020 with applicable product scope; ISO 14064-3 applies to the relevant GHG validation or verification components. Before accepting an engagement, the CAB shall document the criteria, assessment activities, instruments and accreditation arrangements applicable to each component of the registered scope, including rating and collective trader-monitoring activities where applicable. Generic accreditation to these standards or an ISO 14067 product scope alone is not evidence that every additional component is covered. Any necessary programme acceptance, scope extension or authorised use of flexibility shall be completed before the relevant activity or statement is represented as accredited. For each

impact category declared under Section 10.4a other than climate, the CAB shall document its competence for that category's declared framework under its own procedures and submit that documentation to ESFC before the engagement for that category starts. Where a conformity assessment body operates to ISO/IEC 17065 for this scheme's assessment activities, it may also be accepted under Section 2.4a. Where the ISO/IEC 17029 route is used, the CAB shall identify the applicable instruments and their supported conclusions under the accepted programme. References to certification instruments shall not be treated as automatic equivalence or a waiver of requirements; the component and overall scheme decisions shall be assigned under Sections 4 and 9.5. It applies to the certification process itself, not to the provider's calculation methodology, which is governed by Section 2.2 and reviewed under Sections 5 and 6. The Conformity Assessment Body's accreditation, where it holds one, is granted by a national accreditation body operating to ISO/IEC 17011, this governs the accreditation body, not the Conformity Assessment Body or ESFC directly.

For the avoidance of doubt: the conformity assessment standard (ISO/IEC 17029 + ISO 14065 with ISO 14067 product scope) governs the CAB's competence, as determined by ESFC under Section 2.4a, drawing on the national accreditation body's assessment where the CAB is accredited; the engagement standard (ISO 14064-3) governs how individual validation and verification engagements are conducted. These are distinct and should not be conflated.

Requirement: before assessing providers or traders under this Rulebook, the CAB shall demonstrate that ESFC has accepted it under Section 2.4a for the defined engagement, with the programme acceptance and activity coverage required by this section. Accreditation under Regulation (EC) No 765/2008 to ISO/IEC 17029 and ISO 14065, or to ISO/IEC 17065 where its actual scope covers the relevant activities, is not required; where a body holds it, it serves as evidence under Section 2.4a (a). A general standard or product-scope listing is not sufficient evidence of complete scheme or rating coverage. The current issuing entity, scope and programme arrangements shall be verified; historical register surveys do not establish current acceptance. The process for submitting and evaluating acceptance applications is set out in the ESFC CAB Acceptance Procedure, published on the ESFC website.

2.4a Acceptance by ESFC. ESFC accepts a body to issue validation and verification statements under this Rulebook, whether or not it holds accreditation, provided that: (a) the body operates a validation and verification programme that conforms to ISO/IEC 17029 and ISO 14065 and conducts its engagements under ISO 14064-3, and demonstrates this in writing to ESFC (competence of the named team per ISO 14066, impartiality declaration, procedures, internal review, and a declaration of conformity under ISO/IEC 17050-1) before the engagement starts; a body accredited for the relevant scope may submit its accreditation certificate and scope as evidence of its programme and procedures. For any impact category declared under Section 10.4a other than climate, the CAB shall additionally submit to ESFC, before the engagement for that category starts, a written competence declaration for that category naming the team members responsible, their relevant qualifications or prior engagements in the domain, and the framework or criterion they will apply. ESFC confirms adequacy of the declaration as a condition of the engagement proceeding. ESFC's confirmation is administrative, not a scientific review of the category itself; (b) the statement names the body, the standards applied, the level of assurance, the scope including the display of ratings on menus and on product packaging, the validity period, and states whether it was issued under accreditation; (c) ESFC records its acceptance decision, its basis and its review date, and re-examines it at each re-certification under Section 9.7; the public registry shows under Section 13.6 whether the body is accredited for this scope; (d) no claim under such a statement may state or imply an accreditation the body does not hold. Recital 7 of Directive (EU) 2024/825 confirms that demonstrating compliance with the relevant international standards is a valid basis for the third-party monitoring required by Article 2(r)(iv).

## 2.5 Scheme Structure

The following standard describes how this Rulebook itself is structured as a certification scheme. It applies to the Rulebook, not to the Conformity Assessment Body, and does not require any separate accreditation.

### 2.5.1 ISO/IEC 17067:2013

Conformity assessment, Fundamentals of product certification and guidelines for product certification schemes. Describes the fundamentals and typology of certification schemes. The Rulebook is structured as a Type 6 scheme under ISO/IEC 17067, certification of a process/service with ongoing surveillance, rather than per-product certification (see Section 1.2.1). This structural typology is descriptive and applies independently of which conformity assessment standard (ISO/IEC 17065, or ISO/IEC 17029 + ISO 14065) the conformity assessment body uses.

## 2.6 Applicability

Object and team competence. The object assessed under this Rulebook is the provider's environmental information statement, including the quantified result and any rating within the registered claim scope. The system producing that information is assessed under the applicable systematic-approach requirements; historical claims are verified and prospective claims validated where applicable, as specified in Section 9.5. Where a pathway quantifies product carbon footprints under ISO 14067, the CFP study report constitutes the GHG statement for the relevant ISO 14064-3 engagement, expressed as mass of CO2e per declared functional unit. The criteria include this Rulebook and the registered Annex A, together with applicable normative requirements. Team competence follows ISO 14066 together with Clause 7 and the applicable Annex E requirements of ISO 14065. For GHG product verification, the applicable ISO 14066 Annex F requirements include collective competence in LCA, the applicable PCR/CFP-PCR and the structure of the database actually used. The CAB shall document task allocation, technical-expert roles and the separately competent independent reviewer under the applicable requirements. Collective competence does not require every team member to hold every speciality; technical experts are not thereby validators or verifiers. For this scheme the team shall additionally cover life cycle assessment and product carbon footprinting under ISO 14040, ISO 14044 and ISO 14067; the food and agri-food sector; and assessment of automated calculation pipelines, including versioning, gap-filling logic and regression evidence. Where the documents listed above are dated references, only the edition cited applies. Where undated references are listed, the latest edition of the referenced document applies. Scheme requirements supplement the applicable normative requirements and shall not contradict or exclude requirements mandatory for the selected conformity assessment activity or, where the CAB is accredited, its accreditation. Identified conflicts shall be resolved before the affected assessment is undertaken or a statement is issued.

# 3. Terms and Definitions

## 3.1 Purpose

This section defines terms used throughout the ESFC EmpCo Certification Scheme.

## 3.2 General Terms

### 3.2.1 Assessment

Systematic evaluation of a food product's, recipe's, or menu item's environmental impact under a certified provider pathway, using the calculation methodology documented in that pathway.

### 3.2.2 Assurance Level

The tier of trader-level certification elected for a trader. The assurance level determines how the trader is bound to the scheme and how the Conformity Assessment Body is listed. See Individual Assurance and Collective Assurance.

### 3.2.3 Individual Assurance

The assurance tier under which the trader is individually bound via a per-trader licence and individually listed on the public verification portal. The term refers to the binding mode, not the depth of assurance. Verification is sample-based in both tiers.

### 3.2.4 Collective Assurance

The assurance tier under which the trader is bound through the certified provider's standard customer terms and recorded in the provider's internal trader register. The term refers to the binding mode, not the depth of assurance. Verification is sample-based in both tiers.

### 3.2.5 Conformity Assessment Body

An independent body accepted by ESFC under Section 2.4, operating to ISO/IEC 17029 + ISO 14065 with ISO 14067 product scope, or to ISO/IEC 17065, with or without accreditation under Regulation (EC) No 765/2008, that performs the applicable conformity assessment activities for provider pathways and trader claim use. Its eligibility, instruments and actual coverage are determined under Sections 2.4 and 9.5.

### 3.2.6 Provider

An organisation that operates a certified calculation system used to produce environmental assessments of food products under this scheme. Also referred to as "technology provider."

### 3.2.7 Provider Pathway

A specific combination of methodology, LCI database, calculation engine, gap-filling logic, functional unit, and quality assurance process operated by a certified provider, registered and certified under this scheme. Each provider may operate more than one pathway.

### 3.2.8 Scheme

The ESFC EmpCo Certification Scheme as a whole, encompassing the governance framework, certification process, public verification infrastructure, and the actors operating under it.

### 3.2.9 Rulebook
The document defining the requirements of the ESFC EmpCo Certification Scheme.

### 3.2.10 Trader
A retailer, brand, or food service operator that uses a certified provider pathway to make environmental claims on its products, menus, or in its communications.

## 3.3 Technical Terms

### 3.3.1 $CO_2$ Equivalent ($CO_2$eq)
A metric measure used to compare the emissions from various greenhouse gases on the basis of their global warming potential (GWP), by converting amounts of other gases to the equivalent amount of carbon dioxide with the same global warming potential.

### 3.3.2 Cradle-to-Grave
System boundary encompassing all stages of a product's life cycle, from raw material extraction (cradle) through production, distribution, use, and end-of-life disposal (grave).

### 3.3.3 Partial Carbon Footprint
A carbon footprint covering a defined subset of a product's life cycle stages (ISO 14067:2018, §3.1.1.2). Where a pathway calculates a partial carbon footprint, it uses a declared unit rather than a functional unit. The pathway annex shall state the system boundary positively, identifying each life cycle stage included and each stage excluded, with a documented reason for each exclusion. A diagram illustrating the system boundary shall be included in the pathway annex and published on the scheme registry."

### 3.3.4 Cut-Off Criteria
Rules for excluding inputs and outputs from an LCA that fall below a defined threshold of significance, applied to reduce data collection burden without materially affecting results. The cut-off criteria used must be documented and justified in the provider pathway registration.

### 3.3.5 Ingredient Database (LCI Database)
A scientific database containing environmental impact data for food ingredients, processing steps, origins, and supply chain parameters. Examples include Agribalyse (open-source), Ecoinvent (commercial), and provider-specific databases. The choice of LCI database is part of the certified provider pathway documentation.

### 3.3.6 Calculation Engine
The software platform is operated by a certified provider that implements the LCA methodology, queries the LCI database, runs calculations, and produces environmental impact results. Changes to a certified calculation engine are governed by the validated change management process (see Section 12).

### 3.3.7 Functional Unit
Quantified performance of a product system for use as a reference unit in LCA (per ISO 14040). The functional unit is declared by each certified provider pathway; examples include per kg of product, per serving, or per daily portion. For a partial carbon footprint, the declared unit (ISO 14067:2018, 3.1.3.8) takes the place of the functional unit; where this Rulebook says “declared functional unit”, it means the functional or declared unit the pathway declares.

### 3.3.8 Gap-Filling Module
Software module within a certified calculation engine that provides scientifically defensible estimates for data points where primary data is not available, using proxy data, modelling, or conservative defaults.

### 3.3.9 Global Warming Potential (GWP)
A factor describing the radiative forcing impact of one unit of a given greenhouse gas relative to one unit of $CO_2$ over a specified time horizon (typically 100 years, GWP100).

### 3.3.10 Life Cycle Assessment (LCA)
Systematic analysis of the potential environmental impacts of products or services during their entire life cycle, from raw material extraction through production, use, and disposal (ISO 14040/14044).

### 3.3.11 Life Cycle Inventory (LCI)
Phase of LCA involving the compilation and quantification of inputs (resources, energy) and outputs (emissions, waste) for a product throughout its life cycle.

### 3.3.12 Recipe Assessment
An environmental assessment of a food service recipe (dish), taking ingredient names and quantities as input and producing a rating and impact values per the pathway’s declared functional unit as output.

### 3.3.13 Menu Assessment
The collective environmental assessment of all recipes offered by a food service operation over a defined period, aggregating individual recipe assessments to produce operational-level sustainability metrics.

### 3.3.14 Enterprise Data Integration
A mode of data intake where a trader's enterprise systems provide data through automated interfaces rather than manual questionnaires. Its mapping, source traceability, integrity and change controls shall be included in the CAB's assessment of the applicable system and claim scope before it is used for covered claims. An integration mode does not by itself confer a higher assurance level.

#### 3.3.15 Validated Automated Pipeline

An automated assessment pipeline assessed within the provider's approved system scope against the applicable methodology, data integrity, calculation, rating and control requirements. It may be used under either binding mode while the applicable assessment and continuing-use conditions remain satisfied. Neither binding mode imposes a general per-assessment expert-review requirement or an unspecified enhanced accuracy threshold; any additional review or accuracy requirement shall be identified in the applicable pathway criteria or CAB assessment plan.

## 3.4 Change Management Terms

### 3.4.1 Change Classification

The process of categorising a proposed change to a certified pathway (calculation engine, ingredient database, or gap-filling logic) into one of three tiers based on its potential impact on assessment outputs. See Section 12.

### 3.4.2 Non-Substantive Change

A change to a certified pathway with no impact on assessment outputs. Examples: user interface changes, documentation updates, internal refactoring, performance optimisation. Recorded in the change log and reported through the annual surveillance package under Section 12.6.1; no separate release notification is required.

### 3.4.3 Minor Change

A change to a certified pathway with impact below the materiality threshold. Examples: database updates, gap-filling module parameter tuning, new ingredient additions. The CAB is notified before deployment under Section 12.6.2 and reviews the change at the next annual surveillance audit; prior approval is not required for a correctly classified minor change.

### 3.4.4 Major Change

A change to a certified pathway with impact above the materiality threshold, or that constitutes a structural change. Examples: new impact category, methodology change, threshold recalibration, new gap-filling category. Requires focused CAB assessment and approval before deployment under Section 12.6.3; this does not restart the three-year renewal cycle.

### 3.4.5 Materiality Threshold

A change is material if it causes a rating category change for more than 2% of assessed items in the regression test suite, or a greater than 10% $CO_2$eq change per declared functional unit for more than 5% of assessed items.

### 3.4.6 Regression Test Suite

A reference dataset maintained by each certified provider against which every release of that provider’s pathway is tested, to verify that changes do not produce unintended effects on assessment outputs. Composition, maintenance, and test-execution requirements are defined in Section 12.

### 3.4.7 Validated Change Management Process

The formal process governing how changes to a certified pathway's calculation engine, ingredient database, and gap-filling logic are classified, tested, reviewed, and deployed. See Section 12.

## 3.5 Rating Terms

### 3.5.1 Rating

A category assigned to a food product or recipe based on its environmental performance relative to benchmarks, in the shape declared by the certified provider pathway (see Section 10.5). Where a pathway uses an A–E letter-grade shape, A is best and E is worst. The same rating thresholds apply regardless of assurance level.

### 3.5.2 Rating Threshold

The numerical boundary value separating one rating grade from the next, for example the value separating A from B in an A–E letter-grade shape. See Section 10.5.

### 3.5.3 Benchmark

A reference value used as a baseline for rating products. Its declared type is a representative market average, a defined historical reference or a scientifically justified target. A claim to represent average or relative market performance requires representative data for the stated categories, geography and period. Every reference requires substantiated purpose, derivation, functional applicability, comparison method and truthful disclosure under Section 6.3 question 6; a historical or target reference shall not be presented as a current market average.

### 3.5.4 Climate-Impact Rating

The rating category assigned for total greenhouse gas emissions per the pathway's declared functional unit, characterised under the life cycle impact assessment (LCIA) method declared by the certified provider pathway. Threshold values are declared by each certified provider pathway alongside the benchmark dataset and derivation rationale, and audited by the Conformity Assessment Body. Climate impact is the mandatory floor category; further categories may be declared under Section 10.4a.

### 3.5.5 Provider-Declared Impact Categories

An impact category other than climate that a pathway has declared under Section 10.4a and that its validation statement names. A category not so declared or named is pathway-operational only.

### 3.5.6 Rating Metrics

The standardised output of a certified pathway's assessment: the pathway's declared rating category, the absolute environmental impact values per the pathway's declared functional unit, and the percentage comparison to the benchmark where applicable. Rating metrics must be

accurately communicated regardless of visual presentation format. The scheme does not prescribe a visual design, but the actual design and accompanying wording remain subject to Section 10.8, including rating meaning, comparison eligibility and the prohibition of misleading overall implications.

## 3.6 Process Terms

### 3.6.1 Audit

Systematic, independent, and documented examination of a provider's implementation of a certified pathway, or of a trader's claim use, conducted by the Conformity Assessment Body.

### 3.6.2 Surveillance Audit

Annual audit conducted by the Conformity Assessment Body between certification and re-certification to verify ongoing conformity. Includes a standing change management review.

### 3.6.3 Sample-Based Verification

The Conformity Assessment Body's examination of a representative selection of individual assessments to verify the accuracy of the certified system's outputs and correct claim use.

### 3.6.4 Non-Conformity

Failure to meet a requirement of this certification scheme. Classified as minor, major, or critical. See Section 11.

### 3.6.5 Corrective Action

Action taken to eliminate the cause of a detected non-conformity and prevent its recurrence.

## 3.7 Abbreviations

*Table 1: Abbreviations*

| Abbreviation | Meaning |
|---|---|
| CAB | Conformity Assessment Body |
| $CO_2eq$ | Carbon Dioxide Equivalent |
| EmpCo | Empowering Consumers Directive (EU 2024/825) |
| ERP | Enterprise Resource Planning |
| ESFC | European Sustainable Food Coalition |
| GHG | Greenhouse Gas |
| GWP | Global Warming Potential |
| LCA | Life Cycle Assessment |
| LCI | Life Cycle Inventory |
| LCIA | Life Cycle Impact Assessment |
| QA | Quality Assurance |
| POS | Point of Sale |

# 4. Scheme Architecture

## 4.1 Purpose

This section defines the four actors operating within the scheme, their roles and responsibilities, and the information flows between them. The scheme is designed so that no single actor controls both the assessment and its verification.

The scheme operates through two distinct functions under separate contractual arrangements. Function 1 (methodology review) covers the Layer 1 and Layer 2 scientific review and initial validation of the provider's calculation system; the engagement contract for this function is between the CAB and the provider. Function 2 (annual surveillance and sampling) covers ongoing compliance monitoring; the engagement contract for this function is between the CAB and ESFC.

The CAB serving each function may be the same body or different bodies; there is no requirement that the CAB conducting the initial methodology review also conduct ongoing surveillance. The engagements shall identify responsibility for each conclusion and its contribution to the complete registered scope, evidence handover and access, evaluation of reliance on previous work, and notification of changes, limitations and adverse findings between the functions. Where independent traders are included through Collective Assurance, the accepted assessment scope shall explicitly identify the population, control boundary and enforceable evidence-access and suspension arrangements; inclusion shall not be inferred solely from use of the provider's software.

## 4.2 Scheme Actors

**ESFC** acts as scheme owner. ESFC publishes and maintains the Rulebook, defines certification requirements and sector-specific rules, coordinates stakeholder consultation, manages the public verification infrastructure, manages the scheme’s change-control process, and establishes partnerships with independent Conformity Assessment Bodies. ESFC does not carry out certification itself. ESFC defines and publishes minimum requirements for Conformity Assessment Bodies covering independence, relevant competence and conformity to the applicable standards, accepts them under Section 2.4, and maintains a public list of recognised Conformity Assessment Bodies.

**The technology provider** acts as a service provider to the trader. The technology provider generates impact assessments, maintains the calculation system, produces evidence files, and supports traders in meeting scheme requirements. In most cases the technology provider is a commercial entity offering product carbon footprint software or services. A trader with existing internal LCA capability may also operate a self-managed pathway in lieu of a commercial technology provider, provided it meets the same normative floor requirements and has completed the required scientific review (Section 6). In either case, all Conformity Assessment Body certification requirements apply equally.

**The trader,** meaning the retailer, brand, or food service operator, owns the market claim and bears responsibility for its compliance. The trader uses a certified pathway to substantiate the claim and is responsible for correct claim display, evidence availability, and compliance with the scheme rules.

**The independent Conformity Assessment Body** audits and certifies both the technology provider’s system and the trader’s claim use against the scheme requirements. The Conformity Assessment Body must be legally separate from ESFC, from any certified provider, and from the

trader. It carries out provider-level and trader-level certification, conducts sampling, and reports non-compliance to ESFC.

## 4.3 Information Flows

**At the governance level,** ESFC and the technology provider maintain a bilateral relationship. The provider submits pathway registration documents, scientific review documentation, and the signed scheme agreement to ESFC. ESFC administers Layer 1 and Layer 2 reviews before certification begins and confirms recognition of existing reviews where these meet the defined criteria. Once the Conformity Assessment Body has completed provider-level certification, ESFC lists the provider as a certified pathway in the public verification infrastructure and issues non-compliance instructions directly to the Conformity Assessment Body and provider. The Conformity Assessment Body signs a scheme agreement with ESFC as a one-time onboarding step and submits certification status reports, surveillance findings, and non-compliance findings to ESFC on an ongoing basis.

**At the operational level,** the technology provider and the trader exchange information continuously. The trader supplies recipe and product data to the provider and signs the scheme agreement through the provider. The provider delivers assessment results and notifications of material changes to the trader. When the Conformity Assessment Body selects a sample of claims for review, the trader provides claim display evidence to the provider, who passes this to the Conformity Assessment Body along with the relevant system access and evidence files.

In both certification tiers (Section 8), the trader has no direct relationship with the Conformity Assessment Body or with ESFC. All interactions between the trader and the Conformity Assessment Body are mediated through the technology provider.

## 4.4 Public Verification Infrastructure

ESFC maintains a publicly accessible verification infrastructure. For each certified provider pathway, the following information is published: provider name and pathway identifier, Conformity Assessment Body, methodology pathway version, claim scope, certification status (active, suspended, or withdrawn), and complaint access point.

The portal does not display comparisons between products assessed under different certified provider pathways. Each pathway's certified results are presented individually, with the methodology, database, and functional unit clearly identified. The portal displays a prominent, continuously visible notice that results produced under different certified provider pathways are not comparable and shall not be placed side by side. This notice remains in place until ESFC formally adopts a harmonised methodology under Section 1.9. Traders and providers must not use portal output in marketing communications in a way that implies cross-pathway comparability.

This prohibition applies to product-level comparisons only. ESFC may publish aggregate scheme statistics, including counts and distributions per declared functional unit, in the annual scheme performance report.

Detailed assessment findings, supporting Layer 1 and Layer 2 evidence and non-compliance instructions may be exchanged through restricted records between ESFC, the CAB and the provider. Confidential product, customer, supplier and calculation data need not be made public except where applicable requirements require disclosure. This does not permit withholding the public criteria, required supporting study information or information indispensable to the issued conclusion. Where an ISO 14065 opinion is published as such, it shall be published in its entirety, including integral annexes; a public summary is identified as a summary and does not replace that opinion. Confidential working evidence shall be kept separately from the issued public opinion.

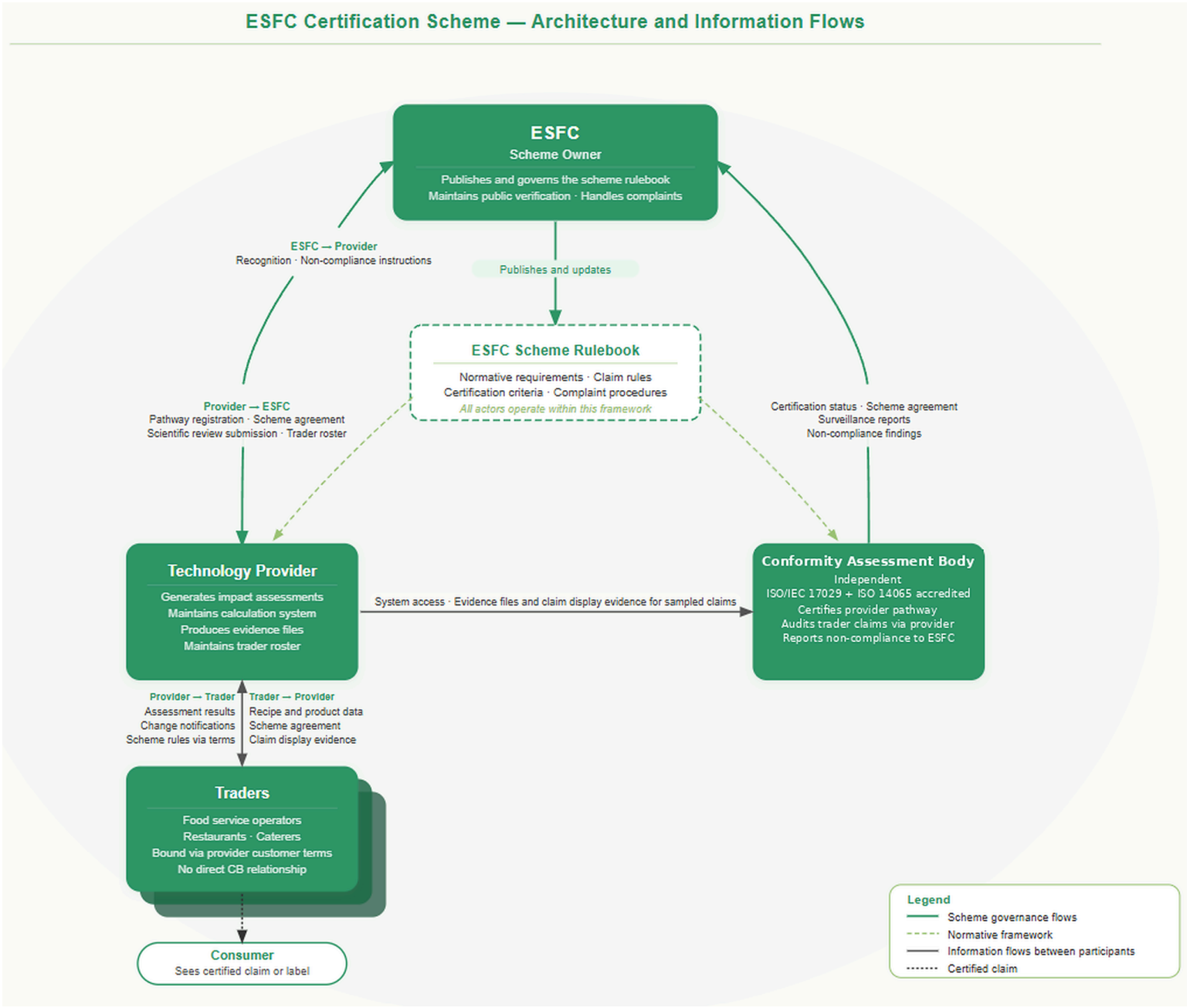



**Figure 1: ESFC Certification Scheme — Architecture and Information Flow**

# 5. Normative Floor

## 5.1 Purpose

This section defines the minimum requirements that every certified provider pathway must meet before provider-level certification can begin. The scheme is methodology-neutral: it does not prescribe a single methodology, functional unit, database, or rating system. Each certified pathway must instead meet the two-layer validation requirement defined in this section. All other methodology elements are provider-declared, documented in the pathway registration document, and subject to independent scientific review under Section 6.

## 5.2 Layer 1: Framework Alignment

Every certified pathway shall demonstrate the applicable ISO 14067:2018 product-CFP requirements, including applicable footprint reporting and review provisions. A full multi-impact LCA has its additional requirements. A framework-alignment finding shall not be represented as full ISO 14067 conformity unless that stronger conclusion is expressly assessed and supported. Organisational-level GHG accounting alone is insufficient. For comparative footprint communication, the underlying study shall receive the critical review required by ISO 14026:2017 §9.1 under the applicable ISO 14071 edition. The record identifies the study/criteria versions, functions and comparands, model and dataset review depth, findings and permitted reuse envelope. Required public supporting-study information shall be available through the accepted communication route. PCR review, study critical review and the CAB final assessment/decision remain distinct functions; adequate existing work may be reused with documented scope and sufficiency.

## 5.3 Layer 2: Review of Methodology Elements Beyond Layer 1

Every certified pathway must have a completed independent scientific review of all methodology elements that go beyond what the Layer 1 frameworks prescribe. The scope of the Layer 2 review and the process for conducting or recognising it are defined in Section 6.

## 5.4 Provider Declarations

The functional unit and rating system used within a certified pathway are not prescribed by the scheme. Both must be documented in the pathway registration document and must be covered by the Layer 2 scientific review. Both must be scientifically defensible and transparently disclosed.

## 5.5 AR6 Characterisation Factors

### 5.5.1 Purpose

This section establishes requirements for the adoption of IPCC Sixth Assessment Report (AR6) GWP characterisation factors by certified provider pathways, where providers rely on literature-sourced emission factors from studies predating AR6. Many databases span studies from different publication periods, carrying mixed GWP vintages (AR4: $CH_4$ = 25; AR5: 28; AR6: ~27.9). The divergence is most material for methane-rich categories.

This section gives effect to the GWP characterisation provisions of ISO 14067:2018 referenced in Section 5.2, which requires use of the latest available IPCC characterisation factors, unless a deviation is stated and justified (ISO 14067:2018, 6.5.1); this section defines how that requirement is applied consistently across a pathway's data sources. The treatment of emission timing, including biogenic carbon and land-use change, is governed by ISO 14067 §6.4.8 (all emissions treated as occurring at the start of the assessment period) and §6.4.9.5 (direct land-use change assessed using internationally recognised methods such as the IPCC Guidelines and documented separately from the footprint); the CAB reviews the provider's declared approach under Layer 2 Question 9.

### 5.5.2 Four-Level Hierarchy

The following four levels govern the GWP characterisation requirements for emission factors used in certified pathway calculations. Level 1 is the standard requirement. Levels 2 through 4 are available only as transitional step-downs, subject to the bounds in §5.5.3.

Level 1. AR6-characterised as published.

Every emission factor used in the pathway calculation is AR6-characterised as published by its source. The GWP generation is recorded in the evidence file as a documented property of each entry and is not inferred from publication year or any other proxy.

Level 2. Re-characterised to AR6.

Every emission factor for which the source does not publish AR6-characterised values is re-characterised to AR6 using the gas-level split published or supplied by the source. The re-characterisation is flagged in the evidence file as a documented property of each affected entry. The GWP generation applied to every emission factor is recorded in the evidence file.

A pathway relying wholly on Level 1 and Level 2 emission factors is not subject to the disclosure or sensitivity analysis requirements of Levels 3 and 4. The requirements of ISO 14067 for significant inputs still apply at all levels.

Level 3. Documented vintage, gas split unavailable.

Where the gas-level split required for re-characterisation is not available for one or more emission factors, those emission factors may retain the GWP generation applied by their source, provided that:

(a) the GWP generation applied to each such emission factor is established and recorded in the evidence file as a documented property of the entry, and is not inferred from publication year or any other proxy;

(b) the unavailability of the gas-level split is demonstrated and auditable by the Conformity Assessment Body, and is re-confirmed at each re-certification; where AR6-characterised values or a gas-level split have since become available, the pathway adopts them;

(c) the share of emission factors carrying each GWP generation is disclosed; and

(d) for all declared methane-rich product categories, a sensitivity analysis is conducted in accordance with §5.5.3(b), and, where the sensitivity analysis shows that full AR6 re-characterisation could change the rating category or the assessed result by 15% or more, documented conservative treatment is applied such that the published figure for those categories is deliberately biased conservatively relative to the uncorrected result. The

conservative treatment shall be derived from the results of the sensitivity analysis conducted under §5.5.3(b) and shall be quantified, not estimated.

Level 4. Inferred vintage, mixed-vintage accepted.

Where the GWP generation applied to an emission factor cannot be established as a documented property of the entry and must therefore be inferred, mixed-vintage data is accepted provided that:

(a) the unavailability of the gas-level split is demonstrated and auditable by the Conformity Assessment Body;

(b) the basis on which GWP generation is inferred is documented;

(c) the share of emission factors for which no gas-level split is available is disclosed; and

(d) a sensitivity analysis is conducted for all declared methane-rich product categories in accordance with §5.5.3(b).

Conservative treatment is not required at Level 4. An adjustment applied to a figure whose GWP generation is inferred rather than documented would itself constitute an unverifiable alteration of a published value.

Universal disclosure requirement.

Every certified pathway, at any level, shall disclose the share of its emission factors for which a gas-level split is available and the share for which it is not. This disclosure is reviewed at validation and at each annual surveillance.

### 5.5.3 Bounds for Levels 3 and 4

(a) Step-down conditions. A step down to Level 3 or Level 4 requires documented evidence of the infeasibility of achieving the higher level, auditable by the Conformity Assessment Body. Infeasibility may not be claimed on grounds of commercial convenience.

(b) Methane-rich categories. The pathway declares in its registration which of its product categories it treats as methane-rich; the Conformity Assessment Body reviews that declaration at validation and at each annual surveillance. A sensitivity analysis is required at Level 3 and at Level 4 for all declared methane-rich product categories, including as a minimum ruminant meat, dairy products, and paddy rice. The sensitivity analysis shall demonstrate the effect of full AR6 re-characterisation on assessed results, including any resulting rating category changes, and shall be submitted to the Conformity Assessment Body as part of the certification documentation and reviewed at each annual surveillance.

(c) Sensitivity analysis threshold. Where the sensitivity analysis conducted under (b) indicates a potential change of 15% or more in the assessed GHG result for any declared methane-rich product category as a whole, the Conformity Assessment Body shall document in the surveillance report its assessment of whether continued certification at the current level remains appropriate and shall specify, for Level 4 emission factors, a timeline for the provider to address the underlying data gap, and, for Level 3 emission factors, whether the conservative treatment

under Level 3(d) covers the potential change. This assessment is mandatory and may not be omitted from the surveillance report.

(d) Transitional status. All step-downs to Level 4 are transitional and are reassessed at each annual surveillance. A pathway at Level 4 shall document its route to Level 1 or Level 2, including the data development on which that route depends, and shall demonstrate progress at each annual surveillance.

For pathways at Level 4, convergence to Level 1 or Level 2 is required by the pathway's next scheduled re-certification and, additionally, by 2028 where that falls earlier.

A claim of infeasibility of convergence by any applicable deadline may be made only on documented grounds auditable by the Conformity Assessment Body.

Level 3 emission factors are not time-limited; their route upward is the re-confirmation under Level 3(b).

### 5.5.4 Database structure declaration

Each certified pathway shall declare in its pathway annex the share of its ingredient database held at the gas-speciated level (elementary flows and characterisation factors kept separate, permitting re-characterisation) and the share held at the characterised-total level (combined $CO_2$eq figures, where re-characterisation is not possible). The declaration shall report both shares by number of datasets and by estimated contribution to total results. The Conformity Assessment Body reviews this declaration at initial validation and at each annual surveillance.

## 5.6 Provider-Declared Impact Categories

5.6.1 For each impact category declared under Section 10.4a, the pathway annex shall state: (a) the framework or criterion under which the category is assessed; (b) the quantification or classification method, which shall be either (i) published in a peer-reviewed scientific journal, or (ii) established by a recognised standards body (for example ISO, CEN, a national standard) or an intergovernmental scientific body (for example IPCC, the EU Joint Research Centre), or (iii) where the method, or the rule by which it combines published components or classifies products (for example by certification status; where classification relies on third-party certification status as a proxy for the declared impact category, the pathway annex shall document the scientific basis for treating that certification as a valid proxy for the declared impact), is the provider's own, documented in full in the pathway annex and independently reviewed under Section 6 before the category enters certified scope, by the Conformity Assessment Body where it has confirmed competence or otherwise by an independent scientific reviewer selected under Sections 6.4 and 6.6, with a positive conclusion on its fitness for the declared scope published on the scheme portal; in all cases the method shall be identified by publication or documentation and version; (c) the data sources and their coverage of the declared product and geographic scope; (d) the treatment of missing data; (e) where a rating is derived, the threshold derivation, benchmark and robustness under Sections 10.5 to 10.7; (f) the assurance route by which the Conformity Assessment Body assesses the category. The Conformity Assessment Body's acceptance under Section 2.4 covers the climate floor; for a

declared category it documents its competence for the declared framework under its own procedures (Section 2.4), and the validation statement names the category and the basis on which it was assessed; (g) the declared geographic and product scope of the category, confirmed to be matched by the data sources declared under (c).

5.6.2 A change of the method, criterion or version declared under 5.6.1(b) is a structural change under Section 12.3.1.

5.6.3 The Conformity Assessment Body assesses each declared category against the Layer 2 questions in Section 6.3 as applicable to its assurance route, and names the category and its assurance route in the validation statement. A declared impact category does not enter certified scope until the Conformity Assessment Body has issued a positive conclusion for that category. The validation statement shall name only those categories for which a positive conclusion has been reached and recorded. A category documented in the pathway annex but not named in the validation statement is not in certified scope and shall not be presented, labelled, or implied as scheme-certified.

# 6. Scientific Review Process

## 6.1 Purpose

This section defines how Layer 1 and Layer 2 assessments are conducted, how existing reviews are recognised, how reviewers are selected, and what conflict-of-interest rules apply. The Layer 1 framework-alignment conclusion and the Layer 2 review of the eleven fixed questions, sits with the Conformity Assessment Body accepted under Section 2.4 or, for specific elements outside its competence, with an independent scientific reviewer. ESFC's role is administrative: publishing recognition criteria, checking submissions against them, routing reviewer fees, and documenting outcomes. Where an administrative check would require scientific judgement to resolve, the matter routes to the Conformity Assessment Body or a reviewer. The Conformity Assessment Body confirms that both assessments are complete before provider-level certification begins.

## 6.2 Layer 1 Assessment

ESFC administers published recognition criteria to determine whether a provider's existing documentation demonstrates alignment with the Layer 1 frameworks defined in Section 5.2, based on defined recognition criteria. Where a credible independent review confirming alignment already exists, ESFC assesses it against these criteria and, where sufficient, formally recognises it.

Where no sufficient existing review is available, ESFC informs the Conformity Assessment Body, who then conducts the Layer 1 alignment assessment directly as part of provider-level certification. The Conformity Assessment Body confirms that the Layer 1 assessment is complete and evaluates the competence, independence, scope, versions, evidence and findings of any recognised review for its intended conclusion. It retains responsibility for that conclusion. Additional work shall be limited to what is necessary to address an identified limitation, change, inconsistency or evidence need, with the reason and scope documented. These reliance requirements also apply to recognised Layer 2 reviews and subsequent assessments under Sections 8 and 9.

## 6.3 Layer 2 Assessment

Layer 2 requires independent scientific review of all methodology elements that go beyond what the Layer 1 frameworks prescribe. These elements cannot be verified through framework alignment alone and must be separately documented and reviewed.

ESFC defines and administers the scope of every Layer 2 review as the following fixed list of questions, which every Conformity Assessment Body must address for the climate floor and, as applicable to its declared assurance route, for each impact category the pathway declares under Section 10.4a:

1. Are the database choices scientifically justified for the product types, technologies, and geographies covered? Is the temporal scope of the data adequate?
2. Are the characterisation factor selections appropriate?
3. Is the gap-filling logic and treatment of missing data documented and defensible?
4. Is the functional or declared unit appropriate for the claim scope?
5. Are the primary-data workflows documented?
6. Where a rating system, grade, or scoring system is used, is its derivation documented and scientifically defensible? For every rating reference, the provider shall identify whether it is a representative market average, a defined historical reference or a scientifically justified target. A claim to represent an average or relative market performance shall demonstrate representativeness for the stated categories, geography and period; a skewed, outdated or category-biased sample cannot support that claim merely because its scope is disclosed. A historical or target reference shall have a substantiated purpose, derivation, functional applicability and comparison method; its actual meaning and material limitations shall be communicated without implying a current market average. The CAB shall assess the reference type, final value, intended comparison contexts and truthful wording, including scientific applicability to the declared product scope. Each requires an explicit scientific disposition and Scheme acceptance before use. Accurate labelling alone does not establish suitability, and unsupported categories or comparisons remain outside authorised use.
7. Given the same inputs, engine version, and database version, does the pathway produce consistent, reproducible results, and can the reviewer independently re-run the calculation to verify this?
8. Is the pathway's input uncertainty quantified, and is the relationship between the threshold design and that uncertainty documented? Scientific-model or climate-target derivation supports the rationale for thresholds but does not replace evidence of rating robustness under Section 10.7, including borderline cases and cases with substantial gap-filling. The reviewer shall document the relationship between uncertainty and rating assignment, the evidence supporting robustness and any necessary restrictions. Release-to-release and cumulative changes remain governed by Section 12.
9. Does the pathway document how agricultural and process-level emission sources, including biogenic carbon and land use change, are accounted for? Where direct emission modelling is used, the quantification approach shall be documented. Where an LCI database is used, the database selection rationale and its coverage of these emission sources shall be documented. The evidence required is proportionate to the approach.
10. Where the pathway aggregates LCA literature values into representative systems (for example, as a mean or median across multiple sources), is the aggregation

methodology documented and scientifically defensible? This question applies conditionally where aggregation is used; pathways using single literature values without aggregation are not in scope.

11. Does the pathway apply a documented data quality assessment methodology to its LCI data, covering at minimum the temporal, geographical, and technological representativeness of the underlying data? The assessment must cover the full declared product scope. It may be conducted at the level of defined data-source categories or tiers within the database, rather than requiring individual scoring of every discrete entry, provided the categorization and scoring approach is systematically documented, consistently applied, and the underlying data-source composition is disclosed alongside any aggregate score. Results must be available for Conformity Assessment Body review.

The Conformity Assessment Body answers each question with documented reasoning. ESFC does not prescribe which answers are acceptable, as that is the reviewer's independent scientific judgment. The fixed question list ensures consistent scope and bounded cost regardless of which reviewer conducts the review.

The scheme's committee advises on scheme requirements, including the fixed question list, calibration thresholds, and the methodology floor. The committee does not conduct or review any specific pathway's Layer 1 or Layer 2 assessment. That function sits exclusively with the Conformity Assessment Body or an ad-hoc reviewer.

## 6.4 Ad-Hoc Reviewers

Where a specific methodology element falls outside the Conformity Assessment Body's confirmed competence, ESFC may engage an independent scientific reviewer to supplement the validation engagement for that element only. ESFC publishes the selection criteria for eligible reviewers. Providers may propose reviewers subject to the same published criteria and to the conflict-of-interest rules in this section. A reviewer who is uncertain about a specific element should first consult the documented reasoning from prior Layer 2 assessments conducted under the scheme. If uncertainty remains, a second independent reviewer is added and the conclusion is reached jointly.

## 6.5 Recognition of Existing Reviews

ESFC determines whether existing scientific reviews cover the required Layer 2 elements adequately, based on recognition criteria covering: the scientific competence of the reviewer; the scope of what was reviewed; whether the fixed question list was addressed; and the validity period of the review. These criteria apply equally to paid reviews and existing review submissions, ensuring the recognition path is as rigorous as the paid review path.

Recognition proceeds under one of three routes:

**Route A — Full recognition.** Where an existing review covers all eleven Layer 2 questions adequately, ESFC formally recognises it in full. ESFC documents the outcome and shares it with the Conformity Assessment Body before provider-level certification begins. No routine duplication of the recognised Layer 2 work is required. Reliance and any necessary supplementary work remain subject to the CAB responsibility and documented evaluation in Section 6.2.

**Route B — No recognition.** Where no sufficient existing review is available, ESFC informs the Conformity Assessment Body, which conducts the full eleven question Layer 2 assessment as part of provider-level certification per Section 6.3.

**Route C — Partial recognition.** Where an existing review covers some but not all of the eleven Layer 2 questions adequately, ESFC formally recognises the review on a per-question basis for the questions it covers. The CAB assesses the uncovered questions and evaluates its reliance on the recognised answers under Section 6.2; any supplementary work on a recognised element shall be limited to a documented need under that section. ESFC documents which questions are recognised and which require Conformity Assessment Body assessment, and shares this with the Conformity Assessment Body before provider-level certification begins.

The recognition criteria apply equally per question under Route C as they do in full under Route A. The route taken and, under Route C, the per-question recognition and assessment status, are recorded in the provider's pathway registration by ESFC per Annex A.

## 6.6 Conflict of Interest

All Layer 2 reviewers must comply with the following conflict-of-interest rules. Reviewers must declare all relevant interests at the point of appointment. A reviewer must not be appointed where they have a current or recent financial, employment, or methodological relationship with the provider under review, have prior involvement in developing the methodology being assessed, or have a competitive relationship with the provider. The reviewer's fee is fixed in writing before the review begins and is never contingent on its outcome. Review fees are paid by the provider to ESFC in full before the review begins. ESFC disburses to the reviewer from received funds once the engagement is confirmed. The reviewer's payment does not depend on the provider's cash position, and ESFC carries no credit risk on the engagement. This prepayment mechanic removes the direct financial relationship between reviewer and provider. ESFC applies a firm criteria-based approval gate for provider-proposed reviewers to prevent reviewer-shopping.

## 6.7 Open-Book Review Route

Providers who voluntarily share full model and inventory data with the Conformity Assessment Body may access an open-book review route. Under this route, the Conformity Assessment Body reviews the full calculation system, model logic, and inventory data upfront rather than only tracing data flow against a sample of claims. This makes per-claim spot-checks lighter and faster, reducing ongoing certification costs. This route is not a rulebook requirement and is a commercial arrangement between the provider and the Conformity Assessment Body. The Layer 1 and Layer 2 requirements apply equally regardless of which route is chosen. Provisional listing (first certification cycle). ESFC may list a provider pathway as 'Provisionally listed, verification in progress' where (a) Annex A and Annex B registration is complete; (b) a CAB accepted under Section 2.4 has been engaged in writing for annual verification under Section 9.2, the engagement letter is on file with ESFC and the first sample under Section 8.6 has been drawn; (c) methodology, rating thresholds and benchmark are published; and (d) the registry records provisional status, the CAB and, where applicable, its accreditation identifier, engagement date and first-statement due date. Provisional listing lapses 30 days after the first verification statement and in any event six months after listing; it is not renewable. Conversion to certified status requires all applicable initial requirements, including Layer 1 and Layer 2, initial system and output assessment, required statements and the documented scheme-status decision for the defined scope. A positive annual verification statement alone does not waive those

requirements. A negative statement or finding of major non-compliance triggers Section 11.5. Provisional listing itself confers no certified claim or label-use rights, and no claim may state or imply verification or certification on that basis.

### 6.8 Documentation and Handover

ESFC documents the outcome of each provider's Layer 1 and Layer 2 assessment and shares this with the Conformity Assessment Body before provider-level certification begins, so that the Conformity Assessment Body can build on completed assessments rather than repeating work already done.

## 7. Evidence and Documentation

### 7.1 Purpose

This section defines the evidence and documentation requirements that providers and traders must meet to support certification and ongoing sampling. Evidence requirements apply at two levels: the provider's calculation system and evidence files, and the trader's claim display evidence.

### 7.2 Provider Evidence File

The technology provider must maintain a structured evidence file for each certified claim scope. The evidence file must enable the Conformity Assessment Body to trace raw input data through the calculation steps to the output results. At minimum, the evidence file must contain records covering the calculation process, treatment of missing data, version control, audit trail, and operational controls. The evidence file must be made available to the Conformity Assessment Body on request during provider-level certification and ongoing surveillance.

### 7.3 Version Control and Audit Trail

The provider must maintain version control over the calculation system and evidence files. Where a methodology or database update is made, the change must be logged with a record of what changed, when, and what effect it had on calculated values. This audit trail must be available to the Conformity Assessment Body and to ESFC on request.

When the Conformity Assessment Body selects a sample of claims for review, the trader provides claim display evidence to the provider, covering how the certified claim appears on the product, shelf, menu, or digital medium. The provider then passes this to the Conformity Assessment Body along with the relevant system access and evidence files.

### 7.4 Retention

Evidence files, version control records, and claim display evidence must be retained for a minimum of five years after the end of the relevant certification period.

# 8. Certification Process

## 8.1 Purpose

This section defines the two levels of certification in the scheme, the two-tier model governing trader certification, and the sampling approach for claim verification.

## 8.2 Provider-Level Certification

Provider-level certification assesses whether a technology provider's system correctly implements the reviewed methodology and generates robust, traceable evidence for the defined claim scope. The Conformity Assessment Body confirms that the required Layer 1 and Layer 2 assessments are in place, including any existing reviews recognised by ESFC. It then verifies that the provider's system correctly implements the reviewed and approved methodology, by tracing raw input data through the calculation steps to output results against a sample of real cases, and that missing data is handled consistently with the documented methodology choices. It also confirms that necessary operational requirements are in place: version control, audit trail, evidence file structure, and operational controls. Provider-level assessment confirms that the system reliably and correctly applies the methodology reviewed under Sections 5 and 6. It builds on the scientific work under the reliance provisions of Section 6.2; this avoids routine duplication without restricting necessary supplementary work for the CAB's conclusion.

An optional open-book review route is available for providers willing to share full model and inventory data with the Conformity Assessment Body upfront, as described in Section 6.7. The Layer 1 and Layer 2 requirements apply equally regardless of which certification route is chosen.

## 8.3 Trader-Level Certification

Trader-level certification assesses whether a retailer, brand, or food service operator correctly uses a certified pathway for its claims. Continuing-use conditions shall identify the approved pathway and version envelope, eligible trader/site/channel register, claim categories and validity period. A new trader, product, application or version enters covered use only after the applicable binding, source-data, system, rating and display controls have been met and any required assessment or change approval completed. The provider records entry, changes and exit and includes new uses in surveillance. A historical sampled statement does not imply that each subsequent output has been individually verified. Suspended, withdrawn, expired or otherwise unsupported items leave eligible use immediately under the applicable decision. These rules shall be reflected in the public scope and engagement schedule. This covers claim wording, display rules, evidence availability, internal controls, update processes, and complaint handling. Trader-level assessment builds on provider-level methodology and system findings. The CAB evaluates their applicability and continuing suitability for the trader's claim scope under Section 6.2 and undertakes supplementary work only where a documented limitation, change, inconsistency or evidence need requires it.

## 8.4 Two-Tier Trader Certification Model

To make trader-level certification economically feasible at food-sector scale, the scheme adopts a two-tier model distinguishing between individual assurance and collective assurance.

**Individual assurance** applies where the trader and provider elect it, typically retailers and brands seeking an individual public entry, or traders making high-visbility fixed claims. A per-trader licence is signed directly with the certified technology provider, and each trader is individually listed in the public verification infrastructure. Individual Assurance certifies the trader

as a unit, not individual products or claims. A trader under Individual Assurance is individually listed on the public verification portal and individually subject to sample-based verification of its claims. Individual Assurance does not require certification of each product; the Conformity Assessment Body verifies a representative sample of claims made by the individually listed trader, consistent with the approach defined in Sections 1.2.4 and 8.6.

The process for registering and listing a trader under Individual Assurance proceeds as follows: (1) the certified provider collects the signed Individual Assurance schedule under Annex C from the trader; (2) the provider forwards the signed documentation directly to the Conformity Assessment Body; (3) the Conformity Assessment Body processes the confirmation for that trader and issues a written confirmation document; (4) the Conformity Assessment Body includes the confirmed trader in its certification report to ESFC; (5) ESFC creates the trader's individual entry in the public scheme registry. A trader may not make Individual Assurance claims until ESFC has confirmed the registry listing.

Given the relatively small number of such traders and the higher visibility of on-pack claims, this more direct and individually traceable approach is appropriate.

**Collective assurance** is the default binding and applies in most cases to food service operators, restaurants, and caterers making menu labels or digital claims across large or frequently changing assortments. Binding each food service operator individually through a per-trader scheme licence is not economically or operationally feasible at this scale. Instead, traders in this category are bound through the certified technology provider’s standard customer terms, which incorporate ESFC model pass-through clauses committing the trader to the scheme rules. The provider maintains a complete internal trader register of bound traders, disclosed in full on request to the Conformity Assessment Body, ESFC, and competent authorities. The public verification portal publishes aggregate statistics per provider; status confirmation for individual traders is available on request. The Conformity Assessment Body samples claims rather than auditing each trader directly, and enforcement flows through the provider’s contractual authority to terminate the trader relationship where non-compliance is identified.

ESFC provides a model pass-through clause set as part of this Rulebook so that providers can incorporate the necessary binding language into their standard customer terms without having to develop it independently.

Under both tiers, the trader has no direct relationship with the Conformity Assessment Body or with ESFC. All interactions between the trader and the Conformity Assessment Body are mediated through the technology provider. The key difference between the two tiers lies not in the information flows, which are the same in both cases, but in how the trader is contractually bound and publicly listed.

*Table 2: Two-Tier Trader Certification Model*

| | Individual Assurance | Collective Assurance |
|---|---|---|
| Applies to | In most cases, retailers and brands making on-pack claims or shelf labels, and any trader making high-visibility fixed claims | In most cases, food service operators, restaurants, and caterers making menu labels or digital claims across large or frequently changing assortments |
| How trader is bound | Per-trader licence signed directly with the certified technology provider | Provider's standard customer terms incorporating ESFC model pass-through clauses |
| Public listing | Individually listed in the public verification infrastructure | Aggregate statistics per provider on the public verification portal; status confirmation for individual traders available on request |
| Conformity Assessment Body audit | Claim sampling, individually traceable | Claim sampling across the register, mediated through the provider |
| Enforcement | Licence suspension/withdrawal per trader | Provider's contractual authority to terminate the trader relationship where non-compliance is identified; Conformity Assessment Body suspension authority where non-compliance is identified through sampling |

## 8.5 Hybrid Provider-Trader Certification Pathway

Where a trader uses a certified provider's methodology as the basis for a trader-branded label but incorporates its own label methodology, the trader may apply under a hybrid pathway. Shared Layer 1 and Layer 2 work shall be reused subject to Section 6.2; review shall cover the trader-specific methodology and claim presentation and any necessary supplementary work on shared elements. The hybrid pathway depends on the continued validity and applicability of the underlying provider findings. If those cease to apply, the trader shall notify the CAB and suspend any affected unsupported scheme claim pending an accepted alternative or the necessary independent assessment. The pathway is available under either binding mode. A different visual design alone does not create a different methodology, but remains subject to Section 10.8.

## 8.6 Sampling Approach

Certification does not require every single product to be individually certified. Instead, the scheme uses a system-based, risk-based, and sample-based certification approach. Conformity Assessment Bodies assess the provider’s calculation system and the trader’s claim-use controls, and then review selected product examples or claim files based on defined sampling rules, risk criteria, and corrective-action procedures. The sampling approach ensures coverage

across a representative range of product categories and claim types, rather than clustering in one area, so that issues in any part of the provider's system can be detected.

The minimum sample sizes, recalculation tolerance, and failure thresholds are normative scheme requirements and form part of this Rulebook. The normative values are: annual verification-sample minima of 100 assessments (Individual Assurance with questionnaire-based data intake), 200 assessments (Individual Assurance with integrated enterprise data integration) and 200 assessments (Collective Assurance); an independent-recalculation tolerance of ±5%; and, where more than 5% of a sample shows rating-changing discrepancies, expansion of the sample by 50% with a focused re-assessment of the affected system components — systematic discrepancies escalate to category suspension. Changes to these scheme minima require the scheme change process under Section 13.4.

The annual minimum sample sizes below apply separately to each registered pathway and assurance context. Before selection the CAB shall define the period-specific population and examination unit. Each counted case shall identify the pathway, product or recipe version, underlying calculation and, where applicable, the trader/site/channel application actually examined. Repeated delivery of an unchanged claim at the same application does not create another case. Distinct applications count separately only where their application evidence is separately examined; reuse of a calculation check shall be documented and sufficient diversity of underlying calculations maintained. Each case counts once within its context. Different providers or pathways shall not pool their numerical minima unless an explicit alternative scheme rule has been adopted under Section 13.4 and its suitability demonstrated. The annual minimum sample sizes per assurance context are:

*Table 3: Minimum sample sizes*

| Assurance context | Annual minimum |
|---|---|
| Individual Assurance — questionnaire-based intake | 100 assessments |
| Individual Assurance — enterprise data integration | 200 assessments |
| Collective Assurance | 200 assessments |

The minimum sample sizes in Table 3 apply to the Conformity Assessment Body's annual verification of live market claims. Where the complete relevant population N contains fewer eligible distinct cases than the applicable minimum M, the CAB shall examine all N cases: the numerical minimum is min(N,M), and at renewal min(N,ceil(1.5 × M)). Missing, inaccessible, disputed or erroneous cases shall not be removed merely to reduce N. A census does not waive system assessment, assurance, investigation of unavailable evidence or other work necessary to support the conclusion. A zero population cannot support a positive live-claim-use conclusion. Initial sample sufficiency shall be determined separately for the complete initial assessment; first-year evidence may serve annual work only where the CAB documents that its period, objectives and requirements are also fulfilled. They are separate from and independent of the provider's internal regression test suite requirements under Section 12.5, which govern change management testing and have their own minimum composition requirements.

For each sampled assessment, the Conformity Assessment Body verifies: (1) input data accuracy, confirming that the recorded input data matches the documentation supplied at intake or the source system from which it was extracted, and that the data was not altered between

submission and assessment; (2) calculation correctness, by independent recalculation of the climate-impact result within the tolerance defined in this section; and (3) claim conformity, confirming that the claim as displayed corresponds to the assessed result and to the applicable display requirements of Section 10.8. The claim sample may be drawn in advance from assessments scheduled for display in the verification period and grouped by display unit and day: one evidenced display day covers every sampled assessment shown on it, and the CAB sizes the sample to account for the grouping. Evidence of the claim as displayed is a photograph or another dated record of the display, such as a web capture, a menu document or a display-software export, each with a capture record. The acceptable recalculation variance for calculation correctness is ±5%. A sampled claim is misstated when the rating category shown to the consumer differs from the rating category recomputed by the Conformity Assessment Body on the pathway version and database release in force on the date of display. Where more than 2% of the resolved cases in the sample are misstated, measured as the observed share, the verification conclusion shall be modified as required by the applicable instrument under Section 9.3. The sampling design shall provide at least a 95% probability of detecting one or more misstatements if at least 2% of the claims in the relevant pathway/context population are misstated, accounting for random selection, grouping and non-response. The sample shall meet the minima in Table 3, subject to the complete-population rule above. An altered rating, a missing legend under Section 10.8, or a rating shown for an item that was never assessed is a non-conformity regardless of its frequency in the sample. For the expansion trigger, let n be the originally selected distinct cases and k the confirmed rating-changing cases within each pathway/context sample; each case counts once. Where k/n exceeds 5%, the CAB shall add at least ceil(0.5 × n) previously unselected cases and conduct a focused reassessment of the affected system components. If fewer cases remain, all remaining cases shall be examined and any further necessary system or source-evidence work performed. An unresolved case shall not be recorded as correct: where its resolution could change whether the trigger is exceeded, the CAB shall resolve it or expand the sample. A case that remains unresolved because the trader has not provided the requested evidence within the applicable deadline is a non-compliant claim of that trader, enforced under Section 9.3; it is reported separately in the verification statement together with the non-response rate. Absence of evidence alone is not counted as a confirmed rating misstatement, but does not excuse a provider control failure or permit a positive conclusion on unsupported scope. The CAB documents a non-response threshold before the draw; exceeding it requires a scope limitation to be recorded, and a limitation below it shall also be recorded where necessary under the applicable instrument. Sample expansion does not itself resolve an evidence gap or restore claim-use rights. Additional risk-based work and consequences for systematic discrepancies remain applicable; numerical tolerance does not excuse an incorrect rating or misleading application. The Conformity Assessment Body may set larger samples where risk indicators warrant. Before evidence gathering, the CAB shall document quantitative and qualitative materiality appropriate to the intended use and complete claim scope. The recalculation tolerance and sample-expansion trigger do not replace that assessment: a discrepancy below the numerical tolerance may still be material where it changes a rating, misleads claim users or reveals a systematic control failure.

# 9. Audit and Verification

## 9.1 Purpose

This section defines the ongoing audit and verification requirements for certified providers and traders. CABs shall apply the applicable conformity-assessment standards together with this Rulebook and its expressly identified normative annexes. They may use established procedures, tools and report formats where these fulfil the requirements. Supporting templates and implementation examples are informative unless expressly designated normative. The CAB shall document its engagement-specific assessment plan and the exercise of discretion permitted by the scheme. Certification is not a one-time event. Maintaining certification status requires annual surveillance and, where material changes are made to a certified pathway, a targeted change audit before the change takes effect in certified claims as well as a mandatory re-certification at the end of each three-year certification cycle.

## 9.2 Engagement and Certification Cycle

The scheme operates four engagement cycles summarised below. Initial and renewal cycle labels do not determine the ISO instrument: the CAB shall retain the full methodology and system assessment, initial output checks and applicable correctness, representativeness and continuing-effectiveness work under ISO 14067 Annex C and ISO 14065 Annex E. Each component and conclusion is assigned under Section 9.5, including the complete rating scope. The table is read with those requirements and the full procedures below.

*Table 4: Engagement and Certification Cycle*

| Event | Frequency | Instrument | Scope |
|---|---|---|---|
| Initial validation | Once | Applicable system-assessment result; verification statement for historical GHG components; validation result for prospective components where applicable | Full methodology and system assessment, applicable CFP systematic-approach requirements and initial output and complete-rating checks; instrument allocation under Section 9.5 |
| Annual verification | Yearly | Verification statement for historical GHG components and documented conclusions for other assessed components | Sample-based verification of live market claims, system-conformity review, and change-log review |
| Renewal re-validation | Every 3 years | Renewed appropriate system-assessment result and verification statement; applicable validation result where required | Focused system reassessment, extended sample verification (150% of the annual minimum subject to the effective Section 8.6 population rules), full change and complaint/appeal review for the licence period, and assessment of surveillance effectiveness |
| Trigger verification or focused re-validation | As needed | Focused statement or findings report | Focused assessment of specific changes or events under Section 12 and their necessary consequential effects, using applicable component-specific instruments |

## 9.3 Surveillance Audits

The Conformity Assessment Body conducts annual surveillance of certified providers and traders to confirm ongoing compliance with the scheme requirements. Surveillance focuses on confirming that the certified pathway continues to operate correctly. Its scope and sample size shall follow current risk and evidence needs, subject to the annual minima in Section 8.6; the sample need not be smaller than the initial sample. Unchanged work may be reused subject to the CAB's documented evaluation of its continuing suitability.

Provider surveillance covers a spot-check of calculated results against the approved methodology, verification that missing data continues to be handled consistently with the documented methodology choices, and confirmation that operational requirements remain in place. Surveillance shall reuse suitable Layer 1 and Layer 2 findings under Section 6.2. Supplementary assessment may be necessary for a material change or an identified limitation, inconsistency or new evidence affecting the conclusion; the reason and scope shall be documented.

Trader surveillance is conducted through sampling under the applicable certification tier. For traders under Individual Assurance, the Conformity Assessment Body reviews a sample of certified traders' claim use. For traders under Collective Assurance, the Conformity Assessment Body samples claims from the provider's internal trader register, which is disclosed in full to the Conformity Assessment Body as the sampling frame.

Samples are drawn from the assessment or calculation logs maintained by the validated provider and made available per Section 7. The Conformity Assessment Body selects samples using a documented combination of random and risk-based selection. Random selection ensures coverage across the pathway's product scope, rating categories, and participating-company population. Risk-based selection prioritises: new product categories or newly onboarded participating companies; products with high gap-filling rates or low data completeness; borderline cases near a rating threshold; products subject to a recent material change in recipe, sourcing, or supplier; categories or assessments where previous samples revealed discrepancies; and products that have been the subject of complaints or appeals. The proportion of random to risk-based selection is at the Conformity Assessment Body's discretion and must be documented in its sampling procedure.

The annual surveillance engagement covers the following areas: methodology conformity (continued conformity with ISO 14067 for the climate rating, changes to system boundaries, functional unit, or allocation methods, continued conformity with the validity conditions of the validation statement); database validity (update log, new data sources, data quality procedures, emission factor accuracy); quality assurance processes (accuracy, reproducibility, completeness, traceability, and outlier detection); change management: review of the change log per Section 12, covering (1) completeness, confirming all changes since the last engagement are documented with classification; (2) classification accuracy, spot-checking that changes were correctly classified using the materiality criteria in Section 12; (3) regression test suite results for every release since the last engagement, verifying that the suite meets the composition requirements declared in the pathway annex, that tests were run before deployment, and that results are logged and retained; (4) for minor changes, verification that the impact remained within the validity conditions of the validation statement; (5) for major changes, verification that a focused re-validation by the Conformity Assessment Body was completed before deployment; and (6) for emergency changes, verification that both the CAB and ESFC were notified within 48 hours of deployment and retrospective review was completed under Section 12.7; organisational processes (complaint and appeal handling, non-conformity management, data confidentiality and security, and key personnel changes); and corrective action follow-up (status of all open non-conformities from previous engagements and effectiveness of implemented corrective actions). Where a pathway calculates a partial carbon footprint, the Conformity Assessment Body shall verify at initial certification and at each annual surveillance that the system boundary is stated positively in the pathway annex, that each excluded stage is documented with a reason, and that the boundary diagram is published on the scheme registry.

The engagement procedure is: the Conformity Assessment Body provides an engagement plan at least four weeks in advance; the validated provider supplies requested documentation; remote methods and any omission of site visits shall be justified by the CAB against the applicable standards and programme requirements and, where the CAB is accredited, its accreditation requirements, with access under Annex C.2.3 available where needed; the CAB provides its findings report within 15 business days; the provider responds within 30 calendar days; following evaluation of the response, independent review and the applicable decision process, the CAB issues and transmits its final statement to ESFC. These deadlines do not require a statement to be issued before sufficient appropriate evidence is available.

For each sampled assessment, the Conformity Assessment Body verifies: (1) input data accuracy, confirming the locked input data matches available documentation (questionnaire intake) or the source system from which it was extracted (enterprise integration) , and that data was not altered between submission and assessment; (2) calculation correctness, by independent recalculation of the climate-impact result against the pathway's evidence-file output, with an acceptable variance of ±5%; (3) methodology conformity, covering correct application of the pathway's declared characterisation factors, system boundary, declared cut-off criteria (ISO 14067:2018 6.3.4.3), and gap-filling logic; (4) rating assignment, confirming the calculated impact was correctly compared against the pathway's declared rating thresholds and that borderline cases were correctly flagged; and (5) audit trail completeness, confirming the evidence file contains all required content for the sampled assessment.Verification statement outcomes:

- A supported positive instrument-specific conclusion permits continuation only for the scope and conditions confirmed in the scheme-status decision; any minor non-conformities require the corrective action under Section 11.3. A positive component conclusion does not by itself establish conformity of the complete scheme scope.
- A modified verification opinion may be issued only where permitted by the applicable instrument and supported by its required conditions; a correctable major non-conformity does not automatically justify a positive opinion or continued claim use. Scheme-status and corrective-action decisions shall follow Section 11, including its applicable deadlines. A correction period does not permit continued use of a known non-compliant rating or claim.
- Negative or unable to conclude: the affected unsupported scope is restricted or suspended under the CAB determination and Section 11. Any remaining scope requires an explicit supported determination; no complete-scope positive conclusion may be inferred.

Surveillance findings are reported to ESFC per Section 9.6. Non-compliance identified through surveillance is handled per Section 11.

When the Conformity Assessment Body's sample identifies a non-compliant claim by a  traders under Collective Assurance, the Conformity Assessment Body notifies the validated provider rather than enforcing directly against the trader. The validated provider's contractual authority over  traders under Collective Assurance is the primary enforcement mechanism: the provider is required under its scheme participation agreement to suspend or terminate service to non-compliant traders within the timelines declared in its pathway annex. The Conformity Assessment Body monitors the validated provider's effectiveness in enforcing against  traders under Collective Assurance as part of the annual change-log review; patterns of unresolved trader non-compliance constitute a system-level non-conformity at the provider level and are reported to ESFC. When the CAB identifies a non-compliant claim under Individual Assurance, it reports the finding and required technical action to ESFC and the licence-issuing party. The provider enforces the trader licence, or ESFC's licensing organ does so where it issued the licence under Section 1.2.2. ESFC administers scheme status under Section 11; the CAB does not issue the licence it assesses.

## 9.4 Material Change Audits

When a provider makes a material change to a certified pathway, the Conformity Assessment Body conducts a targeted change audit before the change takes effect in certified claims. Section 12 defines what constitutes a material change and the process for notifying ESFC and the Conformity Assessment Body.

The change audit shall focus on the changed components and their consequential effects. The CAB shall determine the necessary rigor and sample for the affected scope and applicable assurance. Suitable unchanged findings shall be reused under Section 6.2; supplementary work on an unchanged component requires a documented dependency, limitation, inconsistency or evidence need. A focused change assessment does not restart the three-year renewal cycle.

Where a material change also affects the Layer 1 or Layer 2 assessment, the applicable review process under Sections 5 and 6 must be completed before the Conformity Assessment Body change audit takes place.

Minor changes that do not affect the certified claim scope, calculation methodology, or evidence structure do not require a change audit. The distinction between minor and material changes is defined in Section 12.

Trigger events requiring a focused engagement include: major changes to the approved pathway per Section 12 (these require the applicable focused assessment and approval before deployment); significant organisational changes to key technical personnel or ownership; discovery of a systematic error or external report of a significant issue; and new regulatory requirements affecting the scheme.

The provider notifies the CAB within 10 business days of a triggering event, unless Section 11 or the emergency procedure in Section 12.7 requires earlier action or notice. Planned major changes require approval before affected certified use under Section 12.6.3. The CAB assesses within 10 business days whether a focused assessment is required; its scope and timeline are agreed and it is conducted under the component-specific requirements and instruments in Section 9.5. Findings are transmitted to ESFC and any required restrictions or status changes are implemented without waiting for routine deadlines.

## 9.5 Level of Assurance

For verification components, the scheme allocation shall be reasonable assurance at initial assessment and renewal, and limited assurance for annual surveillance, subject to suitability for the intended use and applicable programme; a higher level may be required. The level of assurance is fixed in the engagement letter before the engagement starts and is stated in the verification statement; it is not changed during an engagement (ISO 14064-3, 5.1.3). By exception to the initial-assessment allocation above, the first sampled verification of live claims under a newly registered pathway, including one within the initial assessment, may be conducted at no less than limited assurance where the Conformity Assessment Body confirms its suitability for the intended use and applicable programme before the engagement starts; the independent recalculation of the pathway's published values at initial assessment remains at reasonable assurance. Historical GHG statements shall be verified; prospective statements shall be validated where applicable. Assessment of a CFP systematic approach shall address ISO 14067 Annex C and ISO 14065 Annex E. Other assessment or validation components shall state their applicable objectives, criteria and conclusion under the relevant requirements rather than automatically inheriting a verification assurance label.

## 9.6 Conformity Assessment Body Reporting

The Conformity Assessment Body submits regular reports to ESFC covering certification status of all certified providers and traders, surveillance findings including any issues identified and corrective actions agreed, non-compliance findings, and any changes to certification scope. Non-compliance findings that require immediate action are reported to ESFC without delay per Section 11 and are not held until the next scheduled report. Effectiveness of suspension. A provider shall describe in its pathway registration how a suspension decision under Section 11.5 takes practical effect for its delivery model, and shall demonstrate that mechanism at initial

assessment and each annual surveillance. No particular technical means is prescribed: a running interface may use server-side withdrawal of affected output; a delivered dataset may require trader notification and withdrawal of permission to use affected results. The demonstration shall show how the suspension reaches affected claim use, including downstream displays and retained outputs where applicable.

Criteria and statement wording. This Rulebook and the pathway's registered Annex A form the public scheme criteria to be agreed with the client, together with applicable normative criteria; for GHG verification this includes ISO 14064-3, 5.1.5. The opinion shall reference the criteria and versions. A verification statement shall state its object, criteria, level of assurance, sample size and period, and state whether it is issued under accreditation and, if so, identify that accreditation. For registered complete-rating scope, the engagement shall identify responsible-party assertions on (i) the scientific method/rating criteria and required actual system operation and (ii) historical quantified results, correct rating assignment and actual claim use. The accepted programme shall identify the applicable instruments and a named independent CAB authority responsible for the complete technical Scheme-conformity determination. Its decision record shall map every applicable requirement to the relevant component scope, period, criteria, evidence and outcome; resolve inconsistent results and identify all restrictions. An unsupported required component prevents a positive complete-scope determination. Modified or limited-assurance component outcomes retain their instrument-specific meaning and shall not be restated as unqualified verification of every item. The technical determination precedes and does not itself grant the separate ESFC/provider status or licence. The public statement shall identify the client, responsible parties, independent body, historical or prospective information, preparation criteria and assessment criteria, component and complete outcomes, and, where the CAB is accredited, the actual activity-specific accreditation. The complete-rating and public-citation requirements below apply to that assembled result. Reports are submitted at minimum annually, in a format agreed with ESFC. ESFC uses these reports to maintain the public verification infrastructure and to identify any systemic issues requiring scheme-level attention.

The annual verification report submitted by the Conformity Assessment Body shall include: engagement scope and dates; findings and non-conformities; sample verification results including pass rate, discrepancies, and patterns; change-log review findings; continued conformity with the validity conditions of the validation statement; status of previous non-conformities; overall and component conclusions, with assurance stated only for the components to which it applies under Section 9.5; and recommendations for improvement.

A CAB-authorised public statement or public annex to its statement shall be published on the scheme portal for each certified provider pathway. It shall distinguish the conclusion on the quantified environmental information from the conclusion on the complete rating scope, where that scope has been assessed. It shall identify the applicable criteria and versions, assessment instruments, assurance where applicable, precise object and population, period, limitations, outcome, statement reference, CAB identity, its acceptance under Section 2.4 and, where it is accredited, the actual accreditation coverage. For ratings, the defined scope shall address the benchmark, thresholds, rating assignment, uncertainty and borderline treatment, permitted claim presentation and collective trader controls where applicable. The public statement shall include CAB-authorised citation wording and conditions of use, distinguishing calculation by the provider from independent assessment by the CAB and avoiding an implication that every item was individually verified where sampling was used. Scheme status, validity and customer-use eligibility shall be linked to the applicable decision and scope. Confidential detailed findings and underlying customer evidence may remain in restricted reports subject to applicable disclosure and access requirements; the public criteria, statement and mandatory supporting information shall not be made discretionary on that basis.

### 9.7 Re-Certification Cycle

Provider-level certification is valid for three years, conditional on passing annual surveillance. At the end of the three-year period, the provider must complete full re-certification before the certificate is renewed. Re-certification is conducted by a body accepted under Section 2.4. Annual surveillance audits do not substitute for the three-year re-certification. Where a material change audit is required within the three-year period, it does not reset the re-certification cycle.

## 9.8 Validated Provider Obligations

A validated provider shall: maintain all records required for surveillance for a minimum of five years; provide the Conformity Assessment Body with access to data, facilities, and personnel during engagements; notify the Conformity Assessment Body of changes per the validated change management process in Section 12; implement corrective actions within the timelines specified; cover the costs of scheduled validation and verification engagements; cooperate fully with sample-based claim verification requests; maintain and execute the regression test suite for every release of the validated pathway; and maintain a complete change log available to the Conformity Assessment Body at all times.

# 10. Claim and Label Use

### 10.1 Purpose

This section defines the requirements for environmental claims made under the scheme. It sets out which claim types are in scope for this release, what a certified climate-impact claim must substantiate, the requirements for the rating system where one is used, and the minimum display requirements for labels and claims. These requirements implement the conditions established by Directive (EU) 2024/825 (EmpCo) and the European Commission's Questions and Answers of 18 May 2026.

### 10.2 Claim Types and Indicators

This Rulebook covers climate-impact claims (Section 10.4) and, for each certified pathway, the further impact categories that pathway has declared under Section 10.4a and its validation statement names.

A provider may operationally compute and display indicators it has not declared under Section 10.4a, but they shall not be presented, labelled, or implied as Rulebook-certified.

### 10.3 Functional Unit

The scheme does not prescribe a specific functional unit. Each certified provider pathway defines and documents the functional unit used for its claims. The functional unit must be scientifically defensible, transparently disclosed, and covered by the Layer 2 scientific review (Section 6). The pathway documents the functional unit definition and its derivation in the pathway annex.

## 10.4 Climate Impact Claims

EmpCo requires that environmental claims certified under a public scheme are not misleading and that the scheme is open to all traders, has independent monitoring, and includes complaint procedures. A certified climate-impact claim under this scheme must be substantiated by a product-level greenhouse gas assessment that:

1. demonstrates the applicable product-CFP and underlying LCA, reporting and review requirements under Section 5, with the scope of any claimed ISO conformity expressly supported
2. covers all methodology elements beyond these frameworks through documented choices that have been independently reviewed (Layer 2 requirement, Section 6)
3. states the functional unit clearly (Section 10.3)
4. is assessed at the level of individual product carbon footprint calculation, not at organisational level alone

A certified claim may not assert that a product is climate neutral, carbon neutral, or equivalent, where that assertion is based on the offsetting of greenhouse gas emissions outside the product's value chain, as such claims are prohibited under Annex I point 4c to the UCPD as amended by Directive (EU) 2024/825.

The specific characterisation factors, impact assessment method, and reporting format are determined by the certified provider pathway and must be covered by the Layer 2 scientific review. The scheme does not mandate a specific method, consistent with its methodology-neutral design.

10.4a Provider-Declared Impact Category Claims

A certified claim on an impact category other than climate is substantiated under this scheme only where: 1. the certified provider pathway has declared the category in its annex with the elements required by Section 5.6.1; 2. the declaration has been assessed by the Conformity Assessment Body under Section 6 and the category is named in the pathway's validation statement; 3. the claim states the category and the functional or declared unit clearly (Section 10.3), and is assessed at the level of the individual product; 4. where a rating is displayed, it meets Sections 10.5 to 10.8 for that category and is identifiable as to its category on every display surface.

The framework, method, criterion, thresholds and assurance route for a declared category are determined by the certified provider pathway and must be covered by the Conformity Assessment Body's assessment. The scheme does not mandate a specific framework, method or criterion for any category, consistent with its methodology-neutral design. ESFC defines the scheme requirements for the climate floor. For a provider-declared category, the framework, method and criterion are the provider's, and their substantiation rests on the Conformity Assessment Body's conclusion for that pathway; ESFC neither defines nor endorses them, and a finding on a declared category does not affect the climate floor of other pathways.

## 10.5 Rating System

The scheme does not prescribe a specific rating shape. Where a certified provider pathway operates a rating system for the climate-impact claim, it does so in a provider-declared rating shape. The rating shape must be scientifically defensible and covered by the Layer 2 scientific review (Section 6). A future scheme release may move toward a harmonised rating shape once a globally aligned methodology has been adopted.

Where a pathway operates a rating system, it shall document and publish the following in the pathway annex, subject to Layer 2 scientific review:

1. the rating shape and thresholds or equivalent boundaries, in the same units as the claim
2. the derivation rationale for the thresholds (for example a percentile of a benchmark dataset, a science-based target, or expert judgement)
3. the benchmark or reference dataset used, including its geographic and temporal scope
4. how thresholds are reviewed and updated
5. how borderline cases are handled (Section 10.6)
6. how the rating system meets the uncertainty requirement (Section 10.7)

The benchmark is set as an absolute reference value for the product category, not as the statistical mean of current market products. This ensures that the rating reflects a stable, meaningful threshold rather than the distribution of existing results, which would shift as the market improves and cause the same product to be rated differently over time.

Where a pathway uses a rating system for climate impact, the top grade, colour, score, or equivalent designation, meaning whatever the pathway defines as its highest-performing tier, may only be applied to products with a result at least 50% below the pathway's declared benchmark. This requirement applies regardless of how the top tier is expressed, whether as a defined term, a letter grade, a colour, a numerical score, or any other format. This threshold defines the minimum relative performance of the pathway's top rating category. It does not by itself establish recognised excellent environmental performance or exempt the wording or presentation of a claim from applicable law. The benchmark, rating meaning and actual display remain subject to the scientific-review and claim-use requirements of this Rulebook. For other categories under Section 10.4a, category-appropriate top-tier criteria shall be scientifically justified in the pathway annex and positively assessed under Section 6 before certified use; Sections 10.6 to 10.8 continue to apply.

The pathway annex is publicly accessible through the scheme registry.

## 10.6 Borderline Cases

Where a pathway operates a rating system, products scoring near a rating threshold shall be flagged for enhanced review during quality assurance. Enhanced sensitivity analysis is performed and borderline assessments are logged for Conformity Assessment Body sampling priority.

## 10.7 Uncertainty

A rating system shall be designed so that typical data uncertainties do not routinely change a product’s rating category. The pathway documentation shall describe how its threshold design relates to input uncertainty, including the broader uncertainty ranges typical of assessments with higher gap-filling rates (Section 6.3, question 8); quantified spacing between adjacent thresholds is not required. Fixed multiples of a declared benchmark are a design choice, not by themselves evidence that uncertainty cannot change a rating.

## 10.8 Label and Claim Display Requirements

Any label or claim used under the scheme must meet the following minimum display requirements, which are derived from EmpCo’s requirements for non-misleading environmental claims and the conditions set out in the Commission’s Questions and Answers document of 18 May 2026.

Traders may operate their own branded labels under the scheme, distinct from the certified provider's label design, provided all display requirements in this section are met. The

open-access requirement of the Directive applies to the scheme itself, not to individual label designs within it.

**Claim scope disclosure.** The scope of the claim must be stated clearly on the same medium as the label itself. It must be immediately clear to the average consumer what the label covers, for example “climate impact” or “product carbon footprint.” This requirement cannot be satisfied by a QR code alone. More detailed technical information, such as system boundaries, methodology version, or underlying data sources, can be made accessible via QR code or equivalent digital link, but the core scope must be legible on or directly alongside the label.

**Functional unit disclosure.** The functional unit on which the claim is based must be stated on the label or its immediate packaging. It may appear in the footer or small print of the label. It does not need to appear adjacent to the main claim element and may not be placed behind a QR code alone.

**Symbol surfaces.** Where the claim takes the form of a per-item symbol (letter, colour, icon, or equivalent) on a menu, menu plan, application screen, or web page, the claim-scope and functional-unit disclosures may be satisfied by one legend per surface, placed where the symbols appear. The legend shall state: what the symbol measures and the scale used; the functional or declared unit;  the scheme name or mark, and the provider name. One legend per surface is sufficient and need not be repeated per item. All other applicable supporting-information and access requirements continue to apply.

**Supporting information.** The scheme owner shall specify the supporting information required to understand each permitted claim format. Where the claim alone is likely to be misunderstood, supporting information shall be freely available at the time the intended audience decides to obtain or use the product, whether in print or electronic form. It shall identify the programme operator, the intended audience (B2B or B2C), excluded life-cycle stages, declared quantitative parameters, and the supporting conformity assessment. For footprint communications, the applicable footprint study report shall be publicly available and identified separately from the CAB opinion. Existing versioned public documents may satisfy this requirement if together they contain the required report content. Confidential primary data and separate workpapers may remain protected, provided the required public report and disclosures remain complete. Claims shall be assessed against the applicable communication criteria with regard to symbols, meaningful values, legible explanations, and comparison basis; no particular QR technology is prescribed.

**No misleading overall sustainability implication.** The label must not visually or textually imply a broader sustainability judgment than the underlying data supports. A label covering climate impact only must not create the impression of overall environmental or sustainability superiority. This applies to the label design, colour coding, scoring systems, grade structures, and any accompanying text. If a graded or colour-coded format is used, the scheme rules will define what each grade or colour means and how it was derived, and this must be publicly documented.

**Comparative claims.** The scheme does not support comparative claims between products assessed under different certified provider pathways. Claim wording and label display must not imply cross-pathway comparability. Within-pathway comparative claims additionally require documented compatibility for the intended comparison, including product function and functional or declared unit, system boundaries, methods, data quality, relevant time and geography, and the common benchmark and rating rules where used. Applicable category, review and communication requirements shall be met. The pathway criteria shall define eligible comparisons and exclusions; sharing a pathway alone is insufficient. Where a certified provider operates a consumer-facing compliance page linked from its certified claims, that page must

carry a notice stating that ratings issued under different ESFC-certified pathways use different methodologies and are not directly comparable.

**Claim wording rules.** Claim wording must be specific and scoped. It must not use generic environmental terms such as “eco-friendly,” “sustainable,” or “climate friendly” without clear specification, and must not imply overall product superiority beyond what the underlying assessment covers. “Climate-friendly” may be used for an assessment rated in the top grade of a pathway whose top grade lies at least 50% below its declared benchmark (Section 10.5), and only together with the rating, its scope and the legend. ESFC shall publish version-controlled permitted and prohibited wording alongside this Rulebook before it is used for certified claims, including rating meaning, functional or declared unit, covered life-cycle stages and environmental area, and the relationship between the provider's calculation and the CAB's conclusion. For intended CFP communication, the applicable ISO 14026 requirements referenced by ISO 14067 shall be addressed, including supporting information, indication of how it can be accessed, applicable product-category rules and review requirements. The communication category and applicable requirements shall be identified in the pathway criteria. Removing a prescribed QR-code format does not waive applicable access-to-information requirements. CAB-specific citations shall follow the authorised public statement and its conditions of use under Section 9.6.

**Update obligations.** If the underlying methodology, data sources, or calculation results change materially, the label display must be updated within the timeframe defined in Section 12. Traders are responsible for ensuring that the label they display reflects the current certified status of their pathway. Technology providers are responsible for notifying traders of material changes in a timely manner.

**Scheme-internal tier names.** The certification tier names Individual Assurance and Collective Assurance are scheme-internal terms describing the binding mode of certification. They shall not appear on consumer-facing labels or claims

# 11. Non-Compliance, Complaints, and Suspension

## 11.1 Purpose

This section establishes the procedures for handling non-compliance, complaints, and suspension of certification under the scheme. These procedures fulfil the requirements of Directive (EU) 2024/825 (EmpCo) for independent monitoring and accessible complaint mechanisms, and are a condition of the scheme's recognition status. ESFC, as scheme owner, is responsible for administering the complaint and non-compliance process. The Conformity Assessment Body is responsible for reporting observed non-compliance detected during audits to ESFC and for implementing any suspension or withdrawal of certification status within its own audit cycle. Where the CAB issues a technical finding, its determination of the necessary scope restrictions, suspension or withdrawal under Section 11.5 is binding on ESFC's implementation. ESFC's role in those decisions is administrative, implementing outcomes determined by the Conformity Assessment Body's independent assessment rather than exercising independent judgment on the substantive merits.

## 11.2 Non-Compliance Categories

Non-compliance is any failure to meet the requirements of this Rulebook, the certified provider pathway, or the conditions of certification. Non-compliance is categorised as follows.

**Minor non-compliance** is a deficiency that does not affect the integrity of the certified claim or the validity of the certification, but requires correction within a defined timeframe (see Section 11.3). Examples include incomplete documentation, delayed notifications, or minor labelling inconsistencies that do not mislead consumers.

**Major non-compliance** is a deficiency that affects the integrity of the certified claim, the validity of the underlying methodology, or the reliability of the certification. Examples include use of uncertified data sources, failure to notify ESFC or the Conformity Assessment Body of a material change, or claim display that contradicts the certified scope. Major non-compliance triggers a corrective action process and may result in suspension.

**Critical non-compliance** is a deficiency that constitutes a fundamental breach of the scheme's requirements or a deliberate misrepresentation. Examples include fraudulent data, use of certification marks after withdrawal of certification, or systematic failure to apply the certified methodology. Critical non-compliance may result in immediate suspension and referral for withdrawal of certification.

Non-compliance may be identified by the Conformity Assessment Body during audit, by ESFC through monitoring or complaint review, or by a third party through the complaint mechanism in Section 11.4.

## 11.3 Corrective Action Process

Upon identification of non-compliance, ESFC notifies the relevant party in writing, specifying the nature of the non-compliance, the category, and the required corrective action.

The corrective action plan shall address both the correction of the identified non-conformity and the measures the responsible party will take to prevent its recurrence. Prevention measures shall be included in the surveillance plan and reviewed by the Conformity Assessment Body at the next annual surveillance.

For minor non-compliance, the responsible party has 30 calendar days to submit a corrective action plan and 90 calendar days to demonstrate resolution. ESFC may grant an extension in justified circumstances.

For major non-compliance, the responsible party has 14 calendar days to submit a corrective action plan. Resolution must be demonstrated within 60 calendar days. Failure to submit a corrective action plan within 14 days, or to demonstrate resolution within 60 days, escalates the case to suspension proceedings under Section 11.5.

Critical non-compliance requires immediate suspension of the affected scope under Section 11.5, without a prior corrective-action grace period. ESFC implements the CAB technical determination and records the scope and conditions for any subsequent reinstatement; corrective work does not itself restore use rights.

All corrective action plans and their outcomes are recorded by ESFC and held in the scheme records. A summary of resolved non-compliance cases is published in ESFC's annual scheme performance report.

## 11.4 Complaint Mechanism

Any party, including consumers, traders, providers, competitors, or civil society organisations, may submit a complaint regarding a certified claim or the conduct of a certified party under the scheme.

Complaints are submitted to ESFC via the contact point published in the scheme registry. ESFC acknowledges receipt within 5 working days and provides an initial assessment of whether the complaint falls within the scheme's scope within 20 working days.

A complaint is in scope if it concerns a certified claim made under this scheme, the conduct of a certified provider or trader in relation to their certification, or the integrity of the scheme's own procedures. Complaints that fall outside the scheme's scope are redirected where possible to the relevant authority.

For in-scope complaints, ESFC conducts or commissions an investigation proportionate to the nature of the complaint. The complainant is informed of the outcome and the action taken. Where the investigation results in a finding of non-compliance, the corrective action or suspension process in Sections 11.3 and 11.5 applies. The complainant's identity is kept confidential unless they consent to disclosure or disclosure is required by law.

ESFC publishes an annual summary of complaint volumes and outcomes as part of the scheme performance report, without identifying individual complainants or commercially sensitive details.

## 11.5 Suspension of Certification

Where the CAB identifies major or critical non-compliance, it shall report the finding and determine the necessary restriction, suspension or withdrawal for the affected scope under the applicable instrument and Section 11. Critical non-compliance requires immediate suspension; a remedial deadline for a major finding does not permit continued use of an affected non-compliant claim. ESFC implements the CAB's technical determination and does not substitute its own substantive assessment. Unaffected scope may remain active only where the CAB has determined that its continued use remains supported.

ESFC shall implement a CAB-required suspension under this section. It shall also initiate the applicable protective process where Section 11.3 deadlines expire without satisfactory resolution or a complaint investigation identifies a serious unresolved risk to claim integrity. The affected scope, interim restrictions and responsible technical decision-maker shall be recorded; these procedures do not delay immediate cessation of a known unsupported claim.

Suspension is notified in writing, specifying grounds, affected scope, effective time and reinstatement conditions. Critical non-compliance and known unsupported claim use require immediate effect; a later effective date is permissible only where the CAB has determined that continued technical use until that date remains supported and no applicable requirement

requires earlier cessation. A suspended provider or trader must immediately cease use of the certification mark and any certified claim wording. ESFC updates the scheme registry to reflect the suspended status within 2 working days of the suspension taking effect.

Where a provider's certification is suspended, the CAB identifies the affected technical scope and whether any trader claims remain supported; ESFC records and communicates the resulting trader-use status. ESFC shall notify affected parties without delay and complete the documented impact notification within 5 working days. That outer administrative deadline does not postpone restrictions effective under the suspension decision or permit continued use of known unsupported claims. Purely administrative restrictions shall be distinguished from technical loss of substantiation. The provider implements the required downstream measures under Section 9.6 and Annex C.

Suspension is a protective measure pending resolution or withdrawal. Reinstatement requires documented evidence that its conditions have been met and, for technical grounds, the CAB's satisfactory assessment and decision for the affected scope. ESFC records the effective reinstatement and informs the licence-issuing party and affected provider or traders; the provider confirms the restored scope and propagates it through downstream controls. Correction, an appeal or expiry of a corrective-action deadline does not by itself reinstate claim-use rights.

## 11.6 Withdrawal of Certification

Where the Conformity Assessment Body has determined that grounds for withdrawal exist, that determination is binding on ESFC. ESFC may not refuse withdrawal where the Conformity Assessment Body has determined it is warranted, and may not initiate withdrawal against a positive Conformity Assessment Body assessment except on documented open-access grounds under Section 13.5.4.

Where a suspension under Section 11.5 has not been resolved within a reasonable period, or where the grounds for non-compliance are of a nature that cannot be remedied, ESFC may initiate withdrawal of certification. Withdrawal is a final decision and results in permanent removal of the certified status for the relevant pathway, product, or entity, subject to the appeal process in Section 11.7.

Prior to issuing a final withdrawal decision, and while suspension remains in effect, ESFC provides the relevant party with a written notice of intent to withdraw, including the grounds, and a period of 20 calendar days to respond. ESFC considers any response before issuing the final decision.

Upon withdrawal, the party must immediately cease use of the certification mark and certified claim wording. ESFC updates the scheme registry accordingly. Withdrawal decisions are published in summary form in the annual scheme performance report.

A party whose certification has been withdrawn may reapply for certification after a minimum of 12 months, subject to demonstrating that the grounds for withdrawal have been fully addressed.

## 11.7 Appeals

Any party subject to a non-compliance finding, suspension, or withdrawal decision has the right to appeal to ESFC within 20 calendar days of receiving the decision.

Appeals are assessed by an independent reviewer appointed by ESFC for that purpose. The reviewer must have no current or prior commercial relationship with ESFC, the provider, or the trader subject to the appeal. ESFC aims to issue an appeal decision within 40 calendar days of receipt. During appeal, a suspension remains in effect. A documented procedural defect may justify review of an administrative measure, but ESFC shall not reinstate technically unsupported claim use or override a CAB technical restriction on that basis. Any technical change to affected

claim-use status requires the applicable independent CAB decision; the reasons, scope and effective time shall be recorded.

The appeals process does not prevent a party from seeking recourse through applicable national or EU legal mechanisms.

### 11.8 Record-Keeping and Transparency

ESFC maintains records of all non-compliance cases, complaints, corrective actions, suspensions, withdrawals, and appeals for a minimum of 5 years. Records are held securely and made available to relevant authorities on request.

The scheme registry shall be updated without delay and no later than the two-working-day limit in Section 11.5 where applicable; the recorded effective date and time of a decision determine status, not the later publication time. Status confirmation requests shall report any decision already effective. Historical certification status, including periods of suspension or withdrawal, is retained in the registry and publicly accessible.

## 12. Change Management

### 12.1 Purpose

This section defines the validated change management process for updates to a certified provider pathway's calculation engine, ingredient database, and gap-filling logic. It establishes a three-tier change classification system, materiality thresholds, regression testing requirements, and Conformity Assessment Body notification and approval procedures. The process ensures that routine software improvements can proceed without requiring ad-hoc re-certification, while providing the Conformity Assessment Body with appropriate oversight of changes that could affect assessment accuracy.

Changes to scheme documents, governance policies, or Conformity Assessment Body requirements are governed by the stakeholder consultation process under Section 13 and are outside the scope of this section.

### 12.2 Scope

This section applies to all changes to:

1. the pathway's calculation engine, including software, algorithms, and pipeline logic
2. the pathway's ingredient database, including emission factors, ingredient entries, and data sources
3. the pathway's gap-filling logic, including any gap-filling module parameters, models, algorithms, and defaults
4. rating thresholds and benchmarks declared by the pathway
5. the declared functional unit formula or other framework-floor methodology items

Provider-pathway changes affecting rating thresholds, benchmarks, the declared functional unit formula or other framework-floor methodology items require the pathway consultation defined in Section 12.6.3 before CAB approval. A change to the scheme requirements themselves additionally follows Section 13.4.

## 12.3 Change Classification

### 12.3.1 Three-Tier System

Every proposed change shall be classified into one of three tiers before deployment. Classification is determined by running the regression test suite (Section 12.5) against the proposed change and assessing the result against the materiality threshold (Section 12.4).

*Table 5: Three-Tier Change Classification*

| Tier | Description | Conformity Assessment Body Involvement |
|---|---|---|
| Non-substantive | No impact on assessment outputs | Recorded in the change log and annual surveillance package; no separate release notification |
| Minor | Impact below materiality threshold | CAB notified before deployment; no prior approval required; reviewed at next annual surveillance |
| Major | Impact above materiality threshold or structural change | Conformity Assessment Body approval required before deployment |

Structural changes are always classified as major regardless of regression test results. Structural changes include: addition or removal of an impact category, a change in life cycle impact assessment methodology, and a change in global warming potential characterisation factors.

### 12.3.2 Non-Substantive Changes

Non-substantive changes have no impact on assessment outputs. The provider records them in the change log and includes them in the annual surveillance package. No separate release notification or prior CAB approval is required. Examples include user interface changes, documentation updates, internal code refactoring that does not alter calculation logic, performance optimisation, and bug fixes that do not affect any assessment output.

Verification: the regression test suite confirms identical outputs before and after the change.

### 12.3.3 Minor Changes

Minor changes have impact below the materiality threshold defined in Section 12.4. Each minor change is recorded and notified to the CAB before deployment under Section 12.6.2. The accumulated record is also submitted in the annual surveillance package; that annual submission does not replace the release notification. Examples include addition of new ingredients to the ingredient database, gap-filling module parameter tuning within existing model structure, database updates incorporating new data sources, updated origin distribution data, and minor corrections to emission factors for secondary or low-weight ingredients, typically within ±10% of the previous value, where regression testing confirms the impact remains below the materiality threshold.

The certified provider records each minor change in the change log with: a description and rationale, the date of deployment, regression test results, and a materiality analysis confirming the impact is below the threshold.

### 12.3.4 Major Changes

Major changes have impact above the materiality threshold, or constitute structural changes regardless of measured impact. Conformity Assessment Body approval is required before deployment. Examples include new impact categories, methodology changes such as switching allocation method or modifying system boundaries, rating threshold recalibration, introduction of a new gap-filling category, and changes to global warming potential factors.

## 12.4 Materiality Threshold

For the purposes of this section, an item is one product or recipe assessment case with declared ingredients, quantities, and expected output as included in the provider's regression test suite. A change is material if it causes either of the following in the regression test suite:

1. a rating category change for more than 2% of assessed items, or
2. a change of more than 10% in CO2eq per declared functional unit for more than 5% of assessed items

Materiality is assessed against two references: (i) the immediately preceding release (release delta), and (ii) the baseline — the system state covered by the most recent validation statement or the most recent Conformity Assessment Body approval of a major change (cumulative delta). Both deltas are computed on every release using the full regression test suite and published with the release. A release whose cumulative delta exceeds the materiality threshold is classified as major and requires Conformity Assessment Body approval before deployment, even where its own release delta is below the threshold; upon approval, the baseline resets to the approved release. The publication cadence remains at the provider’s discretion; every release, at whatever frequency, carries the full disclosure set (product-level database changelog, benchmark recalculation where affected, regression results with both deltas).

## 12.5 Regression Test Suite

### 12.5.1 Composition Requirements

Each certified provider maintains a regression test suite against which every release of that provider's pathway is tested. The suite shall:

1. contain a minimum of 300 items
2. include items from at least 80% of the product categories within the pathway's declared scope, spanning high, medium, and low data completeness levels, and covering each gap-filling tier the pathway uses
3. be declared in the provider's pathway annex, including suite size, structure, and any named input cases
4. be a documented random sample of the provider's claim population, or of a declared reference population of comparable products where the claim population is too small or cannot be used, unless declared as a constructed suite under item 6: the provider declares, before the draw, the sampling frame (the population of assessed products and recipes over a stated window, its size, the exclusions and their reasons), the stratification and weights, the seed and the procedure; the draw is reproducible from that declaration. Items shall not be selected, added, removed or altered in order to influence a materiality result. Selection on the basis of rating position, data-completeness tier or gap-filling tier, for the purpose of coverage, is permitted and shall be documented in the selection criteria.
5. report, with every suite version, the borderline share (items scoring within 10% of a rating threshold) and the rating distribution. Where the suite derives from a documented draw, report these alongside those of the draw before post-draw modifications, assessed using the same pathway and database versions; where the borderline shares differ by more than 5 percentage points, the provider justifies the modifications to the Conformity Assessment Body. Any statement of representativeness shall be supported by the sampling design, weights and the effects of post-draw modifications; a reproducible random draw alone is not sufficient.

6. where the suite is not a documented random sample, be declared as a constructed suite: it is labelled as such in the pathway annex, supports change-management materiality under Section 12.4 but no statement of representativeness, and the Conformity Assessment Body may require a random supplementary sample at surveillance. The pathway annex declares the selection criteria of a constructed suite. Where the Conformity Assessment Body identifies a specific coverage or materiality concern, it may require a random supplementary sample, giving its reasons, with the scope proportionate to the concern.

The exact suite size and structure are declared by the provider in their pathway registration and reviewed by the Conformity Assessment Body at initial certification and at each annual surveillance.

#### 12.5.2 Test Execution

The full regression test suite shall be run against the pre-change and post-change systems before every release. Results shall be logged with: a timestamp, the pathway version before and after the change, suite composition, item-by-item output comparison, and materiality metrics calculated per Section 12.4.

#### 12.5.3 Suite Maintenance

The regression test suite shall be reviewed at least annually by the certified provider, prior to the annual surveillance audit. Items shall not be removed from the suite without documented justification. Suite change history is retained and made available to the Conformity Assessment Body at each annual surveillance, where the Conformity Assessment Body verifies suite composition against the requirements in Section 12.5.1. Removal of items specifically to reduce a materiality metric constitutes a critical non-compliance under Section 11. For a suite declared as a random sample, the Conformity Assessment Body verifies at initial certification and at each surveillance that the suite corresponds to the declared draw and its documented post-draw modifications, by re-deriving the draw from the declared frame, seed and procedure and checking the modification record; the provider retains the frame, or a list of identifiers that fixes it, for this purpose. For a constructed suite, the Conformity Assessment Body verifies the declared composition, selection rationale and change history under Section 12.5.1(6).

### 12.6 Change Approval Procedures

#### 12.6.1 Non-Substantive Changes

1. Developer implements the change
2. Regression test suite confirms identical outputs
3. Change recorded in the change log
4. Deployed at the certified provider's discretion

#### 12.6.2 Minor Changes

1. Developer implements the change
2. Regression test suite run; materiality analysis confirms impact below threshold
3. Change recorded in the change log with classification rationale and regression results
4. Before deployment, the CAB is notified with the change description, classification rationale and regression summary; this is notification rather than a request for prior approval
5. Deployed at the certified provider's discretion

6. Conformity Assessment Body reviews at next annual surveillance

### 12.6.3 Major Changes

1. Certified provider prepares a change proposal including: description and rationale, regression test results and materiality analysis, impact assessment covering which products are affected and the magnitude of change, proposed implementation timeline, and a communication plan for affected traders
2. Change proposal submitted to the Conformity Assessment Body
3. Conformity Assessment Body reviews the proposal within 20 business days; the Conformity Assessment Body may request additional regression testing, independent verification of the materiality analysis, or a trigger audit
4. Conformity Assessment Body issues approval, conditional approval with stated requirements, or rejection with justification
5. If approved, the certified provider deploys the change per the agreed timeline; affected traders are notified before deployment
6. Post-deployment: the certified provider monitors for unexpected effects for 30 calendar days and reports any anomalies to the Conformity Assessment Body

Major provider-pathway changes affecting rating thresholds, benchmarks, the declared functional unit formula or other framework-floor methodology items require public consultation coordinated by ESFC before CAB approval is sought. ESFC publishes the proposal and supporting rationale, opens at least 60 calendar days for comment and publishes the substantive comments and reasoned responses, with requested anonymisation. The provider addresses the findings through the applicable scientific review and change proposal. CAB approval and the documented transition plan determine the pathway effective date; the six-month scheme-change notice and member approval in Section 13.4 apply only where the scheme's requirements are themselves changed. This distinction does not waive applicable Scientific Committee approval under Section 13.9.

## 12.7 Emergency Change Procedure

### 12.7.1 Definition

An emergency change is a change that must be deployed immediately to address a critical bug causing incorrect ratings at scale, a security vulnerability exposing assessment data, or a database corruption affecting live assessments.

### 12.7.2 Procedure

1. The certified provider deploys the fix immediately
2. The CAB and ESFC are notified within 48 hours of deployment, including: description of the emergency and the fix, regression test results (which may be partial if time-critical), materiality analysis where applicable, and the number of assessments affected before and after the fix
3. Full regression test suite run within 5 business days of deployment
4. Conformity Assessment Body conducts retroactive review within 10 business days
5. If the Conformity Assessment Body determines the change was not justified as an emergency, it is treated as a major non-conformity under Section 11

### 12.7.3 Documentation

Emergency changes are flagged in the change log with: emergency classification justification, a timeline of events from discovery through deployment, notification, and review, retroactive regression test results, and the Conformity Assessment Body review outcome.

## 12.8 Version Control

Every release of a certified pathway shall be tagged with a version identifier following semantic versioning:

- Major version (X.0.0): structural changes, new impact categories, methodology changes
- Minor version (x.Y.0): database updates, gap-filling module parameter changes, new features below the materiality threshold
- Patch version (x.y.Z): bug fixes and non-substantive changes

The certified provider maintains a changelog documenting every version, the changes it contains, the change tier classification, and the Conformity Assessment Body notification or approval status. The changelog is made available to the Conformity Assessment Body at each annual surveillance and is retained for a minimum of 5 years.

## 12.9 Cumulative Impact Assessment

At each annual surveillance, the CAB shall verify that every release was assessed against both the preceding release and the most recent approved baseline under Section 12.4. Exceeding either materiality limit requires the major-change process before deployment, except for a justified emergency under Section 12.7; annual review is not permission to postpone that approval. If an unapproved exceedance is discovered, the provider shall notify the CAB and ESFC without delay, restrict affected unsupported claim use under Section 11 and obtain the necessary assessment and decision. The CAB may require expanded testing or a trigger assessment. Only approval of a major change resets the baseline; retrospective assessment does not erase the non-conformity.

## 12.10 Update Obligations for Labels and Claims

For an approved pathway change whose transition arrangements allow the preceding assessment to remain valid, traders shall update the affected display within 180 calendar days of notification that the product's rating category has changed, or earlier where the approved transition or applicable requirements demand. This period does not defer immediate suspension, withdrawal or correction of a known non-compliant or unsupported rating or claim. The provider shall distinguish scheduled valid-version transitions from correction and withdrawal notices and demonstrate their downstream effect under Section 9.6.

Where the change arises from an update to GWP characterisation factors, the 180-day window runs from the date of the provider's release that applies the new factors, regardless of whether ratings worsen or improve. For the full requirements governing characterisation factor adoption and the four-level hierarchy, see §5.5.

# 13. Governance and Fees

## 13.1 Purpose

This section defines the governance structure of the ESFC EmpCo Certification Scheme, the roles and responsibilities of each party, the processes for scheme development and change, and the fee framework applicable to participants. It addresses the requirements of Article 2 point (r) of Directive 2005/29/EC as amended by Directive (EU) 2024/825 for open access, stakeholder consultation, independent third-party verification, and non-compliance procedures.

## 13.2 Governance Structure

The scheme operates through four principal parties whose roles are structurally separated to ensure independence, impartiality, and compliance with EmpCo requirements.

**ESFC (Scheme Owner)** is the European Sustainable Food Coalition, the organisation responsible for developing, publishing, and maintaining the scheme. ESFC defines the requirements of the Rulebook and governs the scheme. ESFC does not certify providers or traders; certification is performed exclusively by independent Conformity Assessment Bodies.

**Accreditation Body i**s the national or internationally recognised accreditation body responsible for accrediting a conformity assessment body, where it is accredited, under Regulation (EC) No 765/2008, to ISO/IEC 17029 + ISO 14065 with ISO 14067 product scope, or to ISO/IEC 17065 where such accreditation exists. The Accreditation Body provides independent oversight of an accredited Conformity Assessment Body's competence and impartiality. ESFC does not select or control the Accreditation Body; providers and traders may verify a Conformity Assessment Body's accreditation status directly through the relevant accreditation body's public register.

**Conformity Assessment Body** is an independent body accepted by ESFC under Section 2.4 (operating to ISO/IEC 17029 + ISO 14065 with ISO 14067 product scope, or to ISO/IEC 17065, with or without accreditation under Regulation (EC) No 765/2008) that conducts initial certification, annual surveillance, re-certification, and change management review for certified provider pathways. The Conformity Assessment Body is structurally independent of both ESFC and any certified provider, with no shared ownership, directors, or financial interest.

**Certified Provider** is an organisation that operates a certified pathway under the scheme and holds the licence relationship with traders using that pathway. The certified provider is responsible for operating its calculation system in accordance with the Rulebook, maintaining its certification, and ensuring its traders are aware of and compliant with applicable scheme requirements.

**Traders** participate in the scheme at one of two tiers: individual assurance (per-trader licence, individually listed in the registry) or collective assurance (bound through the provider's pass-through clauses, recorded in the provider's internal trader register with aggregate statistics published on the portal).

**Scientific Committee** advises ESFC on standard-setting matters. Its composition and governance are defined in Section 13.9.

## 13.3 ESFC Responsibilities

As Scheme Owner, ESFC is responsible for:

1. drafting, publishing, and maintaining all scheme documents, including this Rulebook and its annexes
2. defining and maintaining the methodology requirements that certified provider pathways must meet

3. maintaining the impartiality policy and the structural separation of roles described in Section 13.2
4. administering the complaint and non-compliance process (Section 11)
5. publishing and maintaining the public scheme registry (Section 13.6)
6. conducting stakeholder consultation for scheme changes (Section 13.4)
7. publishing the annual scheme performance report (Section 13.7)
8. managing scheme-level correspondence on compliance, complaints, and appeals

ESFC does not act as a Conformity Assessment Body and does not audit or certify providers or traders. Where a product category rule (PCR) exists for a certified pathway's product category under ISO/TS 14027:2017 or an equivalent recognised process, the provider shall identify and follow it, or document that no applicable PCR exists; any deviation from an applicable PCR is disclosed in Annex A and assessed in Layer 2. No pathway claims conformity with the International EPD System under this scheme; where a method is taken from a PCR or from EPD programme rules, the pathway annex says so and states which of their impact categories it does not apply. Compliance with this requirement forms part of the Conformity Assessment Body's Layer 2 assessment.

## 13.4 Scheme Change Process

### 13.4.1 Categories of Scheme Change

Changes to scheme documents are categorised as follows.

**Editorial changes** are typographical corrections, formatting adjustments, or clarifications that do not alter the substantive requirements of the scheme. Editorial changes do not require consultation and are documented in the scheme changelog.

**Minor scheme changes** are procedural adjustments, updated references, or refinements within the existing framework that do not alter core requirements, methodology floors, or certification conditions. Minor changes require notification to registered stakeholders and a 30-day comment period before adoption.

**Major scheme changes** include new or modified methodology requirements, changes to claim type scope, modified certification conditions, new categories of participant, or any change that materially affects the rights or obligations of certified parties. Major changes require full public consultation per Section 13.4.2 and ESFC member approval before adoption.

**Pilot-phase expedited procedure.** Until the first full re-validation of a certified pathway under Section 9.7, ESFC may adopt a major scheme change by an expedited procedure where the change does not narrow any right or widen any obligation of a party already certified or registered under the scheme. Under the expedited procedure ESFC publishes the proposal with rationale, opens a comment period of at least 14 calendar days to registered stakeholders and Conformity Assessment Bodies, publishes the comments received and a reasoned response, and adopts the change by ESFC member decision with immediate effect. Each use is recorded in the scheme changelog.

Changes to a specific provider pathway are governed by Section 12, including the pathway consultation in Section 12.6.3 where required. They are not scheme changes unless the scheme requirements themselves are modified; such modifications additionally follow this section and the applicable Scientific Committee requirements in Section 13.9.

### 13.4.2 Public Consultation Process for Major Scheme Changes

1. ESFC publishes the proposed change with rationale and supporting documentation
2. A public comment period of a minimum of 60 calendar days is open to all stakeholders
3. A summary of comments received is published, anonymised where requested
4. ESFC publishes a response document addressing all substantive comments, indicating which were adopted and the reasons where comments were not adopted
5. The final revised proposal is published with an effective date, with a minimum of 6 months notice before any major change takes effect
6. All changes are documented in the scheme changelog with version number and rationale
7. An existing certified pathway is not retroactively invalidated by a major scheme change. Unless the change itself specifies otherwise, the pathway shall demonstrate convergence to the new requirement at its next annual surveillance under Section 9.3 or re-certification under Section 9.7, whichever is earlier

### 13.4.3 Stakeholder Categories

ESFC engages the following stakeholder categories in scheme development and consultation:

- ESFC members, including certified providers and traders, for practicability and market relevance
- Conformity Assessment Bodies, for auditability and scheme structure
- relevant independent experts, as needed for specific methodology or regulatory questions

## 13.5 Fee Framework

The scheme has three distinct cost components, each with a separate payer and billing relationship. These should not be conflated. Actual rates are not set out in this Rulebook; they are published in a standalone Fee Schedule document, which can be updated independently of the Rulebook without triggering the scheme change process.

### 13.5.1 ESFC Scheme-Use Fees

ESFC charges scheme-use fees to both certified providers and traders for use of the ESFC certification framework. These are two separate fees:

**Provider pathway fee:** charged annually to the certified provider for having a certified pathway recognised and listed under the scheme. This covers scheme maintenance, registry operation, complaint administration, stakeholder consultation, and governance costs attributable to the pathway.

**Trader claim-use fee:** charged for trader claim use for the right to make certified claims under the scheme, for listing in the public registry, and for access to complaint-handling and status-management processes. To minimise administrative burden, especially for certified providers with large numbers of food service operator traders, the trader claim-use fee is invoiced through the certified provider. The provider collects the fee from their traders and passes it to ESFC. How the provider structures this collection from traders is at the provider's discretion.

Both fees are uniform for comparable scopes of participation, non-discriminatory, and published in the standalone Fee Schedule document.

Scheme-use fees are a condition of scheme participation. They do not gate the Conformity Assessment Body's assessment process or influence licensing decisions. A provider or trader that has not yet paid fees may not be listed as certified, but outstanding fees are handled

through ESFC's administrative processes separately from the Conformity Assessment Body's independent findings.

### 13.5.2 Conformity Assessment Body Fees

The Conformity Assessment Body charges fees across five components, each covering a distinct type of engagement. Fees are charged directly to the certified provider unless otherwise stated. The Conformity Assessment Body determines its own rates; the components below define the structure, not the amounts.

**(a) Initial pathway validation fee.** Charged once at initial certification. Covers systemic review of the calculation engine, gap-filling logic, functional unit, rating shape, and LCI database per Layer 1 and Layer 2 requirements (Sections 5.2 and 6). Where Layer 1 and Layer 2 recognition from prior external reviews can be carried forward, the validation scope and fee are reduced accordingly.

**(b) Annual verification engagement fee.** Charged annually from year one, including in the same year as fee (a). Covers sampled claim verification per Section 8.6 minima within the engagement cycle of Section 9.2, plus system conformity review. Scales with total live claim volume under the pathway. Includes risk-based oversampling for traders under Individual Assurance; no separate per-trader audit is conducted.

**(c) Three-year re-certification fee.** Charged at the end of each three-year certification cycle. Covers renewal of pathway validation. Scope is typically narrower than the initial validation where no material changes have occurred in the cycle. Mid-cycle methodology changes are billed as event-triggered costs under fee (e) and do not constitute a re-certification.

**(d) Individual public portal entry fee.** Charged per trader with a confirmed individual public portal entry. This applies to traders under Individual Assurance as required, and to traders under Collective Assurance who have opted into individual listing per Annex C §C2.4. Covers confirmation processing and evidence routing. Flat amount per trader, not scaled by product count. Claim verification effort for those traders is covered under fee (b); there is no double-counting.

**(e) Event-triggered engagement fees.** Charged for focused engagements arising from Conformity Assessment Body involvement in major changes per Section 12.6.3, emergency changes per Section 12.7, and cumulative impact assessments per Section 12.9. Scoped to the changed component only and does not restart the three-year re-certification cycle.

No hidden charges or discriminatory pricing are permitted. The Conformity Assessment Body may invoice trader-level fees directly to the relevant trader or through the provider as a single billing point, depending on the arrangement agreed.

### 13.5.3 Scientific Review Costs

Where a provider pathway requires Layer 2 scientific review of methodology elements, this is a third cost component separate from both ESFC scheme-use fees and Conformity Assessment Body fees. Scientific review costs are paid by the provider to ESFC, which disburses them to the independent reviewer. This removes any direct financial relationship between the provider and the reviewer. Where an existing review is recognised by ESFC, no additional scientific review cost arises.

### 13.5.4 Transparency and Fairness

All fees applicable to participation in the scheme are publicly available. Fees are uniform for comparable scopes of work and applied without discrimination. The scheme is open to all providers and traders willing and able to meet the scheme requirements, consistent with the openness requirement of Directive (EU) 2024/825.

## 13.6 Public Registry

ESFC maintains a public scheme registry as the authoritative record of certification status under the scheme. The registry is publicly accessible and updated in real time to reflect current certification status, including periods of suspension or withdrawal.

For each certified provider pathway, the registry publishes: provider name and pathway version, the life cycle impact assessment method and version used, the life cycle inventory database or databases used, the Conformity Assessment Body, whether it is accredited for this scope (Section 2.4) and certificate identifier, the date of certification, last surveillance, and next re-certification, the complaint contact and access to the complaint procedure, the pathway change log, and a regression test summary for each release.

For certified traders, the registry publishes information at the level corresponding to their assurance mode: traders under Individual Assurance are listed individually with their certified product scope; traders under Collective Assurance are represented by aggregate statistics per provider (active, suspended and terminated counts, and register cadence), with individual status confirmation available on request. Verifiability of claims made under Collective Assurance is provided by the public registry entry for the certified pathway together with confirmation of a trader's status on request. No particular medium is prescribed on the claim itself, subject to the applicable disclosure and supporting-information requirements of Section 10.8. Transition registration. A trader working toward licensed claim use that cannot complete it before the Directive's application date may register its intent with ESFC, directly or through its provider. Registration records the engaged provider, claim scope and target date. It is limited in time, confers no claim or label rights and is never consumer-facing. ESFC publishes the list of provisionally listed pathways separately with their provisional status clearly identified; registration does not establish compliance or extend the Directive's application date.

## 13.7 Annual Scheme Performance Report

ESFC publishes an annual scheme performance report covering the preceding calendar year. The report includes: the number of certified provider pathways and certified traders, a summary of complaint volumes and outcomes, a summary of non-compliance cases and their resolution, a summary of scheme changes made during the year, and any material developments in the scheme's governance or regulatory context.

The report is published on the ESFC website and made available to all registered stakeholders. Commercially sensitive information and individual complainant identities are not disclosed.

## 13.8 Legal Structure

The European Sustainable Food Coalition is the scheme owner and publisher. The scheme is a voluntary scheme owned and administered by ESFC. Participating providers enter into a certification contract with the Conformity Assessment Body. Traders enter into a licence agreement with the certified provider. The Conformity Assessment Body and ESFC relationship is governed by a scheme participation contract. The scheme operates under European law; the specific jurisdiction for individual contracts is determined by the relevant entity's country of registration.

The governance structure is reviewed annually as part of the stakeholder engagement process, at each re-certification cycle, and when material organisational changes occur at ESFC or any certified provider.

## 13.9 Scientific Committee

The Scientific Committee advises on scheme requirements: the fixed Layer 2 question list, calibration thresholds, and the methodology floor. The Committee does not conduct or review specific pathway assessments; that function sits exclusively with the Conformity Assessment Body or an ad-hoc reviewer under Section 6.

**Composition.** The Committee comprises a minimum of three members, including an independent chair. Members serve in their personal capacity. A majority of members must have no current financial or contractual relationship with any certified provider or trader.

**Appointment.** Members are appointed by ESFC following a public call and published on the ESFC website. Appointments require ESFC member approval. Candidates must demonstrate expertise in life cycle assessment, environmental science, or food systems research.

**Chair.** The chair must be independent of ESFC and of all certified providers and traders, and is appointed by ESFC members.

**Terms.** Members serve three-year renewable terms, capped at two consecutive terms.

**Recusal.** A Committee member engaged as an ad-hoc reviewer on a specific pathway under Section 6.4 must recuse from any Committee decision directly affecting that pathway or the interpretation of requirements relevant to their ad-hoc review.

**Meetings and quorum.** The Committee meets when convened by ESFC, including for calibration updates and scheme changes affecting the methodology floor. Quorum is a majority of current members.

**Decision-making.** The Committee advises by simple majority. Dissenting views are recorded. Changes to the methodology floor, the Layer 2 question list, and the calibration guidance require Committee approval before ESFC may adopt them. ESFC may not override a Committee decision on these matters except by a supermajority vote of ESFC members, with the reasoning published. On all matters outside this scope, the Committee is advisory and ESFC documents its reasoning where it departs from Committee advice.

**Interim arrangement.** Until the Committee is constituted, Scientific Committee review is recorded as pending. Publications may be labelled "Scientific Committee approval pending" per the interim arrangement on the front page.

# Annex A: Provider Pathway Registration

Providers must complete and submit the Annex A Provider Pathway Registration Template, available as a separate downloadable document at:Annex A_Provider_Pathway_Registration_TEMPLATE

# Annex B: Provider Scoping Brief

Providers must complete and submit the Annex B Provider Scoping Brief Template, available as a separate downloadable document at:
Annex B_Provider Scoping Brief_TEMPLATE

# Annex C: Trader Binding Clauses

Normative, minimum floor for all trader-binding mechanisms; default form for provider customer terms integration.

## C.1 Purpose

This annex defines the minimum contractual provisions that a certified provider's customer terms (Allgemeine Geschäftsbedingungen / general terms of service / customer master agreement) shall incorporate in order for the provider's traders under Collective Assurance to be considered bound by the ESFC EmpCo Certification Scheme via provider-mediated binding (per Section 1.2.2 and Section 8.3).

A certified provider operating traders under Collective Assurance shall:

- Incorporate the clauses below (or substantively equivalent provisions in the local legal language of the provider's customer base) into its standard customer terms
- Document the implementation in Annex A (Provider Pathway Registration) (effective version, effective date, customer notification record)
- Maintain a complete internal trader register of customers bound under these terms, kept current at the cadence specified in Annex A (Provider Pathway Registration) (typically nightly), with status confirmation on request per C2.4

A provider that wishes to operate traders under Individual Assurance may bind them in either of two contractual forms, at the provider's choice:

- **Surface module (schedule or clause) within the provider's standard customer terms** — the same acceptance mechanism as the base clauses of this annex, extended to cover the on-pack claim surface: label/mark licence, packaging correction and withdrawal timelines (Section 12), pre-market notification of rating-relevant changes, and supplier evidence-chain duties. The module applies by claim surface in either tier; per-product data intake is an option the trader orders.

- **Individually negotiated per-trader licence agreement** — appropriate where the trader (typically a brand or retailer) requires bespoke commercial terms; it shall incorporate this annex's clauses and the same Individual Assurance-specific matters.

Both forms are equivalent under this scheme provided that: (a) acceptance of the applicable terms is attributable under the provider's documented acceptance mechanism (use-based acceptance suffices for the surface module; an Individual Assurance election is always individually recorded); (b) traders who elect Individual Assurance are individually listed on the public verification portal (the election records the consent), and all other traders are register-recorded with status confirmation on request; and (c) every trader is individually subject to sample-based verification of its claims by the Conformity Assessment Body. The contractual form does not alter the assurance level: Individual vs. Collective is the binding mode (Section 3.1) — not the contracting mechanism, not a data-quality level, and not a function of the claim surface.

## C2 Model Clauses (substance, not verbatim text)

The clauses below describe the substance each provider's customer terms shall cover. The exact legal wording is at the provider's discretion, subject to applicable law and to Conformity Assessment Body review at the initial certification audit.

### C.2.1 Scope of binding

By accepting these terms, the customer (the trader) acknowledges that:

- The environmental ratings, scores, and labels produced by the provider are issued under the ESFC EmpCo Certification Scheme, a third-party certification scheme designed to support compliance with EU Directive 2024/825 (Empowering Consumers Directive)
- The use of those ratings, scores, and labels in the customer's products, menus, marketing, or any other consumer-facing communication is subject to the scheme rules
- The customer is the trader under the scheme for the purposes of any consumer-facing claim it makes using the provider's output

### C.2.2 Compliance with claim rules

The customer agrees to comply with scheme rules concerning:

- Permitted and prohibited claim wording (Section 10)
- Visual presentation requirements (non-contradiction with the underlying metric, Section 10.8)
- Validity periods and re-assessment triggers (Section 12)
- Anti-cherry-picking rules: the assessed pathway and claim-use criteria shall define the assortment or other comparison group, surface and period to which a rating display policy applies before results are selected for display. Selective display based on favourable rating outcomes is prohibited within that defined group. Any permitted omission shall follow a documented, consistently applied reason independent of the rating outcome and shall not imply that unlabelled items were unassessed or that the whole assortment performs better than demonstrated. Voluntary hiding does not change the evidence or sampling population; a suppressed or unavailable rating confers no positive claim right. The meaning of an absent symbol and any grouped grade representation shall be specified in the public guidance under Section 10.8.
- Withdrawal of expired or invalidated assessments (Section 12)

The customer further agrees to present claims so that they accurately reflect the certified scope of the underlying assessment, and to comply with the on-pack surface module (Section C.1) for any on-pack or shelf claim, in either tier.. For the avoidance of doubt, Individual Assurance is a trader-level designation. A trader certified under Individual Assurance is individually listed on the public verification portal and individually bound via a per-trader licence or schedule; claim verification by the Conformity Assessment Body remains sample-based across the trader's portfolio, consistent with Section 8.6. Individual Assurance does not constitute per-product or per-claim certification.

### C.2.3 Duty to furnish information (Auskunftspflicht)

Beyond the sampling consent in Section C.2.3, the customer is under an affirmative duty to furnish information in connection with its use of scheme claims. The customer shall, on written request from the certified provider, from ESFC, or from the Conformity Assessment Body, provide the input data, supporting documentation, and records reasonably necessary to substantiate any environmental claim the customer has made using the provider's output — including product or recipe composition, sourcing and origin information, quantities, and the assessment or claim files as issued.

- Standard response deadline: within 10 business days of the request, unless a longer period is agreed in writing.
- Expedited deadline for authority and consumer-protection inquiries: where the request arises from an inquiry by a consumer-protection or market-surveillance authority, from a court, or from a substantiated third-party challenge to a claim, the customer shall respond without undue delay and in any event within 5 business days, or sooner where the authority's own deadline so requires. The customer shall additionally notify the provider promptly of any such inquiry it receives directly (see Section C.2.5).
- Scope and proportionality: requests shall be limited to what is reasonably necessary to substantiate the claim in question. Commercially sensitive information (e.g. full recipes,

supplier identities) furnished under this duty is handled confidentially and is not published in the public verification record (Sections 1.6 and 7).
- Data-minimising routing: the provider first draws on the data, assessment files, and register entry the trader has already submitted or that the provider already holds — which the trader authorises the provider to disclose, in confidence, to the scheme's bodies for certification, sampling, and complaint handling. The trader is asked directly only for what the provider does not hold: in particular the as-displayed form of a claim (packaging, menu, marketing material), supporting evidence not previously submitted, and notice of authority inquiries the trader receives directly.
- Consequence of non-compliance: persistent or unjustified failure to furnish requested information within the applicable deadline is a ground for discretionary suspension or termination under Section C.2.6 and, where it prevents substantiation of a live claim, may require withdrawal of the affected claim.

This duty gives the scheme a substantiation basis that EU Directive 2024/825 and applicable unfair-competition law expect a claim-maker to be able to meet on request (not legal advice).

### C.2.4 Audit and verification consent

The customer consents to:

- Sample-based verification of its claims by the Conformity Assessment Body designated by the certified provider, including (where reasonable and proportionate) requests for input data, supporting documentation, or remote access to recipe and product records (Section 9)
- Site visits or remote audits where the Conformity Assessment Body's sample selection or risk-based assessment indicates verification at the customer's premises is necessary, with reasonable notice (typically not less than 10 business days for non-urgent visits)
- Investigation by the certified provider or by ESFC when a complaint concerning the customer's use of scheme claims has been received (Section 11.4)

The provider is the customer's primary point of contact for sampling and complaint-related communications and forwards Conformity Assessment Body requests to the customer with the cooperation expected under these terms.

### C.2.5 Trader register and status disclosure

The customer acknowledges and agrees that:

- The provider maintains a complete trader register of customers bound under these terms (trader name, city where needed to disambiguate multi-site or chain operators, status active / suspended / terminated, joining and status-change dates), kept current from the provider's customer records at the cadence specified in Annex A (Provider Pathway Registration) (typically nightly)
- The register is disclosed in full, on request and in confidence, to the Conformity Assessment Body, ESFC, and competent authorities; it is the sampling frame for C.2.3 and the basis for scheme oversight
- The scheme's public verification portal publishes aggregate register statistics per provider (counts of active, suspended, and terminated traders, and the register cadence) — not the trader list
- Status confirmation on request: any person may ask, via the portal's verification contact, whether a named trader's scheme claims are backed by a certified pathway; the provider (or the scheme owner) confirms the trader's status without undue delay. Requests arising within a complaint procedure follow the timelines of Section 11.

Public listing of traders under Collective Assurance is not required. A trader may opt in to an individual public entry on the portal (name, city, provider link, status); opt-in listing is consent-based and revocable. Traders who elect Individual Assurance remain individually listed

per Annex C Section C.1 and Section 1.6.2, their election recording the consent. On-pack and shelf claims circulate without transactional context; and, for any named trader, by status confirmation on request."

Because the register is internal, disclosure is limited to scheme bodies and competent authorities (contract performance / legal obligation), and any public entry based on the trader's own election or consent, the data-protection surface is materially smaller than under a published roster; the provider documents its data handling in Annex A (Provider Pathway Registration) (not legal advice).

### C.2.6 Complaint cooperation

The customer agrees to cooperate with the certified provider and (where escalated) with ESFC and the Conformity Assessment Body in the investigation and resolution of complaints concerning its use of scheme claims. Cooperation includes:

- Providing reasonable information about the products, recipes, or communications subject to the complaint within the timelines specified in the provider's complaint handling procedure
- Implementing corrective actions (e.g. claim-wording changes, label removal, communication retraction) as required by the resolution
- Notifying the provider of any consumer-protection authority enquiries received in connection with scheme claims

### C.2.7 Termination and suspension authority

The provider is not responsible for proactively monitoring trader claim display in the market; that function sits with the Conformity Assessment Body through sample-based verification. The provider's compliance obligations with respect to traders include the mandatory and discretionary suspension authorities set out below, maintenance of an accurate trader register per C.2.4, and the downstream notification and implementation duties under Section 9.6. The corrective-action timelines and discretionary powers below do not postpone any immediate restriction or cessation of unsupported claim use required under Section 11 or an effective Conformity Assessment Body decision. The certified provider's authority to suspend or terminate the customer's access to scheme-relevant services (rating issuance, label use, register status) has two strengths depending on the trigger:

The provider shall suspend (mandatory) where:

- The Conformity Assessment Body issues a finding of non-conformity directly attributable to the customer's claim use, and the customer does not implement corrective actions within the timeline set by the Conformity Assessment Body
- The customer makes claims outside the scope of an active assessment (expired, suspended, or never issued)

The provider may suspend or terminate (discretionary) where:

- The customer materially breaches the rules in Section 10 (Claim and Label Use), Section 11 (Non-Compliance, Complaints, and Suspension), or Section 9 (Audit and Verification) of the scheme
- A complaint concerning the customer's use of scheme claims is not resolved within the timelines in Section 11 and the customer has not implemented agreed corrective actions
- The customer repeatedly fails to cooperate with sampling, complaints, or audit requests despite reasonable notice

Suspension or termination triggers the corresponding status update in the trader register and, where the trader has a public entry (Individual Assurance or opt-in), on the public verification portal.

The customer is entitled to appeal a suspension or termination decision via the appeals procedure in Section 11.7.

### C.2.8 Downstream use of certified methodology

The provider's certification under this scheme covers use of the certified methodology within the ESFC scheme only. A trader seeking to use the provider's certified methodology as the basis for certification under a different scheme must obtain the provider's prior written consent. The provider is under no obligation to grant such consent. Where consent is given, the provider bears no responsibility for the conduct or findings of any compliance assessment carried out outside the ESFC scheme.

### C.2.9 Continuing scheme compliance

The provider may from time to time update its customer terms to reflect updates to the scheme (e.g. new claim-wording rules, updated assurance-level definitions, new register or listing requirements). Updates are notified to the customer with a reasonable acceptance period (typically not less than 60 calendar days for material changes), after which continued use of the service constitutes acceptance under applicable law.

A customer that does not wish to accept an updated version of the terms is entitled to terminate the service contract during the acceptance period without penalty. Upon such termination, the customer's listing on the public verification portal is updated to “terminated” and the customer ceases to be bound by the scheme; existing on-pack labels and other consumer-facing claims must be withdrawn per Section 12. This preserves the customer's right under applicable law to refuse a unilateral material amendment.

### C.2.10 Disclaimer of Conformity Assessment Body direct relationship

These terms do not create a contractual relationship between the customer and the Conformity Assessment Body. The customer's compliance with the scheme is enforced through the provider's contractual relationship with the customer (these terms) and the provider's own certification agreement with the Conformity Assessment Body. An Individual Assurance licence is issued by the provider or the fallback licensing organ identified in Section 1.2.2 and does not by itself create a CAB-client relationship. Any separate CAB engagement shall be expressly agreed and shall remain distinct from the licence.

## C.3 Implementation Requirements for the Certified Provider

The certified provider shall:

- Adopt the clauses in C.2 (or substantively equivalent provisions in the local legal language of its customer base) in its standard customer terms before the start of ESFC EmpCo Certification Scheme certification.
- Notify existing customers of the new terms with a reasonable acceptance period (typically 60 calendar days for material updates), using the notification mechanism customary for the customer relationship (email, in-product banner, postal mail).
- Document the implementation in Annex A (Provider Pathway Registration), including: effective version of the terms, effective date, customer notification mechanism and date, current count of customers bound under the terms.
- Maintain the trader register and status-confirmation mechanism per C.2.4: keep the register current at the documented cadence (typically nightly from the provider's customer records); publish aggregate register statistics on the scheme's public verification portal; answer status-confirmation requests without undue delay; and operate individual public entries for traders under Individual Assurance and for traders who opt in.

- Notify the Conformity Assessment Body at the initial certification audit and at each annual surveillance of: customer-terms version, customer notification record, total trader count, suspended/terminated count, and a complaint summary specific to trader-level claim non-conformities.

## C.4 Audit by the Conformity Assessment Body

At the initial certification audit, the Conformity Assessment Body verifies:

- That the provider's customer terms incorporate the substance of C.2.1–C.2.8 (or equivalent provisions in local law). The Conformity Assessment Body confirms a clause-by-clause mapping (provider's clause numbers ↔ Annex C clause numbers) is documented in Annex A (Provider Pathway Registration).
- That the provider has a documented customer notification record sufficient to demonstrate that existing customers have been bound, including: notification mechanism (email / banner / postal), notification date, acceptance window, and a per-customer acceptance log. The Conformity Assessment Body spot-checks 5 randomly selected customer records against the provider's CRM to confirm the binding chain.
- That the trader register is complete, current, and exportable at the documented cadence, and that the portal's aggregate statistics match it. The Conformity Assessment Body picks 5 random register entries, verifies each against the provider's internal customer record (name, city, status, joining date all match), and tests the status-confirmation mechanism with 2 sample requests.
- That the provider's internal procedures for suspension and termination of trader access (per C.2.6) are documented and operational. The Conformity Assessment Body requests a walkthrough of one historical suspension case (or, for first-cycle audits, a tabletop walkthrough of how the provider would handle a hypothetical case).

At each annual surveillance, the Conformity Assessment Body:

- Reviews the customer-terms version log and any updates since the last surveillance, confirming that material updates triggered customer renotification per C.2.8.
- Reviews the trader complaint summary (per C.3 step 5) for patterns of non-compliance that would constitute a system-level concern. A pattern is identified where the same trader is the subject of more than 2 substantiated complaints in a 12-month period, or where the same complaint type recurs across more than 5% of the trader population.
- Spot-checks 5 randomly selected register entries against the provider's CRM (active traders correctly registered; terminated traders re-statused within the documented propagation lag), and confirms the portal aggregates and any public entries (Individual Assurance / opt-in) are consistent with the register.
- Reviews the provider's enforcement record (suspensions and terminations actually executed during the surveillance period) and verifies that mandatory suspensions per C.2.6 (Conformity Assessment Body findings, claims without active assessment) were executed in 100% of triggered cases within the documented timeline.
- Confirms that the average days-to-suspension after a triggering event is consistent with the timeline declared in Annex A (Provider Pathway Registration).

## C.5 Background and Precedent

The provider-mediated trader binding architecture in this annex follows established product-certification practice for schemes with downstream end-users. Comparable models include:

- MSC Consumer-Facing Organisation Standard — restaurants serving MSC-certified seafood are bound through Chain-of-Custody certification held by the organisation, with sample-based site audits rather than per-restaurant individual certification.

- Fairtrade National Fairtrade Organisation licensee model — brands signing Fairtrade licences with national Fairtrade organisations (FLOCERT being the conformity assessment body) act as the licence-issuing entity for downstream uses; retailers selling pre-labelled product do not need their own licence.
- Rainforest Alliance trader licence — certificate holders sign a licence that flows downstream to retailers and food-service operators of the certified product without requiring per-end-user certification.

In each case, the third party's contractual relationship is with the licence holder; downstream binding is mediated through the licence holder's contracts with traders. The same pattern applies under the ESFC EmpCo Certification Scheme, with the certified provider acting as the label-licence holder and the trader bound through the provider's customer tefrms.

# Review & Approval Audit Trail

| Nr. | Review stage | Status | Date |
|---|---|---|---|
| 1 | Working Group internal review | Completed | 20.08.2026 |
| 2 | Working Group approval | In Progress | |
| 3 | Scientific Committee review | In Progress | |
| 4 | Scientific Committee approval | Pending | |
| 5 | All-member vote | Pending | |

**European Sustainable Food Coalition (ESFC)**

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