

Cert Renewal + Transition, Certificate Renewal, Previsit planning Cert Renewal

Report for:

PT Molindo Raya Industrial

LR reference: JKT6018099 / 3378774

Assessment dates: 21-January-2020 - 25-February-2020

Reporting date: 04-May-2020

Client address: Jl. Sumber Waras No. 255,Lawang,Malang ,

ID

Assessment criteria: FSSC 22000 Food Safety v4.1,

FSSC 22000 Food Safety v5

Assessment team: Mochamad Iqbal
LR Client Facing Office: JKT Indonesia OU

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Attachments:

JKT6018099_APP_-FSSC5th_CRTrans_Mix.doc

This report was presented to and accepted by:

Name: Mrs Erlies

Job title: QA manager



01. Executive report

Assessment outcome:

Based on the assessment outcome the Assessment Team recommends the FSSC 22000 Food Safety v4.1, FSSC 22000 Food Safety v5 certification of PT Molindo Raya Industrial for the agreed scope.

The Assessment Team Leader confirms the contractual arrangements for FSSC 22000 Food Safety v4.1, FSSC 22000 Food Safety v5 are correct. This includes any changes required as a result of the outcome of the Stage 1 visit (including changes to the scope of assessment, duration of the Stage 2 visit, and duration of subsequent surveillance visits).

Continual improvement:

Not Applicable



Areas for senior management attention:

Not Applicable



02. Assessment findings

Where scheme requirement differs to the standard definition below, the scheme definition will take preference

Major Nonconformity

The absence of, or the failure to implement and maintain, one or more management system elements, or a situation which would, on the basis of the available objective evidence, raise significant doubt of the management to achieve: The policy, objectives or public commitments of the organisation, compliance with the applicable regulatory requirements, conformance to applicable customer requirements, conformance with the audit criteria deliverables.

Minor Nonconformity

A finding indicative of a weakness in the implemented and maintained system, which has not significantly impacted on the capability of the management system or put at risk the system deliverables, but needs to be addressed to assure the future capability of the system.

Reference number	3065142_JKAMIX01	Assessment Criteria (Clause)	FSSC 22000 Food Safety v4.1 (22002-1-5.3)		
Grade	Minor NC	Issue Date	25-July-2019		
Status	Closed	Process / Aspect	warehouse		
Location(s)		Jl. Sumber Waras No. 255,	Malang,ID		
Statement of N	Non Conformity	walls in warehouse found d	lirty		
Requirement		ISO TS22002-1 clause 5.3			
water trap			ound the wall in drum cleaning are were not smooth that made vater trap inside where the mould growth which resulted several lack spot on the wall		
Proposed correction, corrective action		correction : clean the mould			
and timescales		corrective action : improve walls condition Time scale a week after audit			
Correction		mould were found free from the wall as picture shown			
Root Cause analysis walls condition/d		walls condition/design was	not good		
Corrective act	ion	walls has been fixed with angel so no accumulate water trap, tha make easily dry.			
LR has reviewed and verified the implementation of actions taken.		Date of closure	25-November-2019		



Reference number	3065142_JKAMIX02	Assessment Criteria (Clause)	FSSC 22000 Food Safety v4.1 (22000-7.3.3.1)	
Grade	Minor NC	Issue Date	25-July-2019	
Status	Closed	Process / Aspect	incoming material	
Location(s)		Jl. Sumber Waras No. 255	5,Malang,ID	
Statement of N	on Conformity	raw material not equipped	with food safety acceptance criteria	
Requirement		ISO 22000:2005 clause 7	7.3.3.1	
Evidence It was found raw alcohol supplied from PT Enero was not equi wot COA in 2019, the last was attached during 2018 delivery. needs also to communicate the specification to the supplier. B not available yet		was attached during 2018 delivery. It		
Proposed correction, corrective action and timescales		Correction : ask the supplier for COA Corrective action : review hazard analysis Time scale A week after audit		
Correction		COa were provide after the audit such as shown for incoming in Se 2019 and Oct 2019		
Root Cause an	alysis	Hazard analysis were not	updated and reviewed	
Corrective action	on	Hazard analysis and FSSC documentation has been review by teal in Nov 2019		
	ed and verified the n of actions taken.	Date of closure	25-November-2019	



Reference number	3065142_JKAMIX03	Assessment Criteria (Clause)	FSSC 22000 Food Safety v4.1 (22000-7.4.2.2)	
Grade	Minor NC	Issue Date	25-July-2019	
Status	Closed	Process / Aspect	Hazard analysis	
Location(s)		Jl. Sumber Waras No. 255	5,Malang,ID	
Statement of N	on Conformity	miss hazard analysis from	the equipment	
Requirement		ISO 22000:2005 clause 7.	.4.2.2.	
Evidence It was found that inside fermentation tank was fix due to percoating inside, however this issue for peeled the coating was updated in hazard analysis yet.(7.4.2.2)		is issue for peeled the coating was not		
Proposed correction, corrective action and timescales		correction : update Hazard analysis Corrective action : review all process for Hazard analysis Time scale: a week after audit		
Correction		Hazard analysis has been maintenance process	updated by team and add input from	
Root Cause and	alysis	lack awareness by the production team for reviewing hazard from their activity		
Corrective action	on	review of Hazard analysis has been done in Nov 2019 also awareness from production department were coach internally by Q team		
	ed and verified the n of actions taken.	Date of closure	25-November-2019	



Reference number	3378774_JKAMIX01	Assessment Criteria (Clause)	FSSC 22000 Food Safety v5 (22002 1-18.2)	
Grade	Minor NC	Issue Date	25-February-2020	
Status	New	Process / Aspect	Access control	
Location(s)		Jl. Sumber Waras No. 255	5,Malang,ID	
Statement of	Non Conformity	Access control was not ef	fectively implemented	
Requirement		ISO TS22002-1 clause 18	3.2	
Evidence		(as seen during audit) for	ed in month of January 2020 and Feb 2020 new project boiler was not recorded well as dure HSE-01 and in PRP manual	
Proposed correction, corrective action and timescales		·	C: record for every visitor entering the plant CA: refresh knowledge to the security TS: 2 month after audit	
Correction				
Root Cause analysis				
Corrective act	tion			
LR has reviewed and verified the implementation of actions taken.		Date of closure		



Reference number	3378774_JKAMIX02	Assessment Criteria (Clause)	FSSC 22000 Food Safety v5 (22002 1-5.7)	
Grade	Minor NC	Issue Date	25-February-2020	
Status	New	Process / Aspect	warehouse	
Location(s)		Jl. Sumber Waras No. 255	5,Malang,ID	
Statement of	Non Conformity	measure for microbiology	cross contamination were miss by team	
Requirement		ISO TS 2002-1 clause 5.7		
Evidence		found during audit warehouse for storage yeast as raw material were mouldy due to leak and humid in the wall		
Proposed correction, corrective action and timescales			C: clean the warehouse and fix the wall CA: review and update the PRP program TS: a month after audit	
Correction				
Root Cause analysis				
Corrective ac	tion			
LR has reviewed and verified the implementation of actions taken.		Date of closure		



Reference number	3378774_JKAMIX03	Assessment Criteria (Clause)	FSSC 22000 Food Safety v5 (22002 1-5.3)	
Grade	Minor NC	Issue Date	25-February-2020	
Status	New	Process / Aspect	walls	
Location(s)		Jl. Sumber Waras No. 255	,Malang,ID	
Statement of	Non Conformity	PRP Internal structures rec	quirement were not followed adequately	
Requirement ISO TS 22		ISO TS 22002-1 clause 5.3	TS 22002-1 clause 5.3	
Evidence		Found acrylic wall in filling process room were broken		
Proposed correction, corrective action and timescales		·	C: replace the acrylic used CA: review PRP monitoring system TS: A week after audit	
Correction				
Root Cause analysis				
Corrective action				
LR has reviewed and verified the implementation of actions taken.		Date of closure		



Reference number	3378774_JKAMIX04	Assessment Criteria (Clause)	FSSC 22000 Food Safety v5 (22002 1-9.3)	
Grade	Minor NC	Issue Date	25-February-2020	
Status	New	Process / Aspect	incoming packaging	
Location(s)		Jl. Sumber Waras No. 255	5,Malang,ID	
Statement of I	Non Conformity	product packaging	reject drum for incoming that used for	
Requirement		ISO TS22002-1 clause 9.3	3	
Evidence		prior to clean for several d	that empty plastic drum received were kept days until used, however during receiving th to check whether the condition is good or	
Proposed correction, corrective action and timescales			C: established the record during receiving CA: review incoming process for packaging TS: A month after audit	
Correction				
Root Cause a	nalysis			
Corrective act	ion			
	red and verified the on of actions taken.	Date of closure		



03. Assessment summary

Visit generic objective:

This was a Cert Renewal + Transition, Certificate Renewal, Previsit planning Cert Renewal visit, conducted against objectives previously notified to the client. The objectives of the next visit, including any applicable visit specific objective (theme / focus), are confirmed in the audit plan attached to this report.

Client attendees at the opening and closing meeting:

Not Applicable

Visit specific objective:

Not Applicable

Introduction:

Not Applicable



04. Next visit details

Standard(s) / Scheme(s)	FSSC 22000 Food Safety v5	Visit type	Surveill	ance 1
Audit days	3.25 DAY	Due date	FEB,20	21
Team				
Site			Audit days	Activity codes
Jl. Sumber Waras No. 255, Malang, ID 3.25 DAY 096531,0962			096531,096202	

Standard(s) / Scheme(s)	FSSC 22000 Food Safety v5	Visit type	Follow (ıρ
Audit days	0.25 DAY	Due date	MAY,20	20
Team				
Site			Audit days	Activity codes
Jl. Sumber Waras No. 255,		.25 DAY	096531,096202	



05. Appendix



FSSC 22000 Food Choose an item. Choose an item.

Index:

Executive summary
Organizational profile
Audit details
Checklist ISO 22000
Checklist PRP program
Checklist Additional FSSC requirements
Audit Programme/Plan
Audit report considerations

Executive summary		
Audit recommendation		
Visit type of this audit	Certificate Renewal	
Conclusion	Continue certification	

This is Certificate renewal and Transition visit to FSCC 22000 Food ver5. In overall, the organization has shown conformity meet the management system based on FSSC 22000 Food version 5.0 requirements.

The company is recommended for the transition to FSSC 22000 Food version 5.0 requirements. Proposed corrective actions have been given for the Minor non-conformities raised and it was reviewed found adequate. Evidence of the corrections and corrective actions shall be sent to the CB for remote review within 3 months after the audit.

Confirmation that the audit	
objectives have been fulfilled.	this visit objectives
The company fulfils:	

Summary of the audit:

- -There are total 5 new Minor Non-conformities raised.
- -The FSSC22000 management system has been designed in a way comply with the FSSC22000 Food ver5 requirements.
- -The corrective actions have been initiated from the internal audit and external audit findings as a PDCA cycle tools and complete FSMS.
- -There was evidence of meeting the statutory, regulatory and legal requirements.
- -Review and monitoring of the Food safety Objectives done on periodic basis and action is ongoing for the continual improvements.
- -The implementation of the pre-requisite program and additional requirements of FSSC was in place.

Unresolved issues:	
NI:I	
Nil	

Significant changes since last audit:

There are minor changes made to the documentation such as update on the process flow, hazard analysis and CCP and OPRP plan summary. However no major changes to the system.

Recalls and withdrawals:

No actual recall and withdrawal so far either initiated by regulatory department or customer. Based on the recall procedure established, exercise as mock recall need to be taken at least once a year, observed last mock recall were taken on Jan 2020. Generally, the recall exercise was found effective and traceable to the raw material receiving.

Summary of findings (indicate numbers only)					
Critical nonconformities (CR NC)	0				
Major nonconformities (Major NC)	0				
Minor nonconformities (Minor NC)	5				

Focus visit (only in case of Surveillance 2):

Review:

Trends information on (food safety) complaints and other performance indicators, system documentation improvement, lessons learned from audits, trends in LRQA findings

Preview:

Longer term expectations of the company related to strategy and objectives, business and operational risks on food safety issues, review of use of their FSMS

Planning:

Specific topics or objectives for the coming certification cycle Necessity to perform extra Stage 1? Exact planning: see Audit Program Plan

Organization profile							
Certified organization							
Registration number	1018050						
Contact person	Mrs Erlies Sartini						
Email contact person	Erlies.sartini@mri.co.id						
General description of							
audited organization	The company is manufacturing of Etanol which intermediate product for is consumed. (need further process or added to other product before consumed). The plant is constructed and designed that meet the food hygiene standards. The company is located at the industry area with factory built up area about 4 Hectare. Products are supply to local markets and export other country with mostly the customer is beverages company. The food safety system of the company has been established since 2006. The company is certified for ISO 9001 by LRBA.						
Seasonal activities	Nil						

Head Office	Not Applicable
Registered legal name	
Trading name(s)	
Registration number	
Location	
Contact person	
Email contact person	
Number of sites	
Head office functions	Only fill out this section if HO "with pertinent functions" is selected.
Multi-site activities	Only fill out this section if HO "multi-site certification" is selected.

Off-site activities	Not applicable
Registered legal name(s)	
Trading name(s)	
Registration number(s)	
Location(s)	
Contact person	
Email contact person	
Activities at locations	

Audit details							
Audit details							
Certificate number		This section not to be completed by the auditor					
CB Name and office	Llo	yd's Register Clic	k or tap here	to enter 1	ext.		
location (city)							
Audit language	Eng	glish and Bahasa ,	as mutually	agreed du	ıring a	udit	
Audit scope							
Food Chain Category	CIV	/	Choose an	item.	Choo	ose an item.	
Scope statement							
Head Office reference to	No	t applicable					
be added to the scope (if							
applicable)							
Exclusions (if applicable)	NA	\					
	Do	es the scope of	Yes		If no	then document the	
	cer	tification			actions necessary in		
Varification scans	cor	ntinue to be			relat	ion to the scope in	
Verification scope statement	арр	propriate to the	the		the e	executive summary	
Statement	act	ivities /	of t		of th	the report and amend	
	pro	oducts / services			the APP as required.		
0		organization:					
Audit team, role and atter	ndan	nce sheet					
Name		Role in audit team		Opening		Closing meeting	
				meeting			
Mochamad Iqbal		Team Leader		\boxtimes		\boxtimes	
None							
Organization representati	ves,	function and atte	ndance shee	et			
Name		Role in audit team		Opening		Closing meeting	
				meeting			
Mrs Erlies S.		Top Management/QA mgr.		\boxtimes		\boxtimes	
Mr. Indrayanto		Production Manager		\boxtimes		\boxtimes	
VIs Kartika		Quality Manager		\boxtimes			
Mr. Umar		Engineering Manager					
Mr Yudi	Logistic Manager					\boxtimes	
Audit specifications	Audit specifications						
Visit type of this audit		As defined in the		-			
Audit objective(s)				•			
		22000' as separat		<u> </u>	ort pa	ackage.	
ARForm022/0 Report: JKT Indonesia OUJKT6018099/3378774 - 09-04-							

ARForm022/0 FSSC/Food v5

Audit criteria	The requirements of: a) ISO22000:2018 b) Pre-requisite program applicable to the food safety category c) FSSC22000 V5 part 2 Additional Requirements In addition: - The defined processes and documentation of the management system developed by the organization - Statutory/ regulatory requirements applicable to the type of organization - Customer requirements FSMA requirements Choose an item.				
Audit complexity					
Audit complexity	Standalone FSSC 2:	2000 au	dit		
	☐ Combined/Integrated with other standards — Provide details: ☐ Joint with another audit function (i.e. regulatory inspectors —				
	Provide details:	addit id	11011011 (1101105)	anatory mopeetors	
Audit dates, times and locati	ons (where applicable)				
Audit dates/on-site time for	18/02/2020	8 hrs		Mochamad Iqbal	
FSSC	19/02/2020	8 hrs		Mochamad Iqbal	
	20/02/2020	8 hrs		Mochamad Iqbal	
	24/02/2020	8 hrs		Mochamad Iqbal	
	25/02/2020	8 hrs		Mochamad Iqbal	
Total time on-site (hours)	40 hrs				
Head Office (if applicable)					
Audit time deviations	Identify reduction or e	extra tim	e applied and c	letail justifications.	
Additional time for off-site activities	0,25) hrs				
Number of HACCP Studies	1				
Number of Employees (FTEs) in total	115				
Number of shifts	3				
Employees per shift (FTE) + office	100				

Check	Checklist ISO 22000:2018							
Specific	Specific for Stage 1 only (review of client's preparedness for Stage 2)							
	In case of a Stage 1 visit, it is mandatory to report <u>at minimum</u> on the following ISO22000:2018 clauses. Throughout the checklist the clauses are indicated with ^{1 or 2}							
4-10	System regarding organizational risks and method(s) of control ¹							
7.5	Management system documentation ²							
8	Operational planning and control ¹							
9.2	Internal Audit ²							
9.3	Management Review ²							

ISO 220	00:2018	Conform*		Remark
Clause	Requirement	Yes	No	If No – detail NC reference
				Justify "not applicable" clauses
4	Context of the organization ¹	\boxtimes		
4.1	Understanding the organization and its	\boxtimes		
	context			
4.2	Understanding the needs and	\boxtimes		
	expectations of interested parties			
4.3	Determining the scope of the food	\boxtimes		
	safety management system			
4.4	Food safety management system	\boxtimes		

Summary:

Sighted the company has identified the internal and external issues. Interested parties identified such as stakeholder, employees, regulator, customer and supplier. The internal and external issues including the opportunities was addressed and based risk table the risk category medium, high risk or threat being documented.

The scope of the system was defined which cover from the receiving, processing, packing until delivery of product.

No external storage/warehouse or out source of the process.

ISO 22000:2018		Conform*		Remark
Clause	Clause Requirement		No	If No – detail NC reference
				Justify "not applicable" clauses
5	Leadership ¹	\boxtimes		
5.1	Leadership and commitment	\boxtimes		
5.2	Policy	\boxtimes		
5.3	Organizational roles, responsibilities	\boxtimes		
	and authorities			

Summary:

Food Safety Policy was established by the Top Management and no change since initial audit. It was communicated to the staff during the induction programmed. Policy was signed by MD and display such as in meeting room, lobby rom and other strategic location

The organization structure was sighted as on company manual. QA Manager has been appointed as Food Safety Team Leader. The role and responsibilities were maintained. Personnel to liaise and update on the external statutory and regulatory requirement has been identified.

ISO 22000:2018			rm*	Remark
Clause	Clause Requirement		No	If No – detail NC reference
				Justify "not applicable" clauses
6	Planning ¹	\boxtimes		
6.1	Actions to address risks and	\boxtimes		
	opportunities			
6.2	Objectives of the FSMS and planning	\boxtimes		
	to achieve them			
6.3	Planning of changes	\boxtimes		

Summary:

From the issues identified, the action to address the risk and opportunities was documented in the log register it is combined also with requirement of ISO 9001:2015. The Food Safety Objectives established for example training, customer complaint, PRP compliance and comply with the food safety requirements. The action plan to achieve and how to measure/evaluate was included. It was reviewed in the Top Management in the Management Review.

ISO 22000:2018		Conform*		Remark
Clause	Requirement	Yes	No	If No – detail NC reference
				Justify "not applicable" clauses
7	Support ¹	\boxtimes		
7.1	Resources	\boxtimes		
7.2	Competence	\boxtimes		
7.3	Awareness	\boxtimes		
7.4	Communication	\boxtimes		
7.5	Documented information**	\boxtimes		

Summary:

Food Safety team found to be competent and has been trained with cover multi-disciplinary of teams. Relevant training to the critical position found adequately planned and carried out by FSSC team. Records for training were also maintained well by HR department. Training effectiveness evaluation carried out upon training completion via quiz & training evaluation. The activity includes introduction to food safety system and its implementation.

Training to the transition to FSSC 22000 v5 sighted done on 9 Oct 2019. Other training such as PRP, HACCP analysis, emergency, Cleaning & Sanitation was done.

The Food safety manual was established, documented, implemented and maintained. Changes made to the documentation to upgrade the FSSC 22000 v5 was sighted done as per procedure. Master list of documents and records are updated. External documents master list available which include the list of regulatory and exporting country standard. Records sampled throughout the audit are found legible, retrievable and identifiable.

The system was found no major change.

ISO 22000:2018		Conform*		Remark
Clause	Requirement	Yes	No	If No – detail NC reference
				Justify "not applicable" clauses
8	Operation ¹	\boxtimes		
8.1	Operational planning and control ²	\boxtimes		
8.2	Prerequisite programs (PRPs)	\boxtimes		
8.3	Traceability system	\boxtimes		
8.4	Emergency preparedness and response	\boxtimes		
8.5	Hazard control	\boxtimes		
8.6	Updating the information specifying	\boxtimes		
	the PRPs and the hazard control plan			
8.7	Control of monitoring and measuring	\boxtimes		
8.8	Verification related to PRPs and the	\boxtimes		

	hazard control plan		
8.9	Control of product and process	\boxtimes	
	nonconformities		

Summary:

The characteristic and intended used of the finished products were maintained in the documentation . Sample of raw material specifications was reviewed.

The potential food safety hazard (biological, chemical, physical and allergen) was assessed in the hazard analysis done for all the raw materials

During site visit the process flow for ethanol was reviewed. The documented flow diagram was found no discrepancies.

Reviewed of the CCPs:

CCP1 Distillation

It was done by checking the pressure minimum for the process. The production parameter was found meet the minimum pressure required . The monitoring records were found maintained. The records were checked and found in order.

OPRP identified was filtering during filling process storage. Checked before and after filing wer recorded well

Calibration

Equipment calibration schedule which cover the production and lab equipment 2020 was reviewed. Master thermometer was calibrated by external calibration company on yearly basis.

Emergency Preparedness & Response

Procedure was established, and tested annually. no emergency situation found since initial assessment

Inspection & Testing

Microbiological testing of finished product was done for TPC, yeast & mould, coliform and E. coli. Result was found acceptable.

Annual test for heavy metals and preservative test. Annual full water test for microbiological and chemical parameters was done and result was acceptable.

Monthly swab test of equipment and hands for food handler in regrads to TPC Yeast & mould, coliform, E. coli and air testing is done.

ISO 22000:2018		Confo	rm*	Remark
Clause	Requirement	Yes	No	If No – detail NC reference
				Justify "not applicable" clauses
9	Performance evaluation ¹	\boxtimes		

9.1	Monitoring, measuring, analysis and	\boxtimes		
	evaluation			
9.2	Internal audit ²	\boxtimes		
9.3	Management review ²	\boxtimes		
Summa	ry:			
Manage	ment review date is 16 Jan 2020 it is cond	lucted y	early b	ased on the required agenda
stated in	n the procedure. IQA was conducted in 2 [Dec 201	.9 for ar	nnually against FSSC v FSSC v5.
regulato	ory audit conducted by trade ministry due	the nat	ure of	product, The food /product
safety o	bjectives mainly achieved for customer co	mplain	t and fo	ood safety defect that resulted
zero until Feb 2020.				
No Customer complaint has been received since previous year 2019				

ISO 22000:2018		Conform*		Remark
Clause	Requirement	Yes	No	If No – detail NC reference
				Justify "not applicable" clauses
10	Improvement ¹	\boxtimes		
10.1	Nonconformity and corrective action	\boxtimes		
10.2	Continual improvement	\boxtimes		
10.3	Update of the FSMS	\boxtimes		

Summary:

Corrective actions have been taken on the findings raised from the audit for the improvement on 1 major and 7 minor NC and was found closed. Customer complaint was raised ,4 issues related to foreign material found embedded in product. Corrective actions have been initiated and issues have been closed.

^{*}Indicate compliance (Y), non-conformance (N), nonconformities to be detailed in findings log.

ISO 220	02:1: 2009	Confo	rm*	Remark		
Clause	Requirement	Yes	No	If No – detail NC reference		
				Justify "not applicable" clauses		
4	Construction and layout of buildings	\boxtimes				
Summary:						
No evidence of the potential contamination from the surrounding and site environment.						
The buil	The building was maintained in good condition.					
5	Layout of premises and workspace	\boxtimes				
	zayout of premises and tronspace					
Summa	rv:					
	•					
Product	ion area was found suitable for the industi	ry. Mate	erial flo	w and staff movement does not		
pose cro	oss contamination.					
6	Utilities – air, water, energy	\boxtimes				
Summa	ry:					
	pressor is used limited however the maint					
-	ssed air that may contact with product or I	packagi	ng (con	tact surface) is very limited or		
	ay not contacted sed is a government water and it is potabl	o wator	moot t	the local Indonesia Pegulation		
	MENKES 492 year 2010. Result of microbio			_		
accepta		.06.00.,	py5.60	a. aa ceca. aa , 5.5 was		
Lighting	was covered to avoid glass breakage and	monito	red wel	l by team.		
7	Waste disposal	\boxtimes				
Summa	•					
	ire for HSE manage waste were established	•		·		
•	and liquid waste disposal, waste water treatment by separating solid and waste water is treated					
with biological and chemical, before goes to waste treatment water in drainage were equipped						
	with grease trap done by service contractor. It is also assessing by environment health ministry.					
8	Equipment suitability, cleaning and	\boxtimes				
	maintenance					

Summa	Summary:					
Record of the maintenance activity was well maintained for each machine. Mostly the						
maintenance activity was maintained by permanent workers Except for big maintenance such as						
overha	overhaul. Records for preventive maintenance for distillation column and fermentation area					
also boiler and others were kept well, Cleaning checklist was established after maintenance						
activity and before equipment used,						
9	Management of purchased materials		\boxtimes			
Summa	ary:					
No major changes to the approved vendors under food safety requirement, 6 out of 80 supplier						
_	s high risk that mainly supply for material c		-			
	out and monitored in 6 monthlies. Observ		-	•		
	ment has been conducted by the FSSC team			• •		
	eport, letter of guarantee, review of applica		_	• •		
	ation. For Medium risk supplier it will be ir	-		= -		
	ary packaging material was carried out, inc					
	s general control that outlined in the proce	_		•		
	it to the Incoming material warehouse stor		a, has l	been conducted and found to be		
	xcept one for yeast storage.	J	·			
Ü	, ,					
10	Measures for prevention of cross-	\boxtimes				
	contamination					
Summa	ary:					
Microb	iological, chemical and physical hazard was	s identii	ied, an	d analysis was conducted as per		
schedu	le. Result so far was found acceptable.					
No mat	terial contain allergen has been declared in	the do	cument	tation. The material was		
protect	ted however moldy wall was evidence in ye	east war	ehouse	e as detail in finding log section.		
See NC Jkamix 02						
11	Cleaning & Sanitizing	\boxtimes				
Summa	ary:	1		1		
The cle	aning programmed has specified the areas	/items	to clear	n, frequency, chemical used if		
require	ed, monitoring, etc.					
Daily cl	eaning & sanitation schedule and master li	st is in	order. F	Record was maintained.		
CIP pro	cess was carried out as per planned. Overa	ıll produ	uction o	cleanliness was maintained and		
records	records available. Mostly production process is closed circuit, except filling process.					

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Storage of cleaning chemical is in the separate area.

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12	Pest control	\boxtimes				
Summa	Summary:					
Pest cor	ntrol ducted by certified pest controller co	mpany i	named	Rent To Kill pest management		
services	. The activity is on weekly frequency, and	covere	d for ro	odent control, spraying (ant		
control,	cockroach control), minimal pest activity a	at the p	lant are	ea. UV light trap available in the		
product	ion and warehouse was found in good con	dition.	MSDS f	or pest chemicals found		
maintai	n. No pest infestation was evidence from t	he site	visit.			
13	Personnel hygiene and employee	\boxtimes				
	facilities					
Summa	ry:					
Staff hy	giene was checked on site and found in ord	der. Sta	ff and v	visitor entering the production		
complia	nce to the procedure. Staff was not allowe	ed eatin	g at pro	oduction area. Staff changing		
room w	as available before entering the production	n room.	. The la	undry was managed by the		
compan	y.					
	on site and found in general the personal		-			
	s send for medical check up annually to en	sure th	eir heal	Ith status for handing food		
product						
I						
4.4	Dannauli					
14	Rework					
Cumana	<u> </u>					
Summa		tion nr	0000			
THEIR IS	no rework implemented along the produc	Lion pro	ocess			
15	Product recall procedures					
13	roduct recan procedures					
Summary:						
Mock recall procedure has been established and required for annually tested. Last was						
conducted in January 2020 to customer name PT Sumber Kita Indah. During the audit an						
exercise was conducted for traceability on product ethanol; shipped On January 2020 also with						
production date 2 nd week of December 2019. The exercise was finished with 2 hours, due to						
support goo SAP system						
16	Warehousing	\boxtimes	П			

Summa	Summary:				
Finished goods are adequately identified with the batch number from finish product tank. It is also control for the production date. Finished goods are kept in the designated tank. Finished goods are control through SAP system. Stock are picked for delivery accordingly to FIFO practice.					
17	Product information/consumer	\boxtimes			
	awareness		_		
Summa	ry:				
Product	is ethanol commonly used by beverages c	ompan	y. The p	oroducts information	
establis	hed are noted as per customer and legal re	equirem	ients. P	Procedure in place to ensure the	
	tion is correct.	1		,	
18	Food defense, biovigilance and	\boxtimes			
	bioterrorism				
Summa	Summary:				
Food defense procedure established for the plant areas, which include CCTV monitoring. Food					
	safety team is a food defense team.				
•		ntified a	nd four	nd adequate	
Training was done to team. Control measures identified and found adequate.					

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^{*}Indicate compliance (Y), non-conformance (N), nonconformities to be detailed in findings log; detail any not-applicable clauses with reasons

FSSC 22	000 Additional Requirements	Confo	rm*	Remark	
Clause	Requirement	Yes	No	If No – detail NC reference	
				Justify "not applicable" clauses	
2.5.1	Management of services				
Summa	ry:	I	1		
Externa	l lab testing for pesticide and chemical par	ramete	r were i	required accredited as define in	
the prod	cedure, also other services such as pest co	ntrol a	re asses	ss detail in risk and opportunities	
defined					
		1			
2.5.2	Product labelling	\boxtimes			
Summa	•				
•	ific Labelling required for the product also	•			
	ad or plastic drum with lot number, howev	er int t	he COA	all information is identified	
clearly.					
		1			
2.5.3	Food Defense				
Summa	•				
	efence procedure (SOP QA-FD -01) define p		•	·	
•	product and mitigation/ measure to control			·	
	oducts, food defense team was comprise (er, QA Manager, Plant Manager, and HR Se				
_	security (security guard control), inside se		_	•	
	re/software, logistic, manufacturing/proc	•	•	• • • • • • • • • • • • • • • • • • • •	
food de		ess pia	iii. CCi	v also installed to support this	
1000 00	iciisc				
2.5.4	Food fraud mitigation		ПП		
Summary:					
Food fraud mitigation process was conducted based on history of risk, the product has been					
screened for yeast and process of separating finish product and not food product, Packaging					
supplier also asses for the fraud in term of resin used in plastic drum. Vulnerability material					
assessment was carried out and review on yearly basis covered for main raw material.					
	• •				

2.5.5	Logo use					
Summary:						
Not use	d at product packaging, use is on the com	pany br	ochure	and business card.		
2.5.6	Management of allergens (C, E, FI, G, I & K)					
Summai	γ:					
There is	no allergen used for material and packag	ing by p	lant an	d its declare in the manual,		
althougl	h allergen management program were est	tablishe	d.			
		ı				
2.5.7	Environmental monitoring (C, I & K)					
Summai	•					
	onitoring (weekly, and monthly) for equip			illing process room were		
	ed and recorded by QC, no deviation found	•	-	Acculation DEDNATNIKES 402 VEAD		
	est (full parameter) is done yearly as requ	-				
Enginee	ater filter change (backwash daily), filter r	neula c	nange	yearry, as documented by		
Enginee	Tilig					
2.5.8	Formulation of products (D only)		П			
Summai						
	•					
2.5.9	Transport and delivery (FI only)					
Summai						
Julillial	у.					

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^{*}Indicate compliance (Y), non-conformance (N), nonconformities to be detailed in findings log; detail any not-applicable clauses with reasons

Audit details previous audit						
Audit type	Surveillance /Focus Visit					
Audit date(s)	23-26 July 2019					
CB conducting	Lloyds Register					
Closure of NC's from	Yes For details of findings, see findings log					
previous audit						

Audit Programme/Plan (LRQA)

Both the audit plan and the programme are dynamic and must be in line with the client's developments. Any (last minute) changes are possible with valid reasons like e.g. changes with the client, processes, management review results etc. Prior to the closing meeting the audit team should (re)confirm the programme and identify any changes concerning e.g. changes to the management system, extent, time or dates of the audit, competences etc.

or dates or the data, compet						
	CR Visit	SV1	Sv2/F		CR	
Visit Type	+Transit		V			
	ion					
Start Date	18 Feb	TBA	TBA		TBA	
	2020					
End Date	25 Feb	TBA	TBA		TBA	
	2020					
Audit Days	5.25	3.25	3.25		4.25	
Separate assessment plan?	N	N	N		Z	
Any change in workforce	N	N	N		Ν	
numbers That may impact visit						
duration (if yes add new						
number)						

The generic audit objectives and team responsibilities are included in the Client Information Note 'Assessment Process'. The assessment standard and roles of the audit team are defined in the assessment visit confirmation to the client by LRQA. Any revised scope will be as agreed in formal correspondence between LRQA and the client or defined in this section of the previous LRQA visit report. Where identified above see separate assessment plan (latest issue) for further detail. Any additional observers will be as formally communicated to the client in writing. The audit criteria consist of the assessment standard and the client's management system processes and documentation.

Process / aspect / theme / location

Final selection will be determined after review of management elements and actual performance.

Final selection will be determined	aπer rev	iew or manage	ement elements and acti	1' 1 , 1
Opening meeting	✓	✓	✓	✓
Closing meeting	✓	✓	✓	√
Changes to organizational context ⁽²⁾	✓	✓	✓	✓
Management Review	✓	✓	✓	✓
Internal Audits	✓	✓	✓	✓
Continual Improvement	✓	✓	✓	✓
Management of change	✓	✓	✓	✓
Corrective action	✓	✓	✓	✓
Preventive Action ⁽³⁾	✓	✓	✓	✓
Complaint Management	✓	✓	✓	✓
Use of Logo (LRQA & Accreditation Marks)	✓	✓	✓	✓
Performance against the client management system objective	✓	✓	✓	✓
Product characteristics and intense use, flow diagram; process steps	✓	✓	✓	✓

and control measures, Hazard Analysis ,HACCP Plan & Operational PRPs plan, Validation & Verification Emergency preparedness and response include Withdrawal /recall /Mock test		✓		✓				
Documentation for FSSC 4.1 version include Food fraud and Food defense	V						~	
Production Ethanol and filling process	✓	✓		✓			✓	
Warehouse Raw material, Finish good and supporting material include delivery	✓						✓	
PRPs: Infrastructure and work environment, Waste disposal control, Pest control, Water control, Glass control ,Personal Hygiene and health control, Cleaning & sanitation program,	✓	√		√			√	
QA/ Laboratory	✓	✓		✓			✓	
Maintenance / Calibration	✓							
Control of document and record	✓	✓		✓			✓	
Purchasing including management outsources	✓	√		✓			✓	
* Complete the list of organisation (parts), departments and/or processes of the different locations								

Note: if the visit involves more than one team member and/or is more than one day duration, an additional plan detailing the activities of each member of the team on each day will be required.

Confidentiality

We will treat the contents of this report, together with any notes made during the visit, in the strictest confidence and will not disclose them to any third party without written client consent, except as required by the accreditation authorities.

Sampling

The assessment process relies on taking a sample of the activities of the business. This is not statistically based but uses representative examples. Not all of the detailed nature of a business may be sampled so, if no issues are raised in a particular process, it does not necessarily mean that there are no issues, and if issues are raised, it does not necessarily mean that these are the only issues.

Legal entity

The accredited legal entity and client facing office that has provided the assessment service in this report is referenced in the applicable agreement for this service.

Generic audit objectives and team responsibilities

The generic audit objectives and team responsibilities are included in the Client Information Note 'Assessment Process'. Any visit specific objectives for the next visit will be recorded in the report of the previous visit and will be addressed through the visit plan for that visit. The assessment standard and roles of the audit team are defined in the assessment visit confirmation sent to the client.

Areas of concern at stage 1

If during the stage 1 assessment, the auditor finds areas of concerns which could have a negative impact on the outcome of stage 2, the assessor will define these as non-conformities in the assessment findings table.

Audit report considerations							
LRQA Report considerations	Y/N/NA	Reference made if Yes	Ref:				
Have there been any deviation from the original assessment plan?	No	If yes detail these in the Audit Statement section of the report along with the reasons for the deviations					
Have there been any significant issues impacting on the audit programme?	No	If yes detail these in the Audit Statement of the report and amend the APP					
Have there been any significant changes that affect the management system of the client since the last audit took place?	No	If yes detail these within the Audit Statement section of the report.					
If applicable, has the organization implemented effective corrective action(s) regarding previously identified nonconformities?	Yes	Record outcome in the findings log against the relevant findings.					
Stage 1 only	Y/N/NA	Reference made if Yes	Ref:				
Have there been any changes in/to the organization to the extent that additional resources are required for the Stage 2 visit?	Choose an item.	If yes, create an office action with the request to plan for appropriate resource(s) for the Stage 2 (i.e. activity code(s))					
Are there any specific planning needs to ensure that during Stage 2 all processes activities will be assessed?	Choose an item.	If yes, ensure that this is detailed/recorded in the next visit details (NVD)					