

Certificate Renewal

Report for:

PT Molindo Raya Industrial

LR reference: JKT6004111 / 3883014

Assessment dates: 21-April-2021 - 23-April-2021

Reporting date: 23-April-2021

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

East Java ,ID ISO 9001:2015

Assessment criteria: ISO 9001:2015
Assessment team: Mochamad Iqbal
Sugeng Hartono

LR Client Facing Office: JKT Indonesia OU

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Attachments:

JKT6004111_APP__APP_CR2021.doc

This report was presented to and accepted by:

Name: Mrs Erliess

Job title: QA Senior Manager



01. Executive report

Assessment outcome:

Based on the assessment outcome the Assessment Team recommends the ISO 9001:2015 certification of PT Molindo Raya Industrial for the agreed scope.

Based on sample taken during the remote audit there is no finding that lead to a major non conformities. The system can concluded in well maintain. Therefore the company were recommended to gain re certification of ISO 9001: 20015. The the same scope as previous i.e.:Manufacture of Ethanol. The report were subject for technical review, However several note were observed and explain during closing meeting.

The Assessment Team Leader confirms the contractual arrangements for ISO 9001:2015 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:

Risk and opportunities for 2021 were identified and used as continual improvement tool in the organisation Management system. The update was established and maintained. Management has a commitment to make continual improvement for example make a re-organization in top management level. Internal audit was conducted to monitor the effectiveness of Quality Management System. Management review was conducted to ensure the action plan has been implemented accordingly



Areas for senior management attention:

Several note for improvement given in process table could be consider as input for strengthen the QMS implemented



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		Assessment Criteria	
number		(Clause)	
Grade		Issue Date	
Status		Process / Aspect	
Leastien(a)			
Location(s)			
Statement of Nor	Conformity		
Requirement			
Evidence			
Proposed correct	ion, corrective action		
and timescales			
Correction			
Root Cause analy	reie		
Corrective action			
LR has reviewed	and verified the	Date of closure	
implementation of	f actions taken		



03. Assessment summary

Visit generic objective:

This was a Certificate 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:

Mrs. Erlies

Mrs. Kartika

Mr. Umar

Mr Hadi

Mr. Yudi

Mr. Indrayanto

All attended in the opening meeting at 09.00 am and closing at 16.30 pm

Visit specific objective:

Certificate renewal

Introduction:

Summaries of observation during Re certification visit were presented in this report. The assessment was held at 21 - 23 April 2021 by Mochamad Iqbal (TL), Sugeng Hartono. The ISO-9001: 2015 requirements were used as a reference for this assessment. The method for this audit is by remote and using MS team as ICT during audit activity. Opening meeting and closing meeting were attended by Managements, MR and related staff, where all the result are presented and agreed by the auditee.



Assessment of:	Please see area of audit	Assessor:	Sugeng Hartono
Auditee(s):	Mr. Haris (Purchasing) Ms. Lely (Purchasing) Mr. Andreas Indera (Sales) Mr. Listyo and Mr. Miftahul Arif (Maintenance and Cal Mr. Edy Santoso (IT) Mr. AM Moeljadi (Distribution) Ms. Heni Silvana (Utility)	ibration)	

Area of audits

#Purchasing

#Sales and Distribution

#Maintenance including calibration

#IT

#Utility

Trials and evidences

#Purchasing

Supplier : Chashma Suggar Mills Limited (Supply Ethil Alcohol); Centra Nusa Indonesia; Mandala Alam Starindo;

Ceil Jedang Indonesia; Pratama Nusantara Sakti; PT. PN X.

Purchase Contract//Purchase Order//Certificate of inspection//Evaluation of supplier./Selection of supplier.

#Sales and Distribution

Customer Satisfaction Survey (Every 2 years) the last is in 2018;

Sampling customer: Sumber Kita Indah; Jayamas Medica Industry; for transaction date: 11 Feb 2021; 7 Apr 2021

Purchase Order from customer//Sales Order//Delivery Order//Customer complaint (No complaints)

#Maintenance including calibration

Calibration schedule

Sampling equipment: TG-MRI-150-01; MV3X; W1065; RTD1313;PT301

Maintenance/Correction record for Turbin MAN; Perkins Standby Genset; P8161 A/B (Pump); P302A (Work Order;

maintenance record;)

#IT

Back up data: Working with google (Certified)

Zoom Pro certificate//Sophos certificate for data protecting//Microsoft windows and office licensing//Hardware

maintenance

Risk and evaluation

#Utility:

Manual book Vinasse Fired Boiler

Boiler Operational Daily Report//Daily report cooling water quality//Distillation project

Procedure: UTL/P-01: Procedure utility



-Quality Objective for all above department.

Evaluation and conclusions:

#Purchasing

It can be concluded that the process related to purchasing has been well controlled. This includes communication with suppliers in terms of determining the requirements of supply, methods of acceptance and so on and the process of evaluating and selecting suppliers.

Quality objective had been established and monitored.

#Sales and Distribution

The company demonstrates good communication with customers in terms of setting specifications related to supply to be provided. It is included feedback related supply, complaint and monitor customer satisfaction. It is found that the company had conducted order review before committing to supply customer. The company also demonstrate a good control of delivery.

Quality objective had been established and monitored.

#Maintenance including calibration and #IT and #Utility

It can be concluded that the company has determined, provided and maintained the infrastructure required for operations. Such as : machine, equipment and utilities including supply steam and water, and ICT (information and communication technology)

The company also demonstrate to control calibration.

Quality objective had been established and monitored.

Areas for attention:

Opportunity for improvements:

- -Quality objective for IT have been defined, only as: "the duration of time for hardware and software repairs". To increase the relevance of IT quality objectives, please consider including other quality objectives, for example server down time, connection down time, etc.
- -In the context of the Covid-19 pandemic, there have been risks and opportunities for new ways of meeting, for example by meeting on line. In this regard, please consider documenting these risks and opportunities, including the actions that have been and will be taken.
- -There is a new engine, namely the Vinasse Fired Boiler. Regarding this, the manual of the machine has been stored properly as shown, but has not entered into the controlled documented information. Please consider including this document as controlled documented information, because of the importance of the manual.



Assessment of: Management Elements and Top Management Assessor: interview		Assessor:	Mochamad Iqbal
Auditee(s):	Mrs Erlies and Mrs Kartika		

Changes to organizational context, Management review, Internal Audits, Continual improvement, Management of change (System & Organisation), Corrective action, Management of complaints, Performance against the client's management system objectives, Use of Logo.

Risk and opportunities

Vision, mission, organisation, quality policy, quality objectives, management review, and internal audit;

Corrective/Preventive Action (including customer feed back);

Working Environment and Internal Communication;

Review of previous findings;

Evaluation and conclusions:

Interview with Top Management has been done; some important points were discussed and summarized as following.

The company currently developing new project and willing to share with the public in near future for expanding the capacity.

Management has explained the biz competitiveness including its strategy to win the market.

Market segmentation was same (mostly Food and Pharmacy); in near future it wont be changed to another sector such as bio fuel its depend on the future situation and government policy.

Market destination was expanded to export. None of market regulation becomes trade barrier.

currently COVID issue is not the biggest risk in the business.

In general, company still keeps on operation excellence strategy; people development program has been provided to accommodate this strategy

No changes on policy and organization.

Management control through implementation of internal audit and management review has been done mid 2020 None of customer complaint received for the last one year.

Corrective/preventive action (from internal audit, nonconforming service, and customer survey) was implemented and monitored in accordance with the procedure.

The customer satisfaction measurement was done through questioners and it was reported and documented. Working Environment aspect has been implemented through HSE activities.

Areas for attention:

Due its project for expanding the capacity will run, care should be taken to review risk regarding the transporter traffic that will be occurred during project run



Assessment of:	Production and QC	Assessor:	Mochamad Iqbal
Auditee(s):	Mr Indrayanto, Mrs Ana and teams		

Quality plan

Spec process fermentation batch (PRO/S-01/01)

Risk and opportunities / Worksheet Pre-fermentasi

Standard distillation / COA / Spec product ethanol / Product anhydrous ethanol

Lab calibration report: thermometer, spectrophotometer

Process flow diagram

daily report / WI yeast cream (PRO-IK-01/10)

Worksheet yeast crown (PRO-PO-2) / Worksheet production ethanol

Production plan / Production report 2021.

Quality objective

Evaluation and conclusions:

Risk and opportunities have been identified and register, the action plan also monitored very well by the staff and management

Quality objective were achieve well until April 2021

Production and QC activity performance were conducted very good, no complaint received from the customer, no significant issue regarding productivity.

From previous visit there is no issue to be follow up.

Based on sample taken there is one finding to be highlighted only several improvement as below;

Areas for attention:

It could be consider to communicate with logistic function regarding input the data for yeast used for the production Care should be taken to ensure the agreement report for handing over the cleaning activity from the external party are contain parameter for verification



Assessment of: HRD, General Affair and Assessor: Security Auditee(s): Mr Hadi, Mr Cahyo, and team		Assessor:	Mochamad Iqbal

Risk and Opportunity: Project, Parking, Guest handling

Organization knowledge

Training program

Legal permit control

Maintenance building and general facility

Extra fooding

Control of document external (legal)

TDP

TDG

Evaluation and conclusions:

Risk and opportunities have been registered and follow up properly with the action plan from the management staff Training program and the organization have been set up and centralized in HRD function

Quality ojective also monitored properly and well achieved

Risk and opportunity had been well identified.

Legal permit had been found under control however during COVID issue, opportunities wre given as below Maintenance building and general facility had been well implemented.

Security is reviewed. Generally well controlled. There are programs related to the analysis to the current security risks. Patrols have been done in accordance with the plan.

Reception notes can be well indicated. The activity for the safety induction for guests is found already done.

Areas for attention:

Care should be taken to speed up the permit for water used due the COVID issue are made more complex durign registration process.



Assessment of:	Logistic	Assessor:	Mochamad Iqbal
Auditee(s):	Mr Yudhi and team		

Risk and opportunities 2021 Stock control for RM,PM FG and sparepart Delivery schedule and its records Quality objective Stock movement RM in daily Basis through SAP schedule for cleaning RM tank

Evaluation and conclusions:

Risk and opportunities have been registered and follow up properly with the action plan from the management staff Quality ejective also monitored properly and well achieved

stock rotation control also monitored and record properly

deliver schedule for monthly basis also record properly.

Based on sample taken no significant issue to be highlighted, only several note for improvement has been given as below

Areas for attention:

Consider could be taken to review the death stock of spare part that more than 10 years still kept whether still used or not.



04. Next visit details

Standard(s) / Scheme(s)	ISO 9001:2015	Visit type		Surveill	ance 1
Audit days	2.00 DAY	Due date		April, 20)22
Team					
Site		Audit days	Delivery Method	Remote Effort	Activity codes
Jl. Sumber Waras No.255,l	2.0 DAY	Onsite	0 DAY	106802	



05. Appendix



1. Audit Programme/Plan

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 e.g. organisational changes, processes, management review results etc. Prior to the closing meeting the audit team should (re)confirm the programme and identify any changes, E.g. to the management system, extent, time or dates of the audit, competences...

Visit Type	Stage 1	CR	SV1	SV2/FV	Certificat e Renewal
Due Date		Apr 21	Apr 2022	Apr 2023	Apr 2024
Start Date		21/4/21	Combined surveillance once a year TBA	TBA	TBA
End Date		23/4/21	TBA	TBA	ТВА
Audit Days		5	2	2	5
Separate assessment plan?	Y/N	N	N	N	N
Any change in workforce numbers that may impact visit duration (if yes add new number)	Y/N	N	N	N	N
Where identified above see sepa	arate curren	t assessme	nt plan for further detail.		
Process / aspect / theme / loc	ation				
Final selection will be determine	ed after revie	ew of manag	gement elements and ac	tual performance	
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		✓	✓	✓	√
(.,					
Sales and Adm. sales Incl. FG and Delivery/Logistic		✓		✓	√
Production Ethanol (Fermentation & Distillation)		✓		✓	√
Logistic (Including Warehouse of SP, RM)		✓	✓	√	✓
Purchasing		✓		✓	✓
Maintenance & Utility		√		✓	✓
QA & Quality control (Including Calibration)		√	✓	✓ ·	✓
		✓	√		√
HR Development		✓	✓		→
General affair		✓	∨		→
IT		✓	Y		
Security		Y			✓
		1			

^{1:} Complete the list of organisation (parts), departments and/or processes of the different locations



2: Required for Annex SL based Standards

3: Not required for Annex SL based Standards

Scope

Any revised scope will be as agreed in formal correspondence between LRQA and the client or defined in section 4 of the previous LRQA visit report.

Scope	Provision of inspection and testing for non destructive testing services.
Exclusion	8.3 Design and Development

Visit start time (approximate)	08.30	Visit end time (approximate)	16.30			
The actual start and finish times for the visit will be agreed at the pre-visit contact with the assessor and recorded						
in the report introduction						

Additional information

Opportunities for improvement

If we identify opportunities to improve your already compliant system, we will either record them in the process table applicable to the area being assessed or in the Executive summary of the report if they can deliver improvement at a strategic level.

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.

Audit Criteria

The audit criteria consist of the assessment standard and the client's management system processes and documentation.

Additional observers

Any additional observers will be as formally communicated to the client.



2. Assessment Plan

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.

(Day 1) 21 April 2021					
09.00	Introductory meeting with management to explain the scope of the visit, assessment methodology, method of reporting and to discuss the company's organisation (approximately 30 minutes). The Team Leader will agree a time to meet with top management to discuss policy and objectives for the management system.				
09.30	LRQA team briefing for a team of two or more assessors or (experts).				
Mochamad Iqbal (Team Leader) Sugeng Hartono					
	Top Management Interview and QA Activity	10.00			
10.00	Risk and opportunities update				
12.00	Lunch	12.00	Lunch		
13.00	Production	13.00			
15.00	Report Writing	15.00	Report Writing		
16.00	Closed	16.00	Closed		
(Day 2) 22 April 2021					
09.00	Review of findings from previous day. Review of the assessment plan for the day.				
09.30	Quality Control	09.30	Purchasing		
	Calibration		IT		
12.00	Lunch	12.00	Lunch		
13.00	HRD	13.00	Maintenance/Utility		
	GA and Security		calibration		
15.00	Report writing.	15.00	Report writing.		
16.00	Close	16.00	Close		
(Day 3) 23 April 2021					
09.00	Review of findings from previous day. Review of the assessment plan for the day.				
09.30	Logistic	09.30	Sales and Adm. sales Incl. Delivery		
12.00	Lunch	12.00	Lunch		
13.00	Review of day's findings	13.00	Review of day's findings		
14.00	Preparation of final report	14.00	Preparation of final report		
15.00	Closing meeting with management to present a summary of findings and recommendations.				



Note; Information on the objectives of the various visits can be found in the Client Information included in the report or on our website www.lrqa.com. Furthermore on the website there are Client Information Notes available for the various visit types. The audit criteria and team members date and locations are also stated on the front page of the report. Scope of certification and roles and responsibilities of the audit team members are expressed in the Audit Program Plan.

3. Report Considerations

LRQA Report considerations		
Have there been any deviation from the original assessment plan:	No	If yes detail these in the introduction 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 introduction 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 executive summary section of the report
Have any unresolved issues been identified during the assessment:	No	If yes detail these within the executive summary section of the report
Was the audit undertaken a combined or integrated audit:	No	If yes confirm what type of audit and the standards covered in the introduction to the report.
Was the organisation effectively controlling the use of the certification documents and marks:	Yes	If no document within the reporting table covering the mandatory elements
If applicable has the organisation taken effective corrective action regarding previously identified nonconformities:,	Yes	Record outcome in the findings log against the relevant findings.
Does the management system of the organisation continue to meet the applicable requirements and meet the expected outcomes:	Yes	If no details reasons within the executive summary of the report
Does the scope of certification continue to be appropriate to the activities/products/services of organisation:	Yes	If no then document the actions necessary in relation to the scope in the executive summary of the report and amend the APP as required.
Were the objectives of the visit as defined in the APP fulfilled during the visit:	Yes	If no detail the reasons and any necessary actions in the executive summary of the report and amend/update the APP