Confidential
Report Against the Requirements of ISO 9001:2015 for Quality Management Systems

CUSTOMER DETAILS

TRACKING NO:	IND-18728-4-QM		
STANDARD (S)/ CRITERIA: (SELECT AS APPROPRIATE):	ISO 9001:2015 & QMS Manual QM 01, Issue1, Rev 01, Dated: 10.06.2020		
CLIENT NAME:	KIET TECHNOLOGIES PVT. LTD.		
NAME OF CLIENT CONTACT PERSON:	Mr. Chandrashekaraiah R		
POSITION OF CLIENT CONTACT PERSON:	CEO	**TYPE OF AUDIT**	Surveillance
AUDIT START DATE:	28.11.2024	**TOTAL AUDIT MAN-DAYS**	1 Man Day
AUDIT END DATE:	28.11.2024	**DATE REPORT COMPLETED**	01.12.2024
MAIN ADDRESS:	No. 51/4, 2nd Floor, J C Industrial Estate, Bikashipura Main Road, Yelachenahalli, Bengaluru – 560 062, Karnataka, India		
SCOPE OF REGISTRATION	*Design, Manufacture of Test Rigs, Automated Testing Environment (ATES) and SPMS and Test Jigs and Fixtures*		
DESCRIBE THE COMPANY'S ACTIVITIES OBSERVED AT THE TIME OF THIS AUDIT (CORE PROCESS) TO JUSTIFY THE FULL SCOPE OF REGISTRATION (INCLUDING ANY OUTSOURCED ACTIVITIES)	1. Planning → Evaluation → Lead time → Input → Sub Process → Output → Control Method → Process Indicator 2. Existing Product → Review of Specs → Design Change Note → Specs Review → Timely Fulfilment		

The auditor is required to confirm that the documented Scope of Registration above is appropriate for the activities, products and services seen as being managed by the client's documented system at the time of the audit visit. If "No" the auditor is required to provide detail – in the box below of the new worded scope.	√	Yes
		No

There is no changes in the processes, head count, the worded scope is as follows
"*Design, Manufacture of Test Rigs, Automated Testing Environment (ATES) and SPMS and Test Jigs and Fixtures*"

MULTI SITE – NO
(IF "YES" DETAIL SITES VISITED THIS AUDIT)

SITE NAME	ADDRESSES OF COMPANY SITES VISITED INCLUDING COUNTRY. (IF MORE THAN 4 SITES HAVE BEEN VISITED, PLEASE ADD ADDITIONAL ROWS):	ACTIVITIES OF EACH SITE VISITED RELEVANT TO THE OVERALL WORDED SCOPE (Indicate only the part of the scope of activities that apply to each of the site)	DATE OF EACH SITE VISIT:
Not Applicable			

SITE NAME (LEGAL NAME):	ADDRESSES OF ADDITIONAL SITES NOT VISITED BUT STILL COVERED BY THE REGISTRATION INCLUDING COUNTRY – TO BE COMPLETED IF CLIENT IS UNDER A SITE SAMPLING AUDIT PLAN. (IF MORE THAN 4 ADDITIONAL SITES HAVE BEEN REGISTERED, PLEASE ADD ADDITIONAL ROWS	ACTIVITIES OF EACH SITE VISITED RELEVANT TO THE OVERALL WORDED SCOPE (Indicate only the part of the scope of activities that apply to each of the site)	PROJECTED DATE OF SITE VISIT: (YEAR)
Not Applicable			

TEMPORARY EXTERNAL SITE VISITED (Construction site, Installation Site, Training site etc.) - (If more than 3 additional sites have been registered, please add additional rows)

Addresses of installation external operative sites (client's customer sites) visited and not covered directly by the company registration including country	Activities of each site visited relevant to the overall worded scope	Date of each site visit
Not Applicable		

A Cube TIC Limited

CONFIDENTIAL AUDIT REPORT TO BE SUBMITTED TO THE CLIENT AND TO A CUBE TIC LIMITED

AUDIT TEAM		
AUDITOR(s) STATUS	**NAME**	**SIGNATURE**
LEAD AUDITOR	Ravikiran Vishwanath	Sd/-
AUDITOR 1		
AUDITOR 2		
TECHNICAL EXPERT		
WITNESSING EVALUATOR / TRANSLATOR (if any)		
OBSERVER		

In signing this document, the Audit team confirms that they have had no involvement with the company under audit in terms of consultancy, training, direct employment etc within the last 2 years and have no other involvement (financial, shareholding or commercial) that would constitute a Conflict of Interest.

The audit was completed using a selective sampling of Objective Evidence of implementation and effectiveness taken from a combination of Records and Data, Observed Practice and Operations and Client personnel's knowledge and understanding of the requirements of the Management System. Examples of the Objective Evidence used are provided within each of the relevant sections of the report that follows:

CONTENTS

REPORT SECTION 1 – LEAD AUDITOR FINDINGS AND RECOMMENDATIONS:						
Number of Non-Conformances Raised during the Audit	Observation	02	Major	Nil	Minor	01
Recommendation for Certification/Continued Certification (No CAR'S raised, or CAR's Closed out on site)						Y

Recommendation for Certification/Continued Certification following off site verification of responses	NA
Recommendation for Certification/Continued Certification following on site verification of CAR responses	NA
Non-Recommendation for Certification/Continued Certification (evidence of major system failure)	NA

WERE THE FOLLOWING OBJECTIVES ACHIEVED	
Was the audit team able to determine conformity of the client's management system with the audit criteria Y/N?	Y
Was the audit team able to confirm the availability of the client's management system, to ensure that the client meets applicable statutory, regulatory, and contractual requirements Y/N?	Y
Was the audit team able to evaluate the effectiveness of the client's management system, to ensure that the client continually meets their specified objectives Y/N?	Y
Was the audit team able to evaluate the effectiveness of the product/service delivery process Y/N?	Y
Was the audit team able to evaluate the effectiveness of the Internal Audit and Management Review Y/N?	Y
Was a minimum 30% of audit time spent visiting all areas of the facilities being audited to verify the effectiveness of the OH&SMS?	NA
Was the audit team able to determine the client has achieved compliance with its applicable legal requirements through its own evaluation of compliance?	Y
Was the audit team able to evaluate the effectiveness of the processes dealing with non-conformity and subsequent action (if any) Y/N?	Y
Were areas of Potential Improvement to the management system identified (as in audit findings), if applicable Y/N?	Y
Was the audit team able to confirm the client Management systems integration can be describe as: Full, Partial or N/A	N/A
Were the areas planned during the previous Audit covered during this audit?	Y

WERE THERE ANY DEVIATIONS FROM THE ITINERARY? PLEASE PROVIDE THE REASON(S) FOR DEVIATION. – Not applicable if this is a Remote Audit

Not Applicable

IF THE ANSWER TO ANY OF THE OTHER OBJECTIVE IS "NO", PLEASE PROVIDE SPECIFIC DETAILS BELOW

Not Applicable

OHSMS Only - Were the following employees present during the closing meeting? • *Legally responsible personnel for occupational health and safety* • *Personnel responsible for monitoring employees' health and* • *The Employee's representatives.*	-	Yes
As requested by IAF MD 22:2023 the Legally responsible for occupational health and safety - Personnel responsible for monitoring employees' health and the employee's representatives must be present at the closing meeting to share the results of the audit. Presence is also valid through audio or video call. In case of absence, or remote presence, at the closing meeting of one of these persons, a justification must be included.	-	No

If no, please provide justification for absence:

-

REMOTE AUDITING (Where situations dictate, and approval has been granted)

What technologies were used to communicate with the client and gather data?	Not Applicable		
Was it possible to cover all elements of the standard as per plan?	Not Applicable		
if no, identify areas not covered:	Not Applicable		
Is it necessary to re-visit the company to audit key areas of the management system not covered during	N	Date agreed for next visit (no later than 6-months from the date of this	-

this visit?		visit)?	

CLAUSE:	JUSTIFICATION FOR ANY NON-APPLICABLE CLAUSE FROM THE ISO 9001 STANDARD: (PROVIDE DETAIL)	AUDITOR ACCEPTANCE (Y/N):
	No Non applicability clauses	

REPORT SECTION 2 – AUDIT SUMMARY AND RECOMMENDATION:

The auditor is required to provide Senior Management of the organization with a summary of the overall position of the Management System with regards to its ability to manage the identified risks and opportunities and sponsor continual improvement. Please state your recommendation based on the results of this audit.

Audit commenced with Opening Meeting and was attended by the CEO, MR /Design Incharge, Marketing Incharge, Production Planning and supervisor - Electrical and Mechanical, Quality representatives. All the points have been covered and audit programme briefed on the methods adopted for the audit and the purpose of the audit. Opening meeting was followed by facility tour to get first-hand information about the housekeeping, display of quality policy and awareness of the process objectives, work instructions. Machine Maintenance, Maintenance of the process records of relevant processes.

The company is involved in *Design, Manufacture of Test Rigs, Automated Testing Environment (ATES) and SPMS and Test Jigs and Fixtures* as per customer specifications. Its functional group includes Marketing, Purchase, Production, Maintenance, Quality, HR and Administration managed under leadership of Managing Director.

The Scope is in line with the business and its supporting functions include MR, Marketing, HR, Training of Employees and office general administration. The management ensured and provided all necessary resources for the effective implementation of quality management system.

Infrastructure of workspace, Environment & necessary measuring Instruments provided. Appropriate personnel protective equipment has been provided. The atmosphere around is conducive to safety Health & Hygiene. Determination of the boundaries and applicability of the quality management system to establish the scope found verified. The management ensured and provided all necessary resources for the effective implementation of quality management system. Risk mitigation plan and action plan for opportunities are documented. Verified and found client Management System with regards to its ability to manage the identified risks and opportunities and sponsor continual improvement. No audit findings raised during the audit however some observation was reports as part of opportunity for continual improvements were discussed during closing meeting.

The company has well defined Quality Manual, Risk Procedure for addressing the internal and external issues and the needs and expectations of the interested parties, Work Instructions, acceptance criteria for the product testing in form of drawings and Manufacturing process flow charts, and documented information. Overall client implemented Quality Management System found effective.

REPORT SECTION 3 – COMPANY ACTIVITIES SINCE PREVIOUS AUDIT

	PROVIDE DETAILS
Have all findings raised during the previous visit been verified as closed? If "No" then these shall be raised as Major Non-Conformance(s) and attached to this report	Not Applicable, No findings raised during last visit
Are the A Cube TIC Limited Mark and the Accreditation Body Mark properly used? *Note: Please provide details of how marks are used (if at all) including full details of any websites where either the marks or claims to certified status are referred to.*	Yes, used in relevant documents such as Letter Heads, Documents
Are all publicly available statements (made by the client) regarding certification appropriate and clear? *Note: Please provide details of what kind of public statements are made and where they are made (websites, brochures etc)*	The company has displayed the Quality Policy statement duly signed by the CEO at prominent locations
If any issues were unresolved between the audit team and the client during the audit what were these issues?	There were no unresolved issues between the audit team and client
Have any of the company activities changed since the previous audit?	There is no change in the manpower and company activities
If "Yes", do the changes impact the worded scope of Certification applied for? Identify (where appropriate) activities to be specifically followed up on the next visit.	Not Applicable

If changes have occurred, the auditor is required to provide detail of the changes involved and advise the local Office
Description of any changes of the company activities (if any) There is no change in the manpower, machinery, methods and Measurements. Quality Policy Statement are displayed at prominent locations. The scope was determined in line with the business as "*Design, Manufacture of Test Rigs, Automated Testing Environment (ATES) and SPMS and Test Jigs and Fixtures*".

REPORT SECTION 4 – BASIS OF THE MANAGEMENT SYSTEM

(Please provide a summary of evidence reviewed during the audit; where a certified organisation cannot demonstrate that all external and internal issues that have been determined as relevant, including Climate Change, a suitable finding should be raised. Auditor must record the details about the Climate Change issue within this section.)

Describe the Needs and Expectations of External and Internal Interested Parties including requirements for climate change

Client has determined relevant needs and expectations of the interested parties addressing the climate change requirements as below vide document reference F/4.2/01, Rev 00.

Interested Parties	Needs(N)	Expectations (E)
Suppliers	Regular Orders and timely payment Provide environmentally friendly materials and services.	Expected to adhere to sustainable practices Reduce their own carbon footprint,
Customers	Timely delivery and quality Products	Reduced environmental footprints in product life cycles. Sustainable supply chain practices
Statutory and Regulatory	Adherence and compliance to laws and timely reports Enforcing climate-related policies & Regulations	No compliance of obligations
Employee	Good Work Environment and Timely Payment Offer training on climate-related issues promoting environmentally responsible practices	Maintenance of defined organisational policies
Bankers/Investors	Timely repayment Flow of capital towards sustainable initiatives, assess climate risks and encourage responsible investing	Provide funding for climate-related projects and investments
Management	Return on Investment and Reputation Long-term financial sustainability.	Expecting companies to disclose climate-related risks and opportunities

Describe the context of the organization as determined by the organization (internal and external issues including Climate Change) including the scope of the applicable Management system.

The company determines external and internal issues that are relevant to its purpose using SWOT and PEST and its strategic direction and that affect its ability to achieve the intended result(s) of its quality Management system. Verified Organization and its context. External and internal Issues PEST AND SWOT

PEST

Political Factors (P)	Economic Factors (E)
Political direction on SMEs	Growth of banks
Allocation for infrastructure	Funding
Skill enhancement in Automation sector	Inflation
Monetary policies	High GDP growth

	Social Factors (S)	**Technology Factors (T)**
	Increased literacy	Advancement in machinery
	Technological awareness	Automation tools growth
	Increased per capita income	High technology at low cost
		Digital technology growth
	SWOT	
	Strength	**Weakness**
	Innovative technology and technical expertise	Procurement of additional human resource cost
	Willingness and expertise in taking on challenging customer requirements	Disruptions to supply chains due to climate-related events (Heat), impacting raw material availability and quality.
	Opportunities	**Threats**
	High growth potential in other areas	Supplier cost increases

Clause 4 – Is the documented scope of the Management System appropriate and relevant to the context of the organization including Climate Change	√	Yes
		No

REPORT SECTION 5 – PLANNING

If there is documented information of the risk/opportunity analysis, indicate the organization's document reference and status (review/confirmation)

Are the following (applicable to their context) accurate and valid? Clause 4.2 – Understanding the needs and expectations of interested parties (QMS) **Clause** 6.1.3 - Compliance obligations (EMS & OHSMS where applicable) Legal and regulatory requirements.	√	Yes
		No
Clause 6.1.1 – Risks and Opportunities Has the organization identified the applicable to manage identified risks and opportunities? Please provide details	√	Yes
		No

Risk Matrix defined for Risks & Opportunities defined for all the processes and opportunities identified and addressed by the team and all are under acceptable limits vide risk procedure QP-01 R1, where the risk is categorized into low - 1-3, Medium - >3 and High >6. Last updated and reviewed - 20.11.24, document reference F/6.1/01, Rev 00. 7.8. 2017.No new high risks identified apart from the below listed. actions initiated and controls are in place.

Risks/Opportunities Indicate some of the Risks/Opportunities identified by the organisation (randomly, the most significant, those for which the organisation has planned mitigation/improvement actions) It is not necessary to include all the risks identified by the organisation	**Controls** **Indicate which measures have been identified.** Give evidence of the system used by the organisation to assess the effectiveness of the actions planned/implemented - system for reassessing the level of risk initially defined.
Steady improvement in the business in SCM due to order reduction(O)	Exploring new orders from the existing customers and new customers
Customer Payments (R)	Regular follow-up of the invoice payments with the clients
Attrition(O)	Enhancing the skill levels of the current employees as part of contingency plan in case of migration of the employees
Climate Change requirements(O)	Preventive maintenance implemented to no ill health of the employees if there is climate change effects disrupting the operations.

REPORT SECTION 6 - GENERAL MANAGEMENT SYSTEMS

Clause 6.2.1 – Management (Quality, Environmental and Health & Safety) Objectives and Actions to achieve. Has the organization established appropriate Objectives, action plans and status? Please provide samples of evidence reviewed during the audit for each standard.	√	Yes
		No

Objectives	Related standard(s)	Action/Plan	Status/Achievement
Delivery Performance	ISO 9001:2015	Monitor the orders on hand and productivity as per the production plan in form of Plan v/s Actual.	Target 2024-2025-100% Actual - 100%
Customer Complaints	ISO 9001:2015	Monitor the daily rejections, Initiate correction, determine the root cause, corrective actions and implement corrective measures in an event of complaints to prevent reoccurrence.	Target 2024- 2025 - O Actual - Nil
Increase in Sales Turnover	ISO 9001:2015	Explore possibilities of new order from the existing client and from the new client by having strategic plan.	2022- 2023 -Actual -4 Cr 2023-2024- Actual - 7Cr 2024-2025 - Target - 9Cr Actual - 4.35Cr till October 24
Training to employees	ISO 9001:2015	Awareness to employee based on need in form of training plan and review post training in form of evaluation	Target 2024- 2025 - 3hrs Actual -3 hrs in July, August and September 2024 each.
Supplier Rating	ISO 9001:2015	Evaluating the service provider performance at regular intervals by monitoring the rejections at inward stages of the inspections, Initiate correction, determine the root cause, corrective actions and implement corrective measures in an event of complaints to prevent reoccurrence. Also monitor the delivery performance as per the PO terms and conditions	Target 2024-2025-100% Actual - 100%

Additional comments (if any)	Not Applicable

Clause 9.2– Internal Audit
Describe how the organisation plans, implements, and maintains an internal audit program of the Management System's conformance to its own requirements and the requirements of the relevant ISO Standard and of its effectiveness?
Note: Auditor must confirm during the stage 2 and re-certification that the complete management system has been audited in the period before these audits., failure to satisfy this requirement shall result in a Major CAR being raised.

Procedure details (if any, including revision status) – or provide general overview	Internal Audit Frequency is every 6 Months, Internal audit is carried out as per the procedure QM, Rev 00, Dated 10.06.2020
Audit coverage including process	Top Management, QMS process, Customer Related process, Planning, Purchase, Stores, Production, Maintenance, Quality, HR & Administration,
Criteria and Scope of the audits sampled during this visit	ISO 9001:2015 & Quality Manual QM, Rev01, Dated 10.06.2020
Result of the audit and status of the findings (if any)	• Internal Audit Plan – Evidenced the plan for the year–2024–2025 vide document reference F/9.2/01, Rev 00, Dated 10.06.2020 • Internal Audit Scheduled for IA -20, Dated 30.04.2024 and for IA -20, Dated 12.11.2024, document reference F/9.2/02, Rev 00, 10.06.2020 • Evidenced the IA 20 audit conducted on 30.04.2024 for all 10 processes, no NC's nor observations were reported during the audit. • Evidenced the IA 21 audit conducted on 12.11.2024 for all 10 processes, no NC's nor observations were reported during the audit. • Next planned in April 2025.

Internal Audit Team, Competency & Impartiality	Internal Audit conducted by the external consultant to maintain the impartiality and the objectivity of the audit process
Additional comments (if any)	Not applicable

Clause 10.2 – Nonconformity and corrective action
Define how the organisation determines what a nonconformity is and, once identified how this is processed.
The process shall include the determination of the root cause of the non-conformity and the assignment of corrective actions to prevent re-occurrence. Describe how this has been addressed and provide examples what you reviewed at the time of the audit to confirm the implementation.

The company delivers products as per customer specification and any changes by the customer is to be communicated to the company which is informed to the production planning and control. The company follows strict adherence to Production Plan Sheet and in process inspection are in place. In process and final inspection is carried out before release of the product. If in case any non-conformity is reported procedure to address the same is available. There were no customer complaints in recent past.

Clause 9.3– Management Review
Describe frequency, attendee and what outputs are produced following the review of the related inputs. Is it considered that there is adequate detail to demonstrate an effective review?
Note: A Cube TIC Limited Codes of Practice require that a Management Review is performed every year, failure to satisfy this requirement shall result in a Major CAR being raised.

Items covers	Details reports which the auditor reviewed to confirm the implementation of the process.
Procedure details (if any, including revision status) – or provide general overview	Internal Audit Frequency is every 6 Months, Internal audit is carried out as per the procedure cum manual QM ,Rev01, Dated 10.06.2020
Frequency defined	MRM is carried out post internal audits at every 6 months' frequency
Did the MRM cover all agenda required by the standard(s)?	Yes
Provide some examples what you reviewed as an input/data for the meeting with respect to the standards	MRM 20, QF/9.3/02, conducted on 30.05.2024 1. Any Identification of the new external Issues, internal Issues and needs and expectations of the interested parties including climate change as and when the projects are taken up - Ongoing process 2. Risk assessment of all the processes and mitigation plan. 3. Objectives review as per the defined frequency and its achievements and action plan to improve upon. 4. Review of the external service provider's performance. 5. Review of process efficiency and effectiveness of the product. MRM 21, QF/9.3/02, conducted on 12.11.2024, 1. Customer Satisfaction Report received from two clients and its review and analysis as concerns with respect to the product requirements was raised in the delivered product and new requirements placed post deliverables. 2. Risk assessment of all the processes and mitigation plan. 3. Objectives review as per the defined frequency and its achievements and action plan to improve upon. 4. Review of the external service provider's performance. 5. Review of process efficiency and effectiveness of the product. 6. Review of the monitoring and measuring resources and adequacy.
Attendee(s)	Evidenced the MOM of both the MRM's attended by CEO, QMS Coordinator & Design Incharge, Planning in charge, Production cum Quality in charge of Electrical and Mechanical process.
Provide some examples what you reviewed as an output/decision from the meeting with respect to the standard(s)	➢ No changes in the QMS. ➢ No resource request was discussed in the MRM meeting. ➢ Develop new SPM continually for the customers.
Provide details on how the results of the management review have been communicated to the relevant staff and workers or workers' representative (if this is specific to OHSMS maybe	**Outcome of the MRM:** MRM 20, QF/9.3/02, conducted on 30.05.2024 1. No changes in the QMS. 2. No resource request was discussed in the MRM meeting.

add "OHSMS only"?)	3. Develop new SPM continually for the customers. **Outcome of the MRM:** MRM21, QF/9.3/02, conducted on 12.11.2024, 1. No changes in the QMS. 2. No resource request was discussed in the MRM meeting. 3. Planned to shift to new premises by August 2025
Additional comments (if any)	Not Applicable

Clause 10.3 - Continual improvement

How does the organisation demonstrate that it is continually improving the suitability, adequacy, and effectiveness of the Management System(s). For EMS & OHSMS describe how this enhances environmental performance and for OHSMS describe how this enhances the safety of all workers and other interested parties.

The customer does the following for its continual improvement.

- Obtains customer feedback once a year.
- Conducts training as per planned schedule.
- Conducts internal audit and MRM every 6 months.
- Maintained KPI/Objective Monitoring Form and the same is reviewed.
- Planned to shift to new premises by August 2025.

Is the management system for above element is effective, appropriate, capable to maintain throughout the registration cycle and in compliance with current management systems	√	Yes
		No

REPORT SECTION 7 – LEADERSHIP

(Please provide details of evidence reviewed during the audit. (examples should include the requirements of all relevant standards included or implied in the scope statement). Please refer to all documented evidence in the format: title; code number; issue number; date.

Clause 5.1 – Has the Top Management demonstrated leadership and commitment to the Management System as required by the detailed requirements of the Standard? The auditor is to provide examples of how this demonstration of Leadership and Commitment has occurred	√	Yes
		No

The Leadership lies with the CEO. CEO is the decision-making authority. Top Management's commitment is evidenced as the QMS is established and implemented. The interactions the auditor had with the top management have evidenced high degree of commitment to meet the system requirements of the standard like addressing the risks and opportunities to prevent or reduce undesired effects, assurance, enhance desirable effects, achieve improvement.

Top management of the company demonstrates leadership and commitment with respect to the quality management system verified and found evidenced through taking an active and leading role and understand their duties in relation to the QMS and are participating in promoting and supporting effective quality management.

Taking accountability of the effectiveness of the QMS connection to strategic direction and promoting awareness of process approach and risk-based thinking & engaging, directing and supporting persons to contribute to the QMS and also verified review meeting with all process owners evidenced and found effective.

Customer focus ensured through action lists and various means of repeated communications in form of meetings with all employees and customers. Clearly defined and understood roles, responsibilities and authorities in all process areas.

Broad and active involvement from top management in management reviews (inspiring/motivating activities) and found very effective and well involved in the customer focus and long-term relationship with customers to satisfying their needs and expectations through information, Communication and Technology.

Clause 5.2 – Does the Policy remain appropriate to the purpose and context of the organization, and does it satisfy all of the individual requirements for such a Policy as defined in the Standard?	√	Yes
		No
Clause 5.2 – Is the Policy communicated within the organization and available to interested parties?	√	Yes
		No
Clause 5.3 – Are the roles and responsibilities for Management System activities of other Management Positions defined.?	√	Yes
		No
Has someone been assigned responsibility for reporting on the performance of the Management System to top	√	Yes

management? Provide evidence of appointment by top management (including function of appointee)		No

Please provide details to support/examples what you reviewed at the time of the audit the answers to 5.1, 5.2 and 5.3

The unit is managed by a team of technically competent, experienced and committed personnel, good facility and high standard of quality to meet the explicit and implicit needs of its clients, the company has specialised in *Design, Manufacture of Test Rigs, Automated Testing Environment (ATES) and SPMS and Test Jigs and* Fixtures. The company has a high degree of working standards to achieve defect free products and ensure total customer satisfaction. With the current infrastructure the unit is presently having, it hopes to cope up with the requirements of all the customers.

Clearly defined and understood responsibilities and authorities in all process areas. Active involvement from top management in management reviews (inspiring/motivating activities) and found very effective and well involved in the customer focus and long-term relationship with customers to satisfying their needs and expectations through Information, Communication and Technology. Verified Quality Policy defined vide document reference QP.01, Issue1, Rev1, dated 10.06.2020 approved by CEO Mr. Chandrashekaraiah R, which is displayed at different location – Shop Floor, office.

Roles & Responsibility has been clearly defined in QM.01, Issue1, Rev1, dated 10.6.20, Active involvement from top management in management reviews (inspiring/motivating activities) and found very effective and well involved in the customer focus and Long-term relationship with customers to satisfying there needs and expectations through information, Communication and Technology. Client has deputed Mr Rajesh as QMS coordinator representative to address the QMS activities along with other process owners.

The company follows strict adherence to work instruction, defective products which can be reworked are sent to production,
In process and final inspection is carried out before release of the product.

1. The company has a defined Policy Statement's
2. Policy Statement is duly signed by the CEO and displayed at prominent locations.
3. Clearly defined and understood responsibilities and authorities in all process areas and distribution. Active involvement from top management in management reviews (inspiring/motivating activities) and found very effective and well involved in the customer focus and Long-term relationship with customers to satisfying their needs and expectations through information, Communication and Technology.

Is the management system for above element is effective, appropriate, capable to maintain throughout the registration cycle and in compliance with current management systems including there is a documented commitment to legal compliance.	√	Yes
		No

REPORT SECTION 7 A– WORKER CONSULTATION & PARTICIPATION (OHSMS ONLY)

Has the company established and maintained a process for consultation and participation for workers?	√	Yes
		No

Provide evidence of implementation of this process:

Not Applicable

REPORT SECTION 8 – SUPPORT

(Examples should include the requirements of all standards included or implied in the scope statement) Please refer to all documented evidence in the format: [title; code number; issue number; date]

Clause 7.1 – Resource
Has the organization identified and provided the resources necessary for the effective implementation of the Management System Including

People; Infrastructure & Working Environment	√	Yes
		No
Clause **7.2 – Competence & Section 7.3 – Awareness** Has the organization identified competence requirements and awareness needs for persons involved in the implementation and operation of the Management System?	√	Yes
		No
Clause **7.2 – Competence & Section 7.3 – Awareness** Has the organization implemented defined methods and processes to monitor and evaluate the effectiveness of competence and awareness activities and are such competence and awareness levels appropriate and complete?	√	Yes
		No
Clause 7.4 – Communication	√	Yes

Has the organization determined internal and external communications and have such communication methods/processes been implemented effectively?		No
Clause 7.5 – Documentation Has the organization determined and implemented appropriate and effective methods for the control of documentation identified as necessary for the Management System and are the controls effective in ensuring management of such documentation at places of use?	√	Yes
		No
Clause 7.1.5 – Monitoring and measuring resources (QMS) Has the organization identified and ensured control of accuracy of all equipment used – both internally and externally – for monitoring and measurement of process/product and performance indicators relevant to the required areas of conformance.	√	Yes
		No

Please provide details of objective evidence which the auditor reviewed to support the previous answers:

Resources:
The organization has identified and provided the resources necessary for the effective implementation of the Quality Management System through sufficient human resources found evidenced. The organisation has maintained good work environment needed for the product realisation process. Core Processes involved are as follows.

Planning → Evaluation → Lead time → Input → Sub Process → Output → Control Method → Process Indicator
Existing Product → Review of Specs → Design Change Note → Specs Review → Timeliness Fulfilment.
The functional process that is involved are Marketing, Enquiry, requirement evaluation, Quotation, Job contract- PO, Purchase of Raw Materials, Production Planning, Production, In process inspection, Storage, Final Inspection, Invoicing and Despatch.

Competence & awareness:

a) Employee Record Form QF/7.2/02/R0 dated 10.06.2020 updated date 20.10.2023 for 13 employees
b) Skill Matrix QF/7.2/03/R0 dated 10.06.2020, evidenced for Mr. Manjunath B, ITI Fitter of mechanical assembly section
c) Training Plan QF/7.2/04/R0 dated 10.07.2018 from Apr 23 to October 24 evidenced.
d) Individual Training Record QF/7.2/06/R0 was evidenced for Mr. Mahesh, of Electrical assembly section and relevant competency with respect to the skill competency, sampled the training imparted to the Electrical department team by Kumar P on the topic - Adaptor Box Training for Continuity test, Flue ray board assembly to 4 people, Verified the evidence the same.
e) Verified the competency of production Supervisor electrical Mr Kumar P on training effectiveness imparted to the process performers in the electrical section, Found satisfactory.

Communication:

What	When	With whom	How	Who
Customer compliant / feed back	At the time of receipt	Head of department / respective process owners	Meeting	Marketing in charge and all process owners
Quality objectives	While defining / once in 6 months	Employee	Procedure / oral training	MR/Design Incharge
Enquiry, order, amendments	Enquiry review / order review	Customer	Electronic media / letter / oral	Marketing in charge/CEO
Production information	Enquiry stage	Customer	Email / website / catalogue / letter	Marketing in charge/CEO
Training	When Training to be conducted	Training Faculty Admin for arranging for training	Circular / Email	MR

Documentation:
The company has a well-documented Quality Manual, Quality Policy, Quality Objectives, Procedures, Process Flow Chart Quality Plan, working instructions & Records Quality Policy approved by CEO.

Doc ID	Doc Name	Issue	Revision	Date
QM.01	Quality Manual	Issue 1	Rev 1	10.06.2020
QM-A	List of Contents	Issue 1	Rev 1	10.06.2020
QM-B	Company Introduction, Scope and Exclusions	Issue 1	Rev 1	10.06.2020
QM-C	Distribution, Amendment Sheet	Issue 1	Rev 1	10.06.2020
QM-D	Quality Policy and Objectives	Issue 1	Rev 1	10.06.2020
QM-E	Glossary and Abbreviations	Issue 1	Rev 1	10.06.2020
QM-F	Context of the Organisation	Issue 1	Rev 1	10.06.2020
QM-G	Leadership	Issue 1	Rev 1	10.06.2020
QM-H	Planning	Issue 1	Rev 1	10.06.2020
QM-I	Support	Issue 1	Rev 1	10.06.2020

QM-J	Operation	Issue 1	Rev 1	10.06.2020
QM-K	Performance and Evaluation	Issue 1	Rev 1	10.06.2020
QM-L	Improvements	Issue 1	Rev 1	10.06.2020
QM-M	Process Sequence & Interaction, Process flow	Issue 1	Rev 1	10.06.2020
QM-O	Roles and Responsibilities	Issue 1	Rev 1	10.06.2020
QM-N	Organisation Chart	Issue 1	Rev 1	10.06.2020
QP-01	Procedure, Risk Management	Issue 1	Rev 1	10.06.2020

Enquiry Register, Machinery Register (QF/7.1.3/03) R0, Maintenance Register, Breakdown Register, Skill Matrix,
Client has the master list of the Monitoring and Measuring resources vide document reference QF/7.1.5 /01/R0, 7.8.2019, 7 listed in the register,

Monitoring and measurement equipment including calibration, maintenance:
Sampled the calibration status of the following:

1. Digital Mustimeter of Equipment, Make - Metravi, Model: XB-33CF, Sl. No – 092635866, Calibrated at M/s Beltronics Calibration Lab, verified the COC vide certificate No – SRF No: 6467 02, Date of calibration 30.11.2024, Next date of calibration 29.11.2025.
2. Digital Mustimeter of Equipment, Make – Fuke, Model: 17B+, Sl. No – 59752530WS, Calibrated at M/s Beltronics Calibration Lab, verified the COC vide certificate No – SRF No: 6467 01, Date of calibration 30.11.2024, Next date of calibration 29.11.2025.
3. Profile Projector, Make – Metronics, Calibrated at M/s SARC Instruments LLP, verified the COC vide certificate No – SaRc/CAL/24-25/1159-F, Date of calibration 30.11.2024, Next date of calibration 29.11.2025

Is the management system for above element is effective, appropriate, capable to maintain throughout the registration cycle and in compliance with current management systems	√	Yes
		No

REPORT SECTION 9– OPERATIONS

(Examples should include the requirements of all standards included or implied in the scope statement) Please refer to all documented evidence in the format: [title; code number; issue number; date])

REPORT SECTION 9A– (QMS ONLY) [PLEASE DELETE THIS SECTION IF NOT APPLICABLE]

Clause 8.1 – Operational Planning and Control Have the organization established criteria for the processes and the acceptance of products and services and are criteria considered for change and review of consequences of unintended changes to mitigate any adverse effects that may/do arise?	√	Yes
		No
Clause 8.2.1 – Customer Communications Have the organization established criteria and requirements for communications with customers covering all relevant for the processes and the acceptance of products and services and are criteria considered for change and review of consequences of unintended changes to mitigate any adverse effects that may/do arise?	√	Yes
		No
Clause 8.2.2 – Requirements for Products and Services Have the organization defined requirements for products and services that include all/any applicable statutory and regulatory requirements as well as any considered necessary by the organization?	√	Yes
		No
Clause 8.2.3.1 – Review of requirements for Products and Services Does the organization ensure that it has the ability to meet the requirements for products and services to be offered to customers and review this before committing to supply?	√	Yes
		No
Clause 8.2.3.2 – Changes to requirements for Products and Services **Clause 8.5.6 – Control of Changes** Does the organization ensure that any changes to requirements for products and services that are made are recorded in relevant documentation and that relevant people are made aware of such changes?	√	Yes
		No

Please provide details of the contract review/sales process evidence which the auditor reviewed during the audit:

Contract/Order Reference	**Contract/Order Description of Service of Product** (*please include product description, date of customer's P/O, agreed delivery date and order confirmation signifying a completed contract review etc.)*
	M/s Bosch Limited Bidadi, Bangalore PO No - POE- 0085345360 Product Description - Length Checking Fixture (Sensor Mount part) Quantity - 4 nos

Date of PO - 29.07.2024
Expected date of dispatch- 6.9 2024
Order acceptance send over online portal on the same date of order received from the client. Concept drawing submitted to the client by the design engineer for approval over email, same approved on 29.7.2024.
Actual date of dispatch - 27.08.2024
Invoice No - KIET/24-25/084

Clause 8.3 – Design and development – (if Applicable) Does the organization ensure that any design or development of a product or service is performed in accordance with an established process that is both appropriate and that covers all of the requirements of sections 8.3.2 to 8.3.6 of the Standard?	√	Yes
		No
		N/A

The auditor is to provide details of examples of the design and development contracts he has reviewed and the relevant design and development requirements.

Contract Reference	Outline of Design or Development Involved	
Customer Name: Bosch Limited – Bidadi Plant Name of the Project: LAMDA Sensor Checking Fixture Date of Commencement: 08.08.2024	Design Planning	KIET/DD/F01
	Design Input	KIET/DD/F02
	Design Controls	KIET/DD/F04
	Design Output	KIET/DD/F03
	Design Changes	KIET/DD/F05

Clause 8.4.1 – Control of externally provided processes, products, and services. Has the organization determined the controls to be applied to externally provided processes, products and services and are these controls effectively implemented?	√	Yes
		No
		N/A
Clause 8.4.2 – Type and Extent of Control Has the organization – as appropriate to its context – ensured that the type and extent of control to be applied to externally provided processes? Do products and services take into account the potential impact of those on their own ability to consistently meet customer and applicable legal and regulatory requirements?	√	Yes
		No
		N/A
Clause 8.4.2 – Type and Extent of Control Has the organization – as appropriate to its context – determined the verification activities necessary to ensure that externally provided processes, products and services meet requirements? Ensuring the type and extent of control to be applied to externally provided processes is adequate and appropriate	√	Yes
		No
		N/A

Please provide details of evidence reviewed during the audit supporting your answers above including details of the processes, products, and services that are outsourced.

Client has maintained Approved Supplier list evidenced in form of register F8.4/02/R0, Rev 00, dated 10.6.2021, last updated on 10.07.22, 130 ESP registered in the register.
M/s AV Engineering
Scope of Service- Machining along with the raw material procurement
PO shared to the service provider via PO for Base Plate Model 342 - KTPL/2024-2025-112, RM - Al 6082 dated 20.8.2024 along with the drawing for machining through email.
Invoice for the base plate was received on 000034 dated 29.08.2024.
Inspection was carried out for the inward materials by KIET team vide document reference QF/8.6/02 dated 8.8.24.
Upon part received sent for hard anodizing to M/s Sree Karan Metal Technologies for Hard anodizing requirement of 25 - 30 microns sent through DC-K 24-25/121 dated 8.8.2024. Inspection of hard anodizing check at service provider end.

Clause 8.5.1 – Control of production and service provision Has the organization ensured that production and/or service provision is carried out under controlled conditions by methods that are appropriate to its products and services and that are effective in ensuring conformance of those products and/or services?	√	Yes
		No

Clause 8.5.2 – Identification and traceability Has the organization ensured that suitable methods are used to identify the status and traceability of outputs and maintain records of such traceability where this is a customer or legal or regulatory requirements and is this implemented effectively?	√	Yes
		No
Clause 8.5.3 – Customer or External provider property – (if applicable) Has the organization ensured that property belonging to customers or external providers is identified and protected and if applicable that any damage or loss to such property is reported and records of such are maintained?	√	Yes
		No
		N/A
Clause 8.5.4 – Preservation Has the organization ensured that outputs during production and/or service provision are preserved to the extent necessary to ensure conformity to requirements?	√	Yes
		No
Clause 8.5.5 – Post-delivery activities – (if applicable) Has the organization ensured that any post-delivery activities required by customers or legal and regulatory requirements are performed effectively?		N/A
	√	Yes
		No

The company follows strict adherence to work order. Work order is generated based on the enquiry received from the client post enquiry review the feasibility study is carried and quote is sent to the client and corresponding PO is received for the products.

Based on the design output issued to the Planning Production, Purchase, Production planning and Process monitoring and in process inspection are carried out as per the production sequence. The products are released as per schedule provided by the customer and despatched to the customers as per the requested date. Production process consists of integration of Electrical and Mechanical parts as per the customer requirement.

Sampled the ongoing project of the client
M/s Bosch Automotive Electronics India Pvt Ltd for the enquiry for product integration of ECU production testing unit - Wiring adaptor box - AH S 5000 Rev 08, verified the history of the revision issued to the service provider.

Input for the product testing in form of wiring diagram AE/MFI-CT wiring, Drawing, Test Protocol, Packing standards. Doc no - KIET-2024_11_P972 to P975.
Evidenced the work order - 0087480436 against route card F/8.5/01 R0, 10.7.2017. which comprises of process activities as below
Connector assembly
Wire striping & pin soldering carried out by trainee Miss Rakshitha
Pin inserting, Grouping, Strip Assembly, Routing soldering & J6 Pin insert, continuity test and mechanical final test carried out by Mr Mahesh and
packing and dispatch carried out by Kumar P
Client has maintained the master list of the machineries vide document reference QF/7.1.3/01/R0 dated 7.8.2019. 5 listed in the register, no breakdowns reported in the recent past.

Clause 8.6 – Release of products and services Has the organization implemented planned arrangements at appropriate stages to verify that product and service requirements have been met and that release of products and services shall not proceed until these planned arrangements have been completed unless otherwise approved by the relevant authority and/or customer?	√	Yes
		No

Verified the pre dispatch inspection report document reference QF/8.2/03, R01
M/s Bosch Limited
Bidadi, Bangalore
PO No - POE- 0085345360
Product Description - Length Checking Fixture (Sensor Mount part)
Quantity - 4 nos
Date of PO - 29.07.2024
Expected date of dispatch- 6.09 2024
Actual date of dispatch - 27.08.2024
Authorized signatory for the product release is Mr. Rajesh - Design Engineer

Clause 8.7.1 – Control of nonconforming outputs Has the organization ensured that identified nonconforming outputs shall be controlled to prevent their unintended use or release and that such non-conformance situations shall be documented with actions taken recorded?	√	Yes
		No

Please provide details of objective evidence (type of documentation) which the auditor reviewed during the audit to satisfy the above process:

The company delivers products as per customer specification and any changes by the customer is to be communicated to the company

which is informed to the production planning and control. The company follows strict adherence to Production Plan Sheet and in process inspection are in place. In process and final inspection is carried out before release of the product. There were no customer complaints in recent past apart from 4 concerns raised during the DLS Setup for Load Rack & CPU rack supplied to M/s Mercedes Benz on 22.05.2024.

Is the management system for above element is effective, appropriate, capable to maintain throughout the registration cycle and in compliance with current management systems	√	Yes
		No

REPORT SECTION 10 – PERFORMANCE EVALUATION AND IMPROVEMENT

Clause 9.1.1 – Monitoring, measurement, analysis, and evaluation Has the organization determined what needs to be monitored and measured together with the frequency and methods to be used in all areas/activities and indicators relevant to the required levels of conformance and performance?	√	Yes
		No

REPORT SECTION 10A - (QMS ONLY) [PLEASE DELETE THIS SECTION IF NOT APPLICABLE]

Clause 9.1.1 – Monitoring, measurement, analysis, and evaluation Are the methods used to monitor quality characteristics appropriate and suitable in relation to the products and/or services provided?	√	Yes
		No

The auditor is to provide a summary of evidence reviewed of the monitoring and measurement methods used to monitor quality characteristics of products or services during the different stages in manufacturing or service provision.

Sl. No	Measurement stage	Evaluation Methods	Frequency of check
1	Inward Inspection	As per the product specifications of various procured parts	Every lot as per the Quality Plan/product testing requirements
2	Process Inspection	Product characteristics as per the client requirements	Every lot as per the Quality Plan/product testing requirements
3	Final Inspection	Product characteristics as per the client requirements	Every lot as per the Quality Plan/product testing requirements

Clause 9.1.2 – Customer Satisfaction Are the methods used to monitor customer perception of the degree to which their needs and expectations have been fulfilled appropriate and implemented effectively?	√	Yes
		No
Clause 9.1.3 – Analysis and Evaluation Does the organization analyse and evaluate appropriate data and information from monitoring and measurement on all items required by the Standard and is this analysis and evaluation used as the basis for identification of need for improvement?	√	Yes
		No

Please provide details of the objective evidence/audit trial which the auditor sampled during the audit.

Evidenced the customer satisfaction report of the below client during the audit process
Customer Feedback vide Form No. QF/9.1.2/01, Rev 0 received from the customer on completion of the projects.
Customer satisfaction is measured in terms of on time delivery, customer feedback and regular customer orders.

1. Customer Feedback was received from M/s Mercedes – Benz Research & Development India Pvt ltd, Bangalore, through mail for one of the product DLS Setup for Load Rack & CPU rack supplied to M/s Mercedes Benz on 22.05.2024 based on the design input provided by the client. Product readiness was well within the set target dates of completion, Excellent.
2. M/s Bosch Limited, Naganathpura plant, 4 concerns were raised by the client, All the concerns were resolved by the team at site by the KIET team. Customer satisfaction of the product was sent thru email dated 22.05.2024, Found satisfactory.

Is the management system for above element is effective, appropriate, capable to maintain throughout the registration cycle and in compliance with current management systems	√	Yes
		No

REPORT SECTION 10 C – MULTISITE AND ADDITIONAL COMMENTS

MULTISITE PROJECTS: a statement is required by the audit team to confirm that the same management system governs the activities at all the sites & is actually applied to all the sites and that the whole organisation meets the requirements of the standard(s).

-

ADDITIONAL COMMENTS: Indicate any areas of the Management systems which require additional comments not included in the previous sections.

-

FINDINGS				
Sl. No	**Clause**	**Process/Area**	**Observations**	**M/m/OFI**
01	7.1.5	QA - Calibration	Master list of the Master list of Monitoring and Measuring Equipments and not evidenced the calibration report of the measuring Equipments Vernier caliper and Multimeter	NC
02	8.4	Purchase & Inward quality	Receive the incoming inspection report for each consignments received from M/s Sree Karan Metal Technologies for spl process – hard anodizing and MTC for Al 6082 from M/AV Engineering	OFI
03	8.3	Design & Development	May retain the design records – D& D Plan of the activities executed Objective evidence – M/s Bosch Limited, Product Length checking fixture for the order no POE- 0085345360, dated 29.7.2024.	OFI

CORRECTIVE ACTION REQUEST

COMPANY NAME	KIET TECHNOLOGIES PVT. LTD	**TRACKING NO:**	IND - 18728- 4 - QM	**DATE RAISED:**	28.11.2024

STANDARD:	ISO 9001:2015	**Clause/ Client Ref**	7.1.5.1 7.1.5.2	**CLASSIFICATION:**	**Major/Minor**	1 Minor	**CAR #01 of #01**

SECTION 1 – AUDITOR FINDINGS (The auditor is to provide detailed evidence of the non-conformance)

Process of review of the monitoring and measuring resources is not effective.

Objective evidences:

- Non availability of the master list of the monitoring and measuring resources.
- Calibration status of new digital Multimeter of equipment of Equipment, Make - Fluke- 17B+, Sl. no 59752530WS not evidenced used for Electrical measurements, also no identification of the Multimeter.
- Calibration of Digital Vernier calliper not evidenced, Range - 0-300 mm, Calibration of the equipment was due in October 2024. but the same measuring equipment is been used for measurement by client team.

SECTION 2 – CLIENT RESPONSE AND PLANNED ACTIONS

(The client should conduct a thorough investigation of the circumstances to correctly identify the Root Cause(s) involved and provide a relevant response to address the Root Cause)

CORRECTION by Client:-(What action you have taken to correct the problem, please provide the evidence to the auditor. This must be on past tense.)

Instrument will be calibrated and list of instruments updated

Client Analysis of the Root Cause: - (What do you think caused the problem in the first place, and why?)

As a instrument could not be not send for calibration hence list of instrument was not updated and could not be evidence to the auditor

Client Description of the specific Corrective Actions taken, or planned to be taken: - (What do you intend to do to address the Root Cause that you have identified above?)

Here of the it will Ensured, the calibration date of instrument are met and calibration done as the requirement

Proposed By – (Client Rep):	RAJESH K M	**Date by which Corrective Actions will be Taken:**	02.12.2024

SECTION 3 – REVIEW BY AUDITOR

Auditor has reviewed and accepted the client's correction and plan for corrective action - released for review and closure at the next audit. No objective evidence required at this time	X
Auditor has reviewed and accepted the client's correction and plan for corrective action and objective evidence of implementation – closed. Objective evidence required	
Auditor has reviewed, accepted and verified the correction and corrective actions proposed and objective evidence of implementation – closed or downgraded to minor. Objective evidence required	
Auditor has reviewed, accepted and verified the correction and corrective actions proposed but the effectiveness requires on-site audit before closure. Special visit required for onsite verification	

PLEASE PROVIDE WHAT THE AUDITOR REVIEWED TO CONFIRM THAT THE NON-CONFORMITY IS NOW CLOSED OR DOWNGRADED.

Master list prepared for Measuring resources, Calibration reports received post Calibration, Verified and Found satisfactory.

Response Reviewed By – (Auditor):	Ravikiran Vishwanath	**Date of Acceptance:**	12.12.2024

SECTION 4 – CAR – CLOSED. Please provide the details of objective evidence of implementation of the proposed correction and corrective action.

Verified the correction and corrective action initiated, same will be reviewed in next surveillance audit.

Verifying Auditor:	Ravikiran Vishwanath	**Close Out Date:**	12.12.2024

SECTION 12 - CORRECTIVE ACTION REQUEST

Corrective Action Requests should not be seen as critical comments but should be seen as areas where weaknesses in present approaches and practices do exist. Where the company is able, in the opinion of the audit team, to benefit from improvement actions to address the issues reported.
The details shown on the A Cube TIC Limited CAR Form identify the following:

- The standard with which the Corrective Action Request is associated.
- The clause reference with which the Corrective Action Request is associated.
- The classification of the Corrective Action Request
- The precise details of the evidence evaluated which demonstrates that a Corrective Action is requested.
- The requirements of the audit team to close out the Corrective Action Request

Corrective Action Request Classifications

CARs are classified as either **Major** or **Minor.**

A **Major** CAR is raised when the identified non-conformance represents either:

1) Consistent failure to address a fundamental requirement of the Standard or
2) Consistent failure to implement a documented requirement of the Management System - either in 1 area, or by identification of a number of individual non-conformances in the same activity over several areas.
3) An isolated non-conformance that directly impacts the Product/Service as required by a customer or external specification or that allows lack of control of an aspect which is deemed immediately hazardous and Dangerous.
4) Failure to identify/acknowledge and act up on a non-compliance with legislation or regulatory requirements.

A **Minor** CAR is raised in all other circumstances where a non-conformance is identified.

CORRECTIVE ACTION REQUEST RESPONSE & CLOSE OUT REQUIREMENTS

Any CAR (whether Major or Minor) must be responded to by the company within 30 days of being issued (or in the case of Re-Audits, before the expiry date of the current certificate). The response must detail the following, in the relevant sections of the CAR Form, including any necessary supporting attachments.

1) The Root Cause decided upon by the company.
   - A brief expression of fact, that attempts to neither explain the situation away nor rationalise the condition and that identifies the causational factor giving rise to the non-conformance reported.
2) Proposed correcting actions.
   - What the company intend to do to correct the problem and eliminate any continuance of the non-conformance as well as including any investigation of other instances of the non-conformance that may have occurred, and eliminate any continuation

3) Proposed Corrective Actions.
   - What the company intend to do to address the root cause that they have identified to prevent any future occurrence
   - The dates when such correcting and corrective actions have or will be implemented.

Wherever possible these responses must be supported by objective evidence that the described corrections and corrective actions have been taken (revised documentation, records of implementation, for example). On receipt of these responses the Lead Auditor will, within a maximum of a further 30 days from date of receipt, review for adequacy against the reported non-conformance and, as appropriate either:

1. Close out the Corrective Action Request on the basis of the response, if supported by documentary evidence
2. Accept the response as adequate to the Corrective Action Request and release the issue for further audit of effective implementation at time of next Surveillance.
3. Accept the response as adequate to Corrective Action Request but identify the need for a "special visit" to review implementation of described actions for effectiveness and then, if appropriate, close out the Corrective Action Request.
4. Accept the responses as adequate to the reported non-conformance and downgrade the Major to a Minor to release certification recommendation on the basis that the activity described in the response is scheduled to be auditable at time of surveillance. (Evidence of implementation must have been provided)

Reject the response as inadequate to the Corrective Action Request and request more information.

APPEALS AND COMPLAINTS INFORMATION:

Should you feel that the findings of the Audit Team on the Registration or Surveillance Audit were inappropriate, and you wish to challenge these findings, or you are dissatisfied with the conduct of the Audit Team or its professionalism, you have the right of Complaint or Appeal. If you disagree with the findings of the Audit Team in the first instance, you should make an informal Appeal to the Team Leader, and question the findings at the Closing Meeting, who may consider your comments justified and make an adjustment to the findings. Should you not receive satisfaction from the Team Leader and wish to lodge a formal Appeal, the following procedure should be followed. Alternatively, should you wish to make a Complaint about the conduct of the Audit Team, but do not wish to do so through the Team Leader, then you should contact the Local Office Certification Manager directly, who will issue you with a Complaints Form.

APPEAL

- Contact the Local A Cube TIC Limited Office Certification Manager within seven days of the Audit and advise that you intend to Appeal against the findings of the Audit Team. Alternatively, you may contact the Compliance & Management Systems Manager at A Cube TIC Limited Head Office. Tel +44 - 01275 397423.
- An Appeal Form will be sent to you. Complete and return the Appeal Form to the Compliance & Management Systems Manager. The Appeal Form must be submitted within 30 days of receipt from A Cube TIC Limited.
- An initial review and investigation shall be carried out by the Local A Cube TIC Limited Office Certification Manager, who will contact you to discuss the Appeal lodged. Should the Certification Manager agree that you have been unfairly treated, they will overturn the findings of the Audit Team and advise in writing. If the Certification Manager concurs with the Audit Team, then the Appeal Form will be passed to the Compliance & Management Systems Manager for review. Should the Compliance & Management Systems Manager consider you have been unfairly treated, they will overturn the findings of the Audit Team. However, should the Compliance & Management Systems Manager Concur with the Audit Team, the Appeal will be passed to the CEO, where the same procedure will apply. If rejected, then it will be lodged with the Independent Appeals Panel. You will be advised in writing that the Appeal is to go forward to the Independent Appeals Panel and will be advised of the details of the panel members.
- Should you feel that the makeup of the panel constitutes a conflict of interest, and object to any of the Panel members, then you have the right to dispute the formation of the panel and must submit your objections in writing within 15 days of notification by A Cube TIC Limited that your Appeal will be reviewed by the Independent Appeals Panel. Your objection must show clearly the reasons for the objection, which will be considered by the Chairperson of the Panel who will, if they feel your objection is justified, remove the offending member and appoint an alternative.
- You will then be advised in writing of the results of the deliberations of the panel. In addition, all Appeals submitted to A Cube TIC Limited will also be reviewed as part of the Surveillance Audit process by the Accreditation Body under which your Audit was carried out, to ensure fairness and impartiality of the Appeal process.
- Submission, investigation, and decision on appeals shall not result in any discriminatory actions against the appellant.

COMPLAINT

Unlike Appeals, there are no time limitations for making a Complaint. However, should there be a considerable time lapse between the perceived offence and the Complaint being submitted, it will make impartial investigation more difficult. Complaints will be reviewed and investigated by the Local A Cube TIC Limited Office Certification Manager with whom you applied for registration. They will be responsible for dealing with the Complaint and coming to a conclusion, which will be provided to you in writing. Should you be dissatisfied with the response then you may contact the Compliance & Management Systems Manager at A Cube TIC Limited Head Office to discuss the Complaint further. Tel +44 - 01275 397423., email: k.bashar@acubetic.com.

Regardless of the conclusions, all Complaints received, regardless of the location, are forwarded to the A Cube TIC Limited Head Office for information, and in addition are reviewed by the CEO. They are also collated and submitted to both the Independent Council of A Cube TIC Limited and the Accreditation Body, who will ensure that your Complaint has been dealt with fairly and without bias

REPORT SECTION 13 – THREE YEAR SITE VISIT PLAN

P = Planned; X = Completed; C = Outstanding CAR, N/A = Not Applicable

STANDARD REQUIREMENTS (SELECT ONE OPTION FROM BELOW)			Dept Function	Main Re-audit	YEARLY:		6 MONTHLY:				
ISO 9001:2015	X										
ISO 14001:2015					1	2	1	2	3	4	5
ISO 45001:2018											
Use of Accreditation body and A Cube TIC logo*			1,2	X	X	P					
Previous CARs (if applicable) *			7	X	X	NA					
4	**Context of the organization ****										
4.1	Understanding the organization and its context		1.2	X	X	P					
4.2	Understanding the needs and expectations of interested parties		1,2	X	X	P					
4.3	Determining the scope of management system		1 to 10	X	X	P					
4.4	Management system and its processes		1 to 10	X	X	P					
5	**Leadership ***										
5.1	Leadership and commitment		2	X	X	P					
5.2	Policy		2,3	X	X	P					
5.3	Organizational roles, responsibilities, and authorities		1 to 10	X	X	P					
5.4	Consultation and participation of workers - OHSMS		NA	NA	NA	NA					
6	**Planning**										
6.1	Actions to address risks and opportunities		1 to 10	X	X	P					
	Including environmental Aspects (EMS)**		NA	NA	NA	NA					
6.2	Objectives and planning to achieve them *		1 to 10	X	X	P					
6.3	Planning of changes *		2,3	X	X	P					
7	**Support**										
7.1	Resources		1 to 10	X	X	P					
7.2	Competence		1 to 10	X	X	P					
7.3	Awareness		1 to 10	X	X	P					
7.4	Communication		1 to 10	X	X	P					
7.5	Documented information		6 to 10	X	X	P					
8	**Operation**										
8.1	Operational planning and control **		6 to 10	X	X	P					
	Including EMS/OHSMS		NA	NA	NA	NA					
8.2	Requirements for products and services – QMS		6	X	X	P					
	Emergency Response – EMS/OHSMS *		NA	NA	NA	NA					
8.3	Design and development of products and services – QMS		06	X	X	P					
8.4	Control of externally provided of processes, products, and services – QMS		1 to 10	X	X	P					
8.5	Production and service provision – QMS **		1 to 10	X	X	P					
8.6	Release of products and services – QMS *		1 to 10	X	X	P					
8.7	Control of nonconforming outputs – QMS		1,2	X	X	P					
9	**Performance evaluation ***										
9.1	Monitoring, measurement, analysis, and evaluation		1 to 10	X	X	P					
9.2	Internal audit		4 to 10	X	X	P					
9.3	Management review		1 to 10	X	X	P					
10	**Improvement ***										
10.1	General		4 to 10	X	X	P					
10.2	Incident (OHSMS), Non-Conformity and Corrective Action		1 to 10	X	X	P					
10.3	Continual improvement		1	X	X	P					
CORE PROCESSES											
Assembly			7	X	X	P					

Testing	7			X		X	P					
Area/Function/Department Designation	1	2	3	4	5	6	7	8	9	10	11	12
Indicate to the right the **specific area(s), Function(s) or Department(s)** which have responsibility for each of the clauses of the standard. This needs to be specific to the client. On the audit plan above, indicate against each clause of the standard the numerical designation allocated to each Area, Function or Department for that clause where it indicates "Department"	MR	TOP Management	HR & Training	Marketing	Purchase	Design & Development	Production	Inspection & QC	Stores	Maintenance		

REPORT SECTION 9A – THREE YEAR SITE VISIT PLAN (MULTI SITES ONLY - SAMPLE APPLIED AND NOT APPLIED)

P = Planned; X = Completed; C = Outstanding CAR; N/A = Not Applicable

Please indicate what functional areas will be audited at each visit at each of the sites. In addition, please indicate what elements of the company's Scope of Registration are applicable at each site.

Below – Sites and functional area planning	**Areas/Functions/Departments to be audited**											
Please indicate what functional areas will be audited at each visit at each of the additional sites. In addition, please indicate what elements of the company's Scope of Registration are applicable at each site. Note: At the Stage 1, please indicate what areas are planned to be visited during the whole of the 3-year registration period. For a re audit visit, indicate what areas are due to be visited during the subsequent surveillance visits during the period of registration. Use X to indicate the activities audited. Use P to indicate activities it is planned to audit. If the audit programme consists of 5 surveillance visits instead of the 2 surveillance visits indicated, add additional surveillance visits as appropriate.	1	2	3	4	5	6	7	8	9	10	11	12
				Not Applicable								

Enter Site 1 – Head/Central Office
Company name and Address

Visit type	**Date(s)**	**Completed by (Auditor)**	1	2	3	4	5	6	7	8	9	10	11	12
Stage 2/Re-Audit														
1st Surveillance		Not Applicable												
2nd Surveillance														
Elements of the Scope relevant at this site														

CORE PROCESSES (when applicable)	Stage 2 / Re Audit	1^ Surv	2^ Surv	3^ Surv	4^ Surv	5^ Surv
Update the core processes						
Update the core processes						
Update the core processes						
Update the core processes						
Update the core processes						

REPORT SECTION 13B – THREE YEAR SITE VISIT PLAN (OFF/INSTALLATION SITES ONLY)

Type of audit	Activity to be audited	Date planned. (month/year)	Date completed. (actual)	Site location	Complete by (auditor)

	Not Applicable				

SECTION 13C – SITE(S) LAYOUT

During the visit, request a site plan(s) and attach it to the report. If the client cannot provide one, please provide a simple sketch of each site layout showing the rough location of each facility at each site. If the company is located in one building, only a simple description of this is facility is required (E.G. Operating on two floors of a 10-storey office block. Photographs are acceptable if client agreed.

Note to Auditor

If the site layout has not changed since time of the previous audit visit, then "No change from previous audit visit" should be entered into the Site layout section below.

No change from previous audit visit

Notes:

The A Cube TIC Limited Codes of Practice require that you notify the local A Cube TIC Limited office or your allocated auditor of significant changes to the management system, location, ownership, employee numbers, products and process including new products and processes, or imposition of customer enforced sanctions. In addition, A Cube TIC Limited should be advised of any regulatory non-compliances or incidents that require notification to regulatory authorities.

The report and related documentation are intended for its clients only. A Cube TIC Limited does not accept or assume any responsibility or liability for, or in connection with, any other purpose for which it is used. Or to any other person to whom the report is given, shown or into whose possession it may come. No other person or organization shall be entitled to rely upon the report.