

**TUV INDIA PRIVATE LIMITED**  
**INSPECTION VISIT REPORT**  
IVR-080101287425/1-A5-Rev.0

<b>General:</b>												
<b>TUV India Control Number:(SAP Number)</b>		080101287425/1 (8124017684)		<b>Branch:</b>	Mumbai							
<b>Notification Number:</b>		12		<b>Date(s) of Inspection:</b>	, 02/09/2025,01/09/2025							
<b>Project Name &amp; Location:</b>		Polysilicon Manufacturing Facility		<b>Inspection Location:</b>	Maharashtra							
<b>TUV India Client Name:</b>		CRYSTAL INDUSTRIAL SYNDICATE PVT. LTD.		<b>End User Name:</b>	Reliance Industries Ltd							
<b>DEC / PMC / EPC Name:*(If applicable)</b>		-		<b>DEC / PMC / EPC Assignment Number:*(If applicable)</b>	-							
<b>Vendor Name &amp; Location:</b>		Crystal Industrial Syndicate Pvt. Limited		<b>P.O. Number:*(Client PO on Vendor)</b>	911/240695512 Dated 05/01/2024							
<b>Sub Vendor Name &amp; Location:*(If applicable)</b>				<b>P.O. Number:*(If applicable - Vendor PO on Sub Vendor)</b>								
<b>Stages Of Inspection:</b>												
<input type="checkbox"/> Kick Off / Pre Inspection Meeting		<input type="checkbox"/> Material Identification		<input type="checkbox"/> Interim Stages								
<input type="checkbox"/> Document Review		<input checked="" type="checkbox"/> Final Inspection		<input type="checkbox"/> Re-Inspection								
<b>Item Description:</b>												
<b>PO Item No.</b>	<b>Item Code</b>	<b>Item Description / Identification / MTC Number</b>		<b>UOM</b>	<b>P.O. Quantity</b>	<b>Offered Quantity</b>						
						<b>Acceptable Quantity</b>						
<b>Reference Documents:</b>												
<b>Sr. No.</b>	<b>Document Name</b>	<b>Client Document Number</b>	<b>Vendor Document Number</b>	<b>Approval Status</b>								
<b>Inspection Activities Carried Out:</b>												
<b>Stages Witnessed:</b>												
<b>Documents Reviewed:</b>												
<b>Details of Equipment(s) / Instrument(s) used for measuring / testing During Inspection:*(Refer Notes)</b>												
<b>Sr. No.</b>	<b>Detail of Equipment(s)/ Instrument(s)</b>	<b>Range</b>	<b>ID</b>	<b>Validity till Date</b>	<b>Calibration Certificate Number</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">NABL / OTHER CERT. BODIES / NABL Traceability</td> <td style="width: 50%; text-align: center;">NON-NABL</td> </tr> <tr> <td colspan="2" style="text-align: center; font-size: small;">Please tick or Write Yes (whichever is applicable)</td> </tr> <tr> <td style="text-align: center;"><b>See Note 1 &amp; 2</b></td> <td style="text-align: center;"><b>See Note 3</b></td> </tr> </table>	NABL / OTHER CERT. BODIES / NABL Traceability	NON-NABL	Please tick or Write Yes (whichever is applicable)		<b>See Note 1 &amp; 2</b>	<b>See Note 3</b>
NABL / OTHER CERT. BODIES / NABL Traceability	NON-NABL											
Please tick or Write Yes (whichever is applicable)												
<b>See Note 1 &amp; 2</b>	<b>See Note 3</b>											
<small>Notes:</small> 1) Other Certifying bodies are: NPL-India, CIPM (International Committee for Weights & Measures), ILAC & APLAC MRA Signatories. 2) Visiting inspector to ensure continued suitability for intended use, periodic maintenance, proper identification and valid calibration records and traceability to known National / International standards of the measuring Instrument(s) / testing equipment(s). 3) Non NABL: If the calibration certificate(s) for the measuring instrument(s) / equipment(s) used during inspection do not have traceability to NABL / Other certifying bodies, then the scope of review is limited only to technical content in the calibration certificate. 4) In lieu of table above inspectors may collect master list from manufacturer / vendor/ sub vendor with all above details clearly highlighting the details of instrument(s) / equipment(s) used during inspection.												
<b>Conclusion :</b>												
<b>Pending activities from this Visit:</b>												
None												
<b>Identification of inspected Item(s):</b>												

**Disclaimer:** This IVR shall not be considered as final acceptance of inspected item(s).The final acceptance will be given through Inspection Release Note.  
The inspection by TUV India Pvt. Ltd., review of Test Certificates / Reports and issue of Inspection Visit Report does not relieve the Client / Supplier / Manufacturer / Stockiest from their responsibility towards the Client / End User to supply the genuine material / item(s) and document(s) in full compliance with applicable Order, Specification, Technical, Quality, Quantity, Warranty, Guarantee requirements. Supplier / Manufacturer / stockiest is wholly legally responsible for genuineness of the material / item(s) supplied and document(s) submitted. TUV India's responsibility is only limited to correctness of inspection results including review of the documents, within its agreed scope against written requirements and neither TUV India nor any of its group companies, associates or employees are in any way/ legally responsible for genuineness of the material / item(s) and document(s). If the calibration certificate(s) for the measuring instrument(s) / equipment(s) used during inspection do not have traceability to NABL / Other certifying bodies, then the scope of review is limited only to technical content in the calibration certificate.

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801, Raheja Plaza - I, LBS Marg, Ghatkopar (West), Mumbai - 400086, Maharashtra, India.  
Tel: + 91 22 66477000, Email: [inspection@tuv-nord.com](mailto:inspection@tuv-nord.com); Website: [www.tuv-nord.com/in](http://www.tuv-nord.com/in).

**Form No.:** F / INSP / VR / 11 - R13 / TIMES; Revision Date: 27.10.2023

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<b>Areas of Concerns:</b>		
None		
<b>Non Conformities raised / Discrepancies observed during inspection</b> <small>(If Any, Mention TUV India NCR Number):</small>		
None		
<b>Attachments:</b>		
<input type="checkbox"/> Inspection records – Total Page Nos.	<input type="checkbox"/> Master List of calibrated Instruments / equipment :	
<input checked="" type="checkbox"/> Inspection Photos – Refer Page Nos. [TempInspectionPhotosNo]	<input type="checkbox"/> Others (Specify) :	
<b>Authorised Signature:</b>		
<b>TUV India representative:</b>		<b>Vendor / Sub Vendor Representative</b> <small>(If Applicable):</small>
<b>Name:</b> Shrikant Patil	<b>Date:</b> 20/08/2025	<b>Name:</b>
<b>Distribution List:</b> <input type="checkbox"/> TUVI Client / End User <input type="checkbox"/> TUVI Executing Branch / TUV Originating Branch <input type="checkbox"/> Vendor / Sub Vendor		
<b>Revision Number</b> (If Applicable) [0] : -		
<b>This Document Supersedes IVR No. :-</b>		

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**Form No.:** F / INSP / 03 – R08 / TIIMES; Revision Date: 27.10.2023