## **TUV INDIA PRIVATE LIMITED INSPECTION VISIT REPORT**

IVR-010101022125/1-1-Rev.0

| Gene   | ral:                             |                                    |                                    |   |                                      |                         |  |  |                                    |                     |   |  |                        |  |  |
|--|----------------------------------|------------------------------------|------------------------------------|---|--------------------------------------|-------------------------|--|--|------------------------------------|---------------------|---|--|------------------------|--|--|
| TUV India Control Number:(SAP<br>Number)             |                                  |                                    | 010101022125/1<br>(8123458158)     |   |                                      |                         | Branch:  |  |                                    |                     | Mumbai  |  |                        |  |  |
| Notification Number:                                 |                                  |                                    |                                    | email   |                                      |                         |  | Date(s) of Inspection:   |                                    |                     | 22/0  | 22/01/2025   |                        |  |  |
| Project Name & Location:                             |                                  |                                    |                                    | Udaipur UnitSURYA CHAINS PVT.<br>LTD              |                                      |                         | /T.  | Inspection Location:   |                                    |                     | DUM   | DUMMY ADDRESS  |                        |  |  |
| TUV India Client Name:                               |                                  |                                    |                                    | RAMA PHOSPHATES LIMITED<br>(UDAIPUR UNIT) 4807/11 |                                      |                         |  | End User Name:   |                                    |                     |   | RAMA PHOSPHATES LIMITED<br>(UDAIPUR UNIT) 4807/11 (50055)  |                        |  |  |
| DEC / PMC / EPC Name:(If applicable)                 |                                  |                                    |                                    | -   |                                      |                         |  | DEC / PMC / EPC Assignment<br>Number:<br>(If applicable)   |                                    |                     |   | -  |                        |  |  |
| Vend   | Vendor Name & Location:          |                                    |                                    |   | DUMMY VENDOR                         |                         |  |  | P.O. Number: (Client PO on Vendor) |                     |   |  | ABCDE Dated 01/01/2025 |  |  |
| Sub Vendor Name & Location:                          |                                  |                                    |                                    |   |                                      |                         |  | P.O. Number: (If applicable – Vendor PO on Sub Vendor)   |                                    |                     |   |  |                        |  |  |
| Stage  | es Of Inspectio                  | n:                                 |                                    |   |                                      |                         |  |  |                                    | 1                   |   | No. of Concession, Name of Street, or other Persons, Name of Street, or ot | . \                    |  |  |
| ☐ Ki   | Kick Off / Pre Inspection Meetin |                                    |                                    |   | ng Material Identificat              |                         |  | on Interim   |                                    |                     | m Stages  | Stages   |                        |  |  |
| Document Review                                      |                                  |                                    |                                    | Final Inspection                                  |                                      |                         |  | ☐ Re-Inspe   |                                    |                     | spection  | 1000   |                        |  |  |
| Item   | Description:                     |                                    |                                    |   |                                      |                         |  |  | 445                                |                     |   |  |                        |  |  |
| PO Item Item Descrip Item Code No.                   |                                  |                                    | tion / Identification / MTC Number |   |                                      |                         |  |  | P.O.<br>uantity                    | Offered<br>Quantity | Acceptable<br>Quantity                              |  |                        |  |  |
| Reference Documents:                                 |                                  |                                    |                                    |   |                                      |                         |  |  |                                    |                     |   |  |                        |  |  |
| Sr.<br>No.   | Document Name   Clier            |                                    | nt Document Number                 |   |                                      | Ve                      | endor Document Number  |  |                                    | Approv              | Approval Status                                     |  |                        |  |  |
| Inspection Activities Carried Out:                   |                                  |                                    |                                    |   |                                      |                         |  |  |                                    |                     |   |  |                        |  |  |
| Stage  | es Witnessed:                    |                                    |                                    |   |                                      |                         |  |  |                                    |                     |   |  |                        |  |  |
| Docu   | ments Reviewe                    | ed:                                |                                    | 1   |                                      |                         | turbula de la constitución de la | And Control of the Co |                                    |                     |   |  |                        |  |  |
| Detai  | ils of Equipmen                  | ıt(s) / In                         | strum                              | ent(s) used                                       | for me                               | asuring / te            | sting  | During Inspec  | ction:(Refer                       | Notes)              |   |  |                        |  |  |
| Sr. Detail of Equipment(s)/                          |                                  |                                    | nge                                | ID  |                                      | Validity till<br>Date   |  | Calibrat<br>Number   | ficate                             |                     | NABL / OTHER<br>CERT. BODIES /<br>NABL Traceability | NON-NABL   |                        |  |  |
|  |                                  |                                    |                                    |   |                                      |                         |  |  |                                    |                     | Please tick or Write Yes                            | (whichever is applicable)  See Note 3  |                        |  |  |
| Visiting i<br>equipment(     Non NAB<br>certificate. | L: If the calibration certifica  | ed suitability<br>ite(s) for the n | for intended<br>neasuring in       | d use, periodic maint                             | tenance, propo<br>ment(s) used c     | er identification and v | valid calib<br>ot have tr  | oration records and traces   | r certifying bodi                  | es, then the scope  | of review is limi                                   | of the measuring Instrume  | ent(s) / testing       |  |  |
| Pending activities from this Visit:                  |                                  |                                    |                                    |   |                                      |                         |  |  |                                    |                     |   |  |                        |  |  |
| Pendii<br>None                                       | ng activities fr                 | om this                            | visit:                             |   |                                      |                         |  |  |                                    |                     |   |  |                        |  |  |
|  | fication of inen                 | ected I                            | tem(s)                             | ):  |                                      |                         |  |  |                                    |                     |   |  |                        |  |  |
|  |                                  | Jordan                             | (3)                                | •   | Identification of inspected Item(s): |                         |  |  |                                    |                     |   |  |                        |  |  |

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 to solly 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. rem(s) and accument(s). It the calibration certificate(s) for the measuring instrument(s) / equipment(s) used during inspection do not have tracent to technical content in the calibration certificate.

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

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| TUV INDIA PRIVATE LIMITED INSPECTION VISIT REPORT |
|---|
| INSPECTION VISIT REPORT                           |
| IVR-010101022125/1-1-Rev.0                        |

| Areas of Concerns:   |                 |   |  |  |  |  |  |  |
|--|-----------------|---|--|--|--|--|--|--|
| None   |                 |   |  |  |  |  |  |  |
| Non Conformities raised / Discrepancies observed during inspection (IT Any, Mention TUV India NCR Number): |                 |   |  |  |  |  |  |  |
| None   |                 |   |  |  |  |  |  |  |
| Attachments:   |                 |   |  |  |  |  |  |  |
| <ul><li>Inspection records –<br/>Total Page Nos.</li></ul>   |                 | Master List of calibrated Instruments / equipment : |  |  |  |  |  |  |
| Inspection Photos – Refer Page Nos.  | -               | Others (Specify):                                   |  |  |  |  |  |  |
| Authorised Signature:  |                 |   |  |  |  |  |  |  |
| TUV India representative:  |                 | Vendor / Sub Vendor Representative (If Applicable): |  |  |  |  |  |  |
|  |                 |   |  |  |  |  |  |  |
| Name: test user  | Date:22/01/2025 | Name:   |  |  |  |  |  |  |
| Distribution List: TUVI Client / End User TUVI Executing Branch / TUV Originating Branch Vendor Vendor     |                 |   |  |  |  |  |  |  |
| Revision Number (If Applicable) [0]: - This Document Supersedes IVR No.:-                                  |                 |   |  |  |  |  |  |  |
| •  | T AMERICAN TO   |   |  |  |  |  |  |  |

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