

# Malaysian Sustainable Palm Oil (MSPO) Summary Report

Organization:	Kilang Sawit C.P. Sdn. Bhd - 26993	38-M					
Address:	<ul> <li>Mill Location Address:</li> <li>Kilang Sawit C.P. Sdn. Bhd, 28000 Temerloh, Pahang Darul Makmur.</li> <li>Head Office Address:</li> <li>No.11, Jalan Maju Barat, Taman Maju, 83000 Batu Pahat, Johor Darul Takzim</li> </ul>						
MSPO Standard(s) Used:	MS2530-4:2013 Part 4: General pri for palm oil mills	inciples	Accreditatio Body(s):	n	Department Standards of Malaysia		
Representative:	<b>Mr. Tey Yong Jian</b> Mill Manager. Tel (M): +60 9296 2222  Email (E): <u>kscp88@gmail.com</u>						
Site(s) audited:	Charuk Puting Palm Oil Mill	Date(s)	of audit(s):	15 <sup>th</sup> & 1	16 <sup>th</sup> Aug 2019		
Audit Scope:	Processing of Oil Palm Fresh Fruit (CPO) and Palm Kernel (PK) in cor MS2530-4:2013 Part 4.						
Mill Capacity:	90 mt/hr	Total Ar (Certifie		Nil			
Visit Certification Assessment:	Main Assessment 1	Number	of Sites:	1 Mill			
Lead auditor:	Mohd Syafiq Zawawi	Addition member		Daryl T	an (Trainee Audtior)		
Certificate Number:							
Date of Issue:		Date of	Expiry				
This report is con SGS office.	fidential and distribution is limited	I to the a	udit team, cli	ent repr	esentative and the		

### 1. Audit Objectives

The objectives of this audit were:

- to confirm that the management system conforms with all the requirements of the audit standard;
- to confirm that the organization has effectively implemented the planned management system;
- to confirm that the management system is capable of achieving the organization's policy objectives.

### 2. Scope of MSPO Certification

1. Processing of Oil Palm Fresh Fruit Bunch (FFB) for the Production of Crude Palm Oil (CPO) and Palm Kernel (PK) in compliance to the MSPO Certification Standard MS2530-4:2013 Part 4.

This is a multi-site audit and an Appendix listing all relevant sites and/or remote locations has been established (attached) and agreed with the client

Job n°:	MY05458	Report date:	05.09.2019	Visit Type:	MA	Visit n°:	1
CONFID	ENTIAL	Document:	GS0304	Issue n°:	10	Page n°:	1 of 23



# 3. Current Certification

Currently Kilang Sawit C.P Sdn. Bhd. is being certified with other certification scheme as below:

Current Certification (Please tick the certification you are currently certified)							
	ISO 9001		НАССР				
	EMS 14001		RSPO				
	OHSAS 18001		ISCC				
	ISO 22001		GMP Plus				
	HALAL		KOSHER				
	Co-GAP		None / Others:				

Job n°:	MY05458	Report date:	05.09.2019	Visit Type:	MA	Visit n°:	1
CONFID	ENTIAL	Document:	GS0304	Issue n°:	10	Page n°:	2 of 23



# 4. Assessment Process and Audit Programme

### 4.1. Sampling Method

#### **Sampling Methodology and Rationale**

Sampling of the mill to be audited has been conducted in accordance to the Risk Management (MPOB/MSPO/RMP/06) documents as below:

S = r√n

Risk Factor: Not Applicable

Since this is an individual certification. Sampling method is not applicable.

The methodology for objective evidence collection included physical site inspection, observation of tasks and processes, interview with workers, families and stakeholders, documentation review and monitoring data. Detailed audit plan can be referred below.

### 4.2. Audit Plan

The assessment was conducted in 2 audit days and involving a Mill of Kilang Sawit C.P. Sdn. Bhd. The audit covers documentation review, internal procedures, management system, field inspection as well as identification of any significant issues for both environment or social issues.

Date	Time	Auditor	Organisational and Functional Units/ Processes and Activities	Key Contact
15 <sup>th</sup> Aug 2019	0830	MSZ	Arrival of Auditor Opening Meeting at Charuk Putting Oil Mill	Management Rerpresentative & Key Personnel
	0900 - 1700	MSZ	<ul> <li>Kilang Sawit C.P. Sdn. Bhd. MS 2530-4-2013 (Part 4) General Principles For Palm Oil Mills</li> <li>Principle 1: Management commitment and responsibility</li> <li>Principle 2: Transparency</li> <li>Principle 3: Compliance to legal requirements</li> </ul>	Mill Management Personnel
			<ul> <li>Principle 4: Social responsibility, health, safety and employment condition</li> <li>End of Day 1</li> </ul>	
16 <sup>th</sup> Aug 2019	0830 - 1600	MSZ	<ul> <li><u>Kilang Sawit C.P. Sdn. Bhd.Bhd</u> (cont'd)</li> <li>Principle 5: Environment, natural resources, biodiversity and ecosystem services</li> <li>Principle 6: Best practices</li> </ul>	Mill Management Personnel
	1600 – 1700	MSZ	Preparation for closing Closing Meeting	Management Rerpresentative & Key Personnel

Job n°:	MY05458	Report date:	05.09.2019	Visit Type:	MA	Visit n°:	1
CONFID	ENTIAL	Document:	GS0304	Issue n°:	10	Page n°:	3 of 23



# 4.3. Certification Body

Auditor	Role	Qualification, Education, Working Experience.
Mohd Syafiq Zawawi	Lead Auditor	<ul> <li>Holder of Mechanical Engineering Diploma</li> <li>Attended MSPO Auditor Course</li> <li>Attended Integrated Management System Course</li> <li>Qualified MSPO Auditor</li> <li>10-year experience in Plantation Industry (Mill, Downstream, Refinery, Auditing)</li> <li>freelance auditing since 2018</li> </ul>
Daryl Tan	Trainee Auditor	<ul> <li>Holder of Degree in Business with Management</li> <li>Attended MSPO Auditor Course</li> <li>Registered SHO &amp; CepSWaM</li> <li>5 years experience in ESH</li> <li>freelance auditing since 2018</li> </ul>

Job n°:	MY05458	Report date:	05.09.2019	Visit Type:	MA	Visit n°:	1
CONFID	ENTIAL	Document:	GS0304	Issue n°:	10	Page n°:	4 of 23



### 4.4. Audit Planning Matrix

	Visits:	MA (Stg 2)	SA1	SA2	SA3	SA4
	Dates:	15-16/08/19				
Area / Department / Process / Function	Auditor(s):	1. Mohd Syafiq Zawawi 2. Daryl Tan				
Charuk Puting POM	MS2530-4:2013 Part 4: General principles for palm oil mills	X	0	0	0	0

\*For each completed visit, mark "X" in the box for each department or process covered. For planned visits, indicate with an "O" in the box for each process to be covered.

Job n°:	MY05458	Report date:	05.09.2019	Visit Type:	MA	Visit n°:	1
CONFID	ENTIAL	Document:	GS0304	Issue n°:	10	Page n°:	5 of 23



# 5. Previous Audit Results (Not Applicable)

The results of the last audit of this system have been reviewed, in particular to assure appropriate correction and corrective action has been implemented to address any nonconformity identified. This review has concluded that:

Any nonconformity identified during previous audits has been corrected and the corrective action continues to be effective.

The management system has not adequately addressed nonconformity identified during previous audit activities and the specific issue has been re-defined in the nonconformity section of this report.

# 6. Audit Findings Summary and Recommendations

The management system documentation demonstrated conformity with the requirements of the audit standard and provided sufficient structure to support implementation and maintenance of the management system.	🛛 Yes	🗌 No							
The organization has demonstrated effective implementation and maintenance / improvement of its management system.	🛛 Yes	🗌 No							
The organization has demonstrated the establishment and tracking of appropriate key performance objectives and targets and monitored progress towards their achievement.	🛛 Yes	🗌 No							
The internal audit program has been fully implemented and demonstrates effectiveness as a tool for maintaining and improving the management system.	🛛 Yes	🗌 No							
The management review process demonstrated capability to ensure the continuing suitability, adequacy and effectiveness of the management system.	🛛 Yes	🗌 No							
Throughout the audit process, the management system demonstrated overall conformance with the requirements of the audit standard.	🛛 Yes	🗌 No							
The audit team concludes that the organization A has a has not established and main	ntained its								
management system in line with the requirements of the standard and demonstrated the ability of the system to systematically achieve agreed requirements for products or services within the scope and the organization's policy and objectives.									
Number of nonconformities identified: <b>0</b> Major Minor									
Therefore, the audit team recommends that, based on the results of this audit and the system's demonstrated state of development and maturity, management system certification be:									
Granted / Continued / Withheld / Suspended until satisfactory corrective action is completed.									

Job n°:	MY05458	Report date:	05.09.2019	Visit Type:	MA	Visit n°:	1
CONFID	ENTIAL	Document:	GS0304	Issue n°:	10	Page n°:	6 of 23



# 7. Significant Audit Trails Followed

The specific processes, activities and functions reviewed are detailed in the Audit Planning Matrix and the Audit Plan. In performing the audit, various audit trails and linkages were developed, including the following primary audit trails, followed throughout:

### 7.1. Details of Certified Entity

Estate/ Mill		Geo-Coordinate (GPS)
Estate/ Will	Location Address	Latitude, Longitude
Charuk Puting Palm Oil Mill	28000 Temerloh, Pahang Darul Makmur.	3.440178,102.491147

Tenerion Consistent Consistent Consistent Consistent Consistent Consistent

 Table 1: Address and Coordinates of Mill

Figure 1: Location of Kilang Sawit C.P. Sdn. Bhd. Temerloh Districts of Pahang

#### Description of Mill Processing Capacity

Kilang Sawit C.P Sdn. Bhd. (the company) incorporated in 13<sup>th</sup> July 1993 with the name as a New Structure Sdn. Bhd. and change the name to Kilang Kelapa Sawit D.M. Sdn. Bhd. on 1st November 2002. The Company changed to its existing name on 17th December 2003. The mill located in Temerloh District of Pahang while it Head Office located in Batu Pahat, Johor.

Under the Palm Oil Mill structure, it was consisted more than 181 staffs and workers. The palm oil mill is leaded by Factory Manager who is assisted by Mill manager. The mill manager is in charge of the entire palm oil operation including receiving, processing, and storage and dispatching activities. Mill Manager is assisted by respective Assistant Engineer in the mill.

Job n°:	MY05458	Report date:	05.09.2019	Visit Type:	MA	Visit n°:	1
CONFID	ENTIAL	Document:	GS0304	Issue n°:	10	Page n°:	7 of 23



Name of Mill	Actual Last FY 2017/2018	Actual L 2017/2		Estimated New FY 2018/2019 Estimated 2018/2019		-	
	FFB Process	CPO (MT)	PK (MT)	FFB Process	CPO (MT)	PK (MT)	
Kilang Sawit	F14.004.00	97,258.30	30,745.68	500,000,00	98,800.00	31,200.00	
C.P. Sdn. Bhd.			5.98%	520,000.00	19.00%	6.00%	

Table 2: Mill FFB Process, CPO & PK Production, OER & KER (Actual & Estimated)

### 7.2. Area of Plantations

	Area Statement (Ha)					
Estate	Titled Area (Ha)	Plante	ed (Ha)	Conservati		Others (Ha)
Estate	(Certified Area)	Immature Area (Ha) (Age group)	Mature Area (Ha) (Age group)	on (Ha)	HCV (ha)	
Nil						
TOTAL						

 Table 3: Hectarage Statement of Supplying Estate

### 7.3. Stakeholder Consultation and List of Stakeholders Contacted

Details of stakeholder inputs resulted from stakeholder consultation can be found in **Appendix 2**.

#### 7.4 Comment on MS2530-4 Compliance Status

Comment on Principle 1	Policy on Implementation of MSPO –
	Policy for the implementation of MSPO has been established by the company which is signed by the Company Executive Director on 18th

Job n°:	MY05458	Report date:	05.09.2019	Visit Type:	MA	Visit n°:	1
CONFIL	DENTIAL	Document:	GS0304	Issue n°:	10	Page n°:	8 of 23



	March 2019. The policy emphasizes on the commitment to continual improvement with the objective of improving the milling operation.
	The establishment of the policy has been made known to their respective stakeholders through various communication channel such as stakeholder meetings, display it on notice boards etc.
	Internal Audit –
	Internal audit was planned and conducted accordingly to determine the strong and weak points and potential area for further improvement in the sustainability implementation of the company. By doing so, the company could identify the insufficiency of its MSPO implementation as well as identifying every root cause and corrective action needed for each finding identified.
	To carry it out systematically and effectively, the company has established Internal Audit Procedure. An Internal Audit Report will be prepared then made available to the top management to be discussed in management review meeting which will be done periodically.
	Management Review –
	A management meeting was conducted after the completion of internal audit. Apart from discussing the internal audit result, the management had also go through the extent of discussing the policies and objectives suitability, evaluation of compliance with applicable legal requirements, result of participation and consultation of stakeholders, review on environmental & biodiversity objectives and corrective action, review on S&H objectives, review on employment condition, site management and recommendation for improvement.
	<u>Continual Improvement</u> –
	The POM has established action plan for continual improvement covering all aspect of the operations appropriate to the scale and intensity of its operations. Details of the continuous improvement plan for year 2018/2019 is made available to the audit team during the audit.
Comment on Principle 2	Transparency of documents relevant to MSPO requirements –
	The management documents are made publicly available except prevented by confidentiality. Documents such as policies and Complaints and Grievances Procedure were made available through notice boards which is situated at several places such as the mill entrance, workers housing area and the mill office. Apart from that, the publicly document can be view in the company website.
	Transparent method of communication and consultation –
	The company has established Stakeholder Consultation and Communication procedure. Based on the established procedure, means of communication can be in written method, circular, bulletins, meeting training, talk and briefing. Any inquiries that is not a complaint will be

Job n°:	MY05458	Report date:	05.09.2019	Visit Type:	MA	Visit n°:	1
CONFIL	DENTIAL	Document:	GS0304	Issue n°:	10	Page n°:	9 of 23



			directed to appointed Communication Representative (CR) and will be handled by the CR. The company has established Stakeholder List to help them better identified its relevant stakeholders.
			Traceability – The company is committed to implement and maintain the requirements for traceability and has established several standard operation procedures for traceability categorised into reception of its raw material, dispatch of its products and monitoring of sales activity. The SOPs were designed to suit unique responsibility of each personnel relevant to traceability practices.
			Personnel has been appointed to oversee the whole operation of the traceability system. Addition to that, the implementation will be audited every year during MSPO internal audit.
Comm	ent on Pri	nciple 3	Regulatory requirements –
			Legal documentation is maintained by the company covering the workers, social, environmental as per in the Legal and Other Requirements Register)". However, few of the activities was not in compliance as declare by their own internal verification and also few legal compliance as was not in line by the legal requirement, therefore major non-conformities is raised for this findings. The POM has listed all laws applicable to their operations in its legal requirement register. Observed that the list of laws highlighted within the standard are kept within a file that. However, there were few list of legal were left out in the legal register which resulted to the minor non-conformance. All list of laws is found was no be updated together with the latest version of the documented laws which raised on the minor findings. The Assistant Engineer, Mohd Hafiza Bin Ibrahim of the company himself has taken the responsibility of monitoring compliance and tracking update and changes in regulatory requirement.
			Legal land use rights –
			The mill management has provided documents showing legal ownership on the actual legal use of the land. The mill is located within the company land title. The worker accommodation, some effluent ponds were found to be outside the land title belonging to the site. This land H.S. (M) 15889 is rented to the site by Ungku Abdul Arif Bin Ungku Hasbar No land dispute case recorded. Further assessed complaint records, noted no complaint made pertaining to land issue.
			Customary rights –
			There are no issues or encumbered by customary rights in the land occupied by POM.
Comm	ent on Pri	nciple 4	Social Impact Assessment –
			SIA conducted internally by appointed consultant and estate staff. It was done to identify positive and negative impacts. Every feedback is being recorded and addressed accordingly by the estate management.
Job n°:	MY05458	Report date:	05.09.2019 Visit Type: MA Visit n°: 1
CONFID	ENTIAL	Document:	GS0304         Issue n°:         10         Page n°:         10 of



Noted from the inputs given by engaged stakeholders, several p impact was highlighted.	positive	
Mitigation Plan – Available. The plan was meant to mitigate negative impacts and to promote positive impacts identified. All feedbacks provided by the stakeholders were compiled into document Man Program SOP-16 F-03. Each feedback was classified either neg positive.	ks nageme	
For every feedback received, an acknowledgment notice will be the stakeholder and action plan to address the issue will be info the estate management.		
Complaints and grievances –		
SOP Complaints and grievances procedure dated Jan 2019. Pro of complaints and grievances included in the procedure to s suggested period should be taken to resolve any complaint rece	specify o	
The relevant stakeholders have been made aware of the compl grievance mechanism. It was communicated during series of sta meetings and briefing with workers. Copies of feedback for provided during the meetings and briefings done. It also made at the mill office.	akehold orm we	ler ere
Noted all the complaint and feedback forms from Social Assessment and Stakeholder Meetings are being retained accord		
Commitment to contribute to local sustainable development	<u>nts</u> –	
The mill has been actively contributing to its local developme surrounding communities including internal and external.	ent of tl	he
Employees health and safety –		
Sighted safety and health policy signed by Executive Direct 13/04/19. The establishment of the policy has been common through trainings and stakeholder meetings conducted.		
OSH Plan was sighted during the audit. The plan consist requirement of indicator 4.4.4.2 of this standard. All operation risk has been assessed and documented in the Form.		
Last audiometric test was conducted on 8th August 2018 with employees is having a hearing problem, however the recomment the Occupational Health Doctor was not implemented, hen findings is raised.	ndation	by
Safety trainings for employees exposed to chemicals ha conducted; records of the training are available in the Training Re		
Appropriate PPE are found to be distributed for the specific risk a operations as per in the HIRARC. For the above, the company i the specific form i.e. Stock Record of Personal Protective E (PPE) to record the issuance of the PPE to the works. How	is utiliziı Equipme	ng ent
		1
CONFIDENTIALDocument:GS0304Issue n°:10Page	age n°:	11 o

11 of 23



evidence of PPE for chemical handler is recorded, therefore another minor finding is raised.
The management has established an SOP for handling of chemicals to ensure proper and safe handling and storage in accordance to OSH (Classification Packaging and Labeling) Regulation 1997 and OSH (Use and Standard of Exposure of Chemical Hazardous to Health) Regulation 2000.
The POM has established OSH Committee and appointed several employees of the POM as the committee members for coordinating the safety and health in the mill. The appointment letters were made available to the audit team during the audit. Interview conducted with the appointed safety representative showed that he is aware of the OSH requirement within the mill operation.
Regular safety & health meetings (every 3 months) have been conducted by Safety and Health Committee; where issues about safety and health are discussed. Minutes of meeting held in 2019 were made available to the audit team during the audit. Observed that the meetings were chaired by the Mill Manager and was attended by the appointed committee encompassing both top management and workers representative. However, there was no evidence of safety minutes distributions was done within 2 weeks, thus another minor findings is raised.
Site inspection evidence sign of potential hazard available at strategic location especially at the workshop, chemical store and fuel tanks. In addition, the emergency procedure is also made available to all workers by posting on the wall or on notice board.
Several employees were sent to First Aid Training Course. First aid kits were found to be available within the mill operation areas and at the mill office.
Records of accident have been summarized for reporting to DOSH using JKKP 8 form. Noted there wee 4 and 2 accident occurred in 2018 and 2019 as of the audit date.
Employment conditions –
A policy has been established to ensure the company is operating on good social practices regarding human rights in respect of industrial harmony such as Equality/ no discrimination, No child labour, No sexual harassment and Freedom of Association. The Good Social Policy outlines the company's commitment to support the non-discrimination and provides equal career development opportunities to all individuals.
Random verification in several payslips of the workers showed that the company is in compliance with the Minimum Wages Order (Amendment) 2018.
The POM maintains records that provide an accurate account of all employees which contains all information (full names, gender, date of birth, date of entry, a job description, wage and the period of employment).

Job n°:	MY05458	Report date:	05.09.2019	Visit Type:	MA	Visit n°:	1
CONFID	ENTIAL	Document:	GS0304	Issue n°:	10	Page n°:	12 of 23



- II - U	ENTIAL	i toport date.	OS.03.2019         Visit Type.         MA         Visit Type.           GS0304         Issue n°:         10         Page n°:	13 of
ob nº:	MY05458	Report date:	05.09.2019 Visit Type: MA Visit n°:	1
			The company has established an environmental policy namely "D Penjagaan Alam Sekitar" Policy. The policy dated 30/01/2017 is four be signed by the Executive Director.	
Comme	ent on Pri	nciple 5	Environmental management programme –	
			Sighted training plan for 2019 being developed into several programmer Training Plan for 2019 has been established. Training needs analysis established prior to developing training programme. Noted from training needs, the estate has identified the applicability of each training type against job functions available. Observed the training plan is b executed progressively.	was the ning
			Training and competency –	
			Employment records evidenced that employment age requirement is whereby the audit team has verified all workers for POM from the wor list and found that the youngest workers is 18 years old. In addi ground observation during the audit also does not show any evidence employment of underage workers.	kers tion,
			Union members is there among the mill workers under NUPW. Sig the Collective Agreement of NUPW latest on 2019 is kept the mill and employee terms & condition accordingly to the CA.	
			No indication of sexual harassment happening in the mill as well be documented in the social policy with at statement of prohibition of all for of sexual harassment within the compounds of the company.	
			On-site living quarters are provided to general workers and so Observed that the living quarters are habitable and have amenities as water, electricity etc. However, for improvement mill is sugges improve on their quarter cleanliness and sanitation	such
	The mill has provided yearly bonus, monthly incentive is paid accordin the workers performances. Apart from the above, the management provides free housing facilities with water and electricity, meal for r shift and also the medical provision.	also		
			Pay slip and pay rolls records indicate that working hours for all employ is 8 hours daily from Monday to Saturday. Observed that the wages overtime payment were documented on the pay slips.	
			The mill has established a time recording system by biometric thumb system that records all working hours and overtime being transparer both employees and employer. The working hours and breaks of e individual employee as indicate in the time records are in compliance the Employment Contract which is duly signed and agreed by the work	t for each with
			Copies of signed of employment contract is made available review by audit team during the audit.	/ the
			maintained by the company.	



The policy has been communicated to all workers and other stakeholders in during muster morning and stakeholder meetings. Evidence of the communication of the policy to the workers was made available to the audit during the audit.

Environmental Aspect Impact Assessment, with the evaluation form were available. Observed that the above documents have been established by 4 mill engineer. Total of 25 activities were identified, 12 were identified as medium risk and 13 was identified as low risk.

A program to promote the positive impacts was indicated in the continual improvement plan and also being included into environmental monitoring plan of the mill.

Series of trainings were included into training program and implemented accordingly to ensure that all employees understand the policy and objectives of the environmental management and improvement plans and are working towards achieving the objectives.

Number of meetings were conducted to discuss on any environmental issues happening in the estate. It is usually being done concurrently with the quarterly OSH meeting.

### Efficiency of energy use and use of renewal energy -

Consumption of non-renewable energy is recorded on 1/8/2019. The audit team observed that the record is found to be updated on a yearly basis with the 3 years interval recorded is from 2016 until to date year. The same record has been established for power generation (electricity) with the same period. The site uses turbine as a source of renewable energy.

#### Waste management and disposal -

Documented identification of all waste products identified within the mill is highlighted Waste Management Plan. The plan contains the identification of the pollutions, the source of the pollution and the improvement (action) plan. However, the pollution from the worker quarter was not include in the EAI hence minor finding is raised.

The mill management has established an SOP for handling of used chemicals to ensure proper and safe handling and storage in accordance to Environmental Quality Act 1974 (Scheduled Waste) Regulations, 2005. However, during site visit found that the 7<sup>th</sup> Schedule yet available and also identified 1 unit did not have the sump pit which were not meet with the SOP.

Domestic waste generated by the site is disposed at the local landfill managed by  $3^{\rm rd}$  part.

#### Reduction of pollution and emission -

Polluting activities assessment has been done concurrently with Environmental Aspects Impacts Assessment and included into Environmental Aspects and Impacts register documented on 14/7/2019.

Job n°:	MY05458	Report date:	05.09.2019	Visit Type:	MA	Visit n°:	1
CONFIL	DENTIAL	Document:	GS0304	Issue n°:	10	Page n°:	14 of 23



		<ul> <li>Among identified potential environmental impacts were pollution due to Leaking of CPO to the ground and monsoon drain, Spillage of CPO from tanker and chemical spillage. However, the pollution generated from the worker accommodations and other sources was not documented in the assessment.</li> <li>Reduction of Pollution and Emission is documented in the MSPO Management Plan dated 01/04/2019has been developed to reduced identified pollutants and emissions. The planned activities are also discussed in the management review meeting.</li> <li>As for POME management, the mill observed all terms and conditions stipulated in their DOE License. During site visit to the ETP observed no indication that terms have been breached.</li> <li>Natural water resources –</li> <li>Water Management Plan for CPOM (dated 01/08/2019) was available.</li> <li>The CPOM is sourcing water from JBA for the office, administrative and the worker quarter while for the processing line the water sourcing from the mill raw water pond.</li> <li>The CPOM did monitor the water extraction for consumption in processing recorded in the "Raw Water Meter Reading" log book with the reading done on daily basis.</li> </ul>
		Sighted during site visit that there were some areas with water wastage through leakages.
Comment on Pri	nciple 6	Mill management –
		SOP for the POM operations are specified in the Standard Operation Manual production. The audit team observed that the SOP are found covered best management practices at all operation's processes. Practice wise, the audit team observed that all POM operations are conducted accordingly to the SOPs.
		Regular inspection and supervision are conducted by each of the General
		Manager and will be audited during MSPO Internal Audit on annual basis.
		Economic and financial viability plan –
		Long term Budget for until 2022 was made available during the audit. Sighted there are few Capital Expenditure has been include in the budget such as the installation ESP Boiler, upgrading the worker quarter, new effluent pond and the construction of the biogas plant.
		Transparent and fair pricing dealing –
		Sighted there is the contract agreement in between mill and the CPO buyer (refinery). Contract renewing upon completion of request delivery and the payment term is clearly stated in the agreement.
		Subcontractor –
Job n°: MY05458	Report date:	05.09.2019         Visit Type:         MA         Visit n°:         1
CONFIDENTIAL	Document:	GS0304 Issue n°: 10 Page n°: 15 of



The management has disseminate the written letter regarding the MSPO requirement to all vendor. All the vendor has reply with the signed the acceptance. Sighted all the 87 vendor consist the maintenance contractor and supplier has reply the letter.
All works completed by the contractors are paid only after verification has been completed by the operation side

# 8. Non-conformities

# 8.2. Non-Conformity Statement MS2530-4:2013 Part 4

Non-Conformity	N° 1 of 8	🛛 Major	🗌 Minor					
Department / Function:	Principle 3 Compliance To	Standard Ref.:	4.3.1.1					
Document Ref.:	Legal Requirement	Issue / Rev. Status	· Closed or	n 22th Septer	mber 201	٩		
Details of Nonconformity:	Site operation is no regulations	ot in compliance with a				5		
Objective Evidence:	Legal and Other Re Occupational Heal 1. Reg 18, R 2. By-Law 24 3. Reg 8(1) o Was found to be no The site does not f 1990 section 23 (2 used for the housin weekly. The site does not p 1988. The site is in within 2019. Certificate of fitnes CF No. PH PMT 4924 PH PMT 3590	equirements Register in and Safety Act such eg 28 of the USECHH 3 of the Uniform Buildi f the Scheduled Waste of in compliance as de ully comply with the W where It shall be the og of workers, nurserie possess a Fire Certifica progress of obtaining s for pressure vessels Expiry 06/05/2020 06/05/2020	as: Regulation ng By Law Regulations clared by their own orkers Minimum Ho duty of the employe s or community hal ation in compliance the certificate, whic	internal verifi ousing and Ar er to ensure th ls are visited with Fire Ser ch is expected	ication. menities / hat all bui and inspe vices Act	Act Idings ected		
	PH PMD 597							
	PH PMD 73601/08/2020However, during the site visit at long fiber, there was an air compressor without a certificate of fitness on site.							
Root Cause Analysis:	<ol> <li>Missed out during compilation of list of legal register.</li> <li>Workers quarters are provided by company for many years with status quo</li> <li>In the process of obtaining fire cert.</li> <li>The mentioned air compressor are of heritage of the previous mill owners and was neglected.</li> </ol>							
	neglected.							
Correction & Corrective Action:	Correction:	ister was updated, ple	ase find the attach	ed amended	list.			
Corrective Action:	Correction:		ase find the attach	ed amended	list.	1		



<ol> <li>Weekly inspection has been carried out, please find the attached 5s checklist for quarters.</li> <li>Fire cert is in the midst of application, please find the attached application letter</li> <li>The mentioned air compressor was decommissioned at 20<sup>th</sup> Aug 2019, please find the attached decommissioning letter.</li> </ol>
<ol> <li>Corrective Action:         <ol> <li>Assistant MR will update/review the List of Legal Register monthly.</li> <li>Appointed a supervisor to carry out 5s checklist inspection weekly.</li> <li>Appointed Regulation officer will update periodically all the legal dealing and to make sure all permit, licenses, etc are up to date.</li> <li>Inspection of expiry of permits of machineries and equipment will be carried out during internal audit.</li> </ol> </li> </ol>

Non-Conformity	N° 2 of 8	🗌 Major	🖾 Minor				
Department / Function:	Principle 3 Compliance To Legal Requirement	Standard Ref.:	4.3.1.2				
Document Ref.:		Issue / Rev. Status:	Open (Due by 15 <sup>th</sup> May 2020)				
Details of Nonconformity:	The site does not list register.	The site does not list all relevant laws related to their operations in a legal requirements register.					
Objective Evidence:	legal requirements w	······································					
Root Cause Analysis:	Missed out during init	tial compilation of legal regis	ter list.				
Correction & Corrective Action:	Correction: List of legal register was updated Corrective Action: Appointed an assistant MR cum regulation officer with the responsibilities to update legal register list was appointed with an appointment letter.						

Non-Conformity	N° 3 of 8	🗌 Major	Minor			
Department / Function:	Principle 3 Compliance To Legal Requirement	Standard Ref.:	4.3.1.3			
Document Ref.:	Logarroquiromoni	Issue / Rev. Status:	Open (Due by 15 <sup>th</sup> May 2020)			
Details of Nonconformity:	<b>3</b> 1	The legal requirements register is not updated as and when there are any new amendments or new regulations coming into force.				
Objective Evidence:		not updated for new regulation ety and Health (Noise Expo	ons coming into force, which include sure) Regulation 2019.			
Root Cause Analysis:	Missed out during ini	tial compilation of legal regis	ster list.			
Correction & Corrective Action:	Correction: List of legal register was updated Corrective Action: Assistant MR will update/review the List of Legal Register monthly.					

Job n°:	MY05458	Report date:	05.09.2019	Visit Type:	MA	Visit n°:	1
CONFI	DENTIAL	Document:	GS0304	Issue n°:	10	Page n°:	17 of 23



Non-Conformity	N° 4 of 8	🗌 Major	🖾 Minor				
Department / Function:	Principle 4, Employees safety and health	Standard Ref.:	4.4.4.2				
Document Ref.:		Issue / Rev. Status:	Open (Due by 15th May 2020)				
Details of Nonconformity:	The occupational saf from 4.4.4.2.	he occupational safety and health plan does not adequately cover the requirements om 4.4.4.2.					
Objective Evidence:	<ol> <li>Last audiometric test was conducted on 8th August 2018 with result 4 employees is having a hearing problem. Sighted the recommendation by the Doctor was not properly implemented as two of the employee no record of PPE for hearing protection was given to them.</li> <li>No evidence of record the safety mask N95 and the nitrile hand glove been given to the employee exposed to the chemical.</li> <li>The management has conducted the safety meeting as a two way communication with their employee for every 3 month. Last safety meeting conducted on 26th June 2019 However, there is no evidence of safety minutes distribution to the committee within 2 week after the meeting held as per requirement of Safety and Health Committee Regulations 1996.</li> </ol>						
Root Cause Analysis:	2. Neglecting of rec	on after received audiometric ording of PPE issuance. ribution of meting minutes.	c test.				
Correction & Corrective Action:	2. To provide emplo with proper recor		essary PPE to safely perform their job				
	<ul> <li>Corrective Action:</li> <li>1. To implement continuous reminder in the morning muster of wearing and recording of issued PPE.</li> <li>2. To implement continuous reminder in the morning muster of wearing and recording of issued PPE.</li> <li>3. To distribute meeting minutes with acknowledgement immediately after each meeting.</li> </ul>						

Non-Conformity	N° 5 of 8		🗌 Major	🛛 Minor			
Department / Function:	Principles Environm Natural R Biodivers Ecosyste Services	nent, Resources, sity And	Standard Ref.:	4.5.3.1			
Document Ref.:	Issue / Rev. Status: Open (Due by 15th Ma				ay 2020)		
Details of Nonconformity:	Not all of	the waste p	roducts and sources of poll	ution is iden	tified and do	cumented	
Objective Evidence:	sources of	he identification of pollution for the site is recorded in the EAI. However, some of the ources of pollution (e.g.: pollution from the worker's quarters) were not identified in the ocument.					
Root Cause Analysis:	Neglectir	Neglecting of records of source of pollution					
Job n°: MY05458 I	Report date:	05.09.2019		Visit Type:	MA	Visit nº:	1
CONFIDENTIAL	Document:	GS0304		Issue nº:	10	Page n°:	18 of 23



Correction &	Correction:
Corrective	To update immediately of the sources of pollution according to EAI
Action:	Corrective Action:
	Appointed SW handler to continuously update the EAI and sources of pollution.

Non-Conformity	N° 6 of 8	🗌 Major	🖾 Minor		
Department / Function:	Principles 5, Environment, Natural Resources, Biodiversity And Ecosystem Services	Standard Ref.:	4.5.3.3		
Document Ref.:	Issue / Rev. Status: Open (Due by 15th May 20				
Details of Nonconformity:			proper management of scheduled Scheduled Waste) Regulations 2005.		
Objective Evidence:	Site visit to the Scheduled Waste Store identified that the store was well ventilated, fenced up with locked access, and sump pit available for one of the two stores. However, it was identified that one of the stores storing liquid waste did not have a sump pit and the 7 <sup>th</sup> Scheduled for the waste was not yet established at the time of audit.				
Root Cause Analysis:	Neglecting of compile	ation of 7 <sup>th</sup> schedule			
Correction & Corrective Action:	Correction: To complete compila Corrective Action: Appointed SW handle	tion of 7 <sup>th</sup> schedule er to continuously update the	e 7 <sup>th</sup> schedule		

Non-Conformity	N° 7 of 8	🗌 Major	🖾 Minor				
Department / Function:	Principles 5, Environment, Natural Resources, Biodiversity And Ecosystem Services	Standard Ref.:	4.5.4.1				
Document Ref.:		Issue / Rev. Status:	Open (Due by 15th May 2020)				
Details of Nonconformity:	The site did not asse	The site did not assess all polluting activities at the site.					
Objective Evidence:	and impacts identificated However, the pollution	The site assess their polluting activities through the use of the environmental aspects and impacts identification and evaluation. The document dated 14/07/2019 was sighted. However, the pollution generated from the worker accommodations and other sources was not documented in the assessment.					
Root Cause Analysis:	Neglecting of records	s of source of pollution					
Correction & Corrective Action:	<b>Corrective Action:</b>	To update immediately of the sources of pollution according to EAI					

Non-C	Non-Conformity N° 8 of 8		🗌 Major	🛛 Minor				
Department / Function:		Principle Environn Natural F		Standard Ref.:	4.5.5.1			
Job n°:	MY05458	Report date:	05.09.2019		Visit Type:	MA	Visit nº:	1
CONFID	ENTIAL	Document:	GS0304		Issue n°:	10	Page n°:	19 of 23



	Biodiversity And Ecosystem Services					
Document Ref.:		Issue / Rev. Status:	Open (Due by 15th May 2020)			
Details of Nonconformity:		The site did not effectively establish a water management plan to maintain the quality and availability of natural water resources.				
Objective Evidence:	During the site visit, it was sighted that there were some areas with water wastage through leakages. This includes at the hot water tank and the water tank at the water treatment plant before the final discharge area.					
Root Cause Analysis:	Neglecting of checkir	ng for leakages				
Correction & Corrective Action:	Correction: To perform inspection Corrective Action: To create checklist for	Ŭ	es with monthly inspection period.			

Nonconformities detailed here shall be addressed through the organization's corrective action process, in accordance with the relevant corrective action requirements of the audit standard, including actions to analyse the cause of the nonconformity and prevent recurrence, and complete records maintained.

- Corrective actions to address identified major nonconformities shall be carried out immediately and SGS notified of the actions taken within 30 days. An SGS auditor confirm the actions taken, evaluate their effectiveness, and determine whether certification can be granted or continued.
- Corrective actions to address identified major nonconformities shall be carried out immediately and **records with supporting evidence sent to the SGS auditor** for close-out within 60 days.
- Corrective Actions to address identified minor non-conformities shall be documented on an action plan and sent by the client to the auditor within 90 days for review. If the actions are deemed to be satisfactory they will be followed up at the next scheduled visit
- Corrective Actions to address identified minor non-conformities have been detailed on an action plan and the intended action reviewed by the Auditor, deemed to be satisfactory and will be followed up at the next scheduled visit.
- Appropriate immediate action taken in response to each non-conformance as required

Note: - Initial, Re-certification and Extension audits – recommendation for certification cannot be made unless check box 4 is completed. For re-certification audits the time scales indicated may need to be reduced in order to ensure re-certification prior to expiry of current certification.

Note: At the next scheduled audit visit, the SGS audit team will follow up on *all* identified nonconformities to confirm the effectiveness of the corrective actions taken.

# 9. General Observations & Opportunities for Improvement

### 9.1. Observations (Part 4)

OBS #	Indicat or		Observation/Opportunity for Improvement					
1	4.4.5.1 1	Date Recorde d>	16 August 2019	Due Date>	-	Date Closed>	-	

Job n°:	MY05458	Report date:	05.09.2019	Visit Type:	MA	Visit n°:	1
CONFID	ENTIAL	Document:	GS0304	Issue n°:	10	Page n°:	20 of 23



OBS #	Indicat or	Observation/Opportunity for Improvement
		Details:
		In cases where on-site living quarters are provided, these quarters shall be habitable and have basic amenities and facilities.
		During site visit, sighted the cleanliness and sanitation in a badly condition. To improve on this part as to meet the standard of the Act.

# Appendix 1: List of Stakeholders Contacted

Stakeholders Details	Relationship	Stakeholder's Input / Comments	Clients Feedback / Response
YM Tok Muda Dato' Ungku Abdul Ariff (Orang Besar 16 Negeri Pahang)	Land owner of the rented land title 15889	<ul> <li>No complaints from. They exchange knowledge quite often.</li> <li>The Charuk Putting Palm Oil Mill has been assisting in the local communities development in this area since it is the only industry available in this area.</li> <li>Lot of job opportunity been given to the local people since the development of the mill.</li> <li>Although the mill in nearest with the local community area which is having a proper road by government. Mill able to handle on their transportation very well with no issue of accident happen.</li> <li>The mill is the only nearest FFB facility in Temerloh, the nearby mill amost 40km. Therefore, mill existing has lot contribute to the local smallholders</li> </ul>	Noted by the management. To maintain the good relation with the stakeholder

Job n°:	MY05458	Report date:	05.09.2019	Visit Type:	MA	Visit n°:	1
CONFID	ENTIAL	Document:	GS0304	Issue n°:	10	Page n°:	21 of 23



Nick Ricky Zulkifli bin Nick Mahmud	Canteen Operator	<ul> <li>Mill located the canteen at the outside mill area, The canteen also has open for public especially for the lorry driver and the village folk, thus canteen revenue not limited to the mill employee.</li> <li>The management has a good term relation with the canteen operator.</li> <li>The mill also has source any kind of meal during any activity with the canteen.</li> <li>Mill has provide night shift meal which is supply by the canteen.</li> <li>He has been working for over 5</li> </ul>	<ul> <li>Noted by the management.</li> <li>To maintain the good relation with the stakeholder.</li> </ul>
Razkumar Khatwe (Nepalese Worker Representative)	CPOM Worker	<ul> <li>year at the mill</li> <li>Appropriate trainings have been provided by the management.</li> <li>All company policies have been briefed to the workers</li> <li>He understands the essence of the policies</li> <li>The really thankful to the company since given him opportunity to work there for almost 5 years.</li> <li>No issue with company since company has treat the worker with fair and equal.</li> </ul>	- Noted by the management.

Job n°:	MY05458	Report date:	05.09.2019	Visit Type:	MA	Visit n°:	1
CONF	DENTIAL	Document:	GS0304	Issue n°:	10	Page n°:	22 of 23



### Appendix 2: MPOB License

MPOB License Number (Mill/ Estate)	Scope of Activity	Expiry Date	
Charuk Putting Palm Oil Mill 500138-504000	Menjual dan Mengalih (CPO, FFB, PK, SPO), Membeli dan Mengalih (CPO, FFB,PK), Menyimpan (CPO, PK, SPO), Mengilang (FFB)	31/03/2020	

-End of Report-

Job n°:	MY05458	Report date:	05.09.2019	Visit Type:	MA	Visit n°:	1
CONFID	ENTIAL	Document:	GS0304	Issue n°:	10	Page n°:	23 of 23