

## Malaysian Sustainable Palm Oil (MSPO) Summary Report

<b>Organization:</b>	Pantai Remis Palm Oil Mill Sdn. Bhd. - 132346-V		
<b>Address:</b>	<b>Mill Location Address:</b> Lot 790, Jalan Ayer Tawar, 32500 Changkat Kruing, Perak		
<b>MSPO Standard(s) Used:</b>	MS2530-4:2013 Part 4: General principles for palm oil mills	<b>Accreditation Body(s):</b>	Department Standards of Malaysia
<b>Representative:</b>	<b>Lee Hooi Teng</b> Head Of Account Dept Tel (M): +60 56751837   Email (E): <a href="mailto:pantairemis@hotmail.com">pantairemis@hotmail.com</a>		
<b>Site(s) audited:</b>	Pantai Remis Palm Oil Mill	<b>Date(s) of audit(s):</b>	10 <sup>th</sup> & 11 <sup>th</sup> Sept 2019
<b>Audit Scope:</b>	Processing of Oil Palm Fresh Fruit Bunch (FFB) for Production of Crude Palm Oil (CPO) and Palm Kernel (PK) in compliance to the MSPO Certification Standard MS2530-4:2013 Part 4		
<b>Mill Capacity:</b>	60 mt/hr	<b>Total Area (Certified):</b>	Nil
<b>Visit Certification Assessment:</b>	Main Assessment 1	<b>Number of Sites:</b>	1 Mill
<b>Lead auditor:</b>	Mohd Syafiq Zawawi	<b>Additional team member(s):</b>	Daryl Tan (Trainee Auditor)
<b>Certificate Number:</b>			
<b>Date of Issue:</b>		<b>Date of Expiry</b>	
<b>This report is confidential and distribution is limited to the audit team, client representative and the SGS office.</b>			

### 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 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

☐ Yes

☒ No

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### 3. Current Certification

Currently **Pantai Remis Palm Oil Mill Sdn. Bhd** is being certified with other certification scheme as below:

Current Certification <i>(Please tick the certification you are currently certified)</i>			
<input type="checkbox"/>	ISO 9001	<input type="checkbox"/>	HACCP
<input type="checkbox"/>	EMS 14001	<input type="checkbox"/>	RSPO
<input type="checkbox"/>	OHSAS 18001	<input type="checkbox"/>	ISCC
<input type="checkbox"/>	ISO 22001	<input type="checkbox"/>	GMP Plus
<input type="checkbox"/>	HALAL	<input type="checkbox"/>	KOSHER
<input type="checkbox"/>	Co-GAP	<input type="checkbox"/>	None / Others:

## 4. Assessment Process and Audit Programme

### 4.1. Sampling Method

Sampling Methodology and Rationale
<p>Sampling of the mill to be audited has been conducted in accordance to the Risk Management (MPOB/MSPO/RMP/06) documents as below:</p> <p style="text-align: center;"><b><math>S = r/\sqrt{n}</math></b></p> <p style="text-align: center;">Risk Factor: <b>Not Applicable</b></p> <p>Since this is an individual certification. Sampling method is not applicable.</p>

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 Pantai Remis Palm Oil Mill 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
10 <sup>th</sup> Sept 2019	0830	MSZ	Arrival of Auditor Opening Meeting at Pantai Remis Palm Oil Mill	Management Representative & Key Personnel
	0900 - 1700	MSZ/ DT	<p><b><u>Pantai Remis Palm Oil Mill Sdn. Bhd.</u></b> MS 2530-4-2013 (Part 4) General Principles For Palm Oil Mills</p> <ul style="list-style-type: none"> <li>• Principle 1: Management commitment and responsibility</li> <li>• Principle 2: Transparency</li> <li>• Principle 3: Compliance to legal requirements</li> <li>• Principle 4: Social responsibility, health, safety and employment condition</li> </ul> <p style="text-align: center;"><b>End of Day 1</b></p>	Mill Management Personnel
11 <sup>th</sup> Sept 2019	0830 - 1600	MSZ/ DT	<p><b><u>Pantai Remis Palm Oil Mill Sdn.Bhd</u></b> (cont'd)</p> <ul style="list-style-type: none"> <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 Representative & Key Personnel

#### 4.3. Certification Body

Auditor	Role	Qualification, Education, Working Experience.
Mohd Syafiq Zawawi	Lead Auditor	<ul style="list-style-type: none"> <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 style="list-style-type: none"> <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>

#### 4.4. Audit Planning Matrix

		Visits:	MA (Stg 2)	SA1	SA2	SA3	SA4
		Dates:	10-11/08/19				
Area / Department / Process / Function	Standard	Auditor(s):	1. Mohd Syafiq Zawawi 2. Daryl Tan				
Pantai Remis POM	MS2530-4:2013 Part 4: General principles for palm oil mills		X	O	O	O	O

\*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.

#### 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.	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
The organization has demonstrated effective implementation and maintenance / improvement of its management system.	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

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The organization has demonstrated the establishment and tracking of appropriate key performance objectives and targets and monitored progress towards their achievement.	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
The internal audit program has been fully implemented and demonstrates effectiveness as a tool for maintaining and improving the management system.	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
The management review process demonstrated capability to ensure the continuing suitability, adequacy and effectiveness of the management system.	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Throughout the audit process, the management system demonstrated overall conformance with the requirements of the audit standard.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
The audit team concludes that the organization <input type="checkbox"/> <b>has</b> <input checked="" type="checkbox"/> <b>has not</b> established and maintained 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>3</b>	Major <b>8</b> 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:		
<input type="checkbox"/> <b>Granted</b> / <input type="checkbox"/> Continued / <input checked="" type="checkbox"/> Withheld / <input type="checkbox"/> Suspended until satisfactory corrective action is completed.		

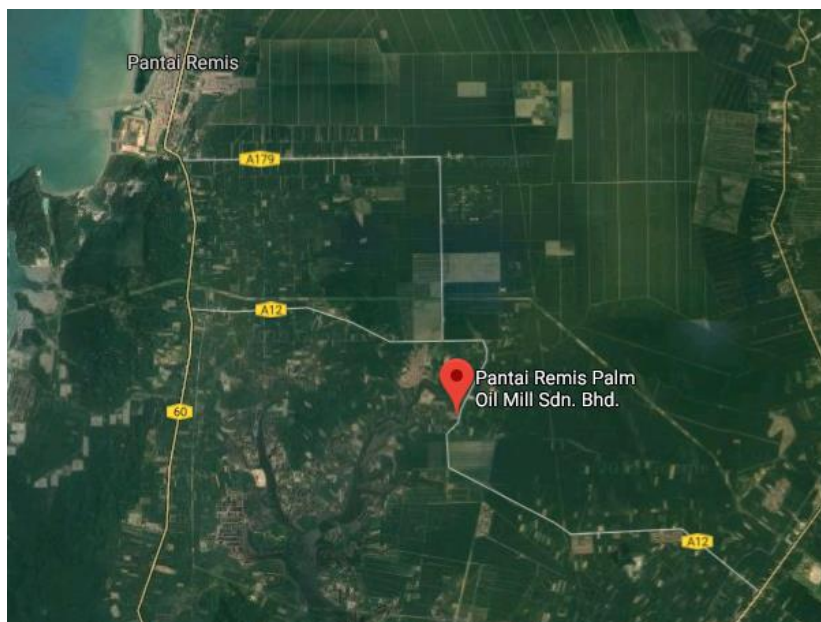
## 7. Significant Audit Trails Followed

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	Location Address	Geo-Coordinate (GPS)
		Latitude, Longitude
Pantai Remis Palm Oil Mill	Lot 790, Jalan Ayer Tawar, 32500 Changkat Kruing, Perak	N 4° 21' 58.4604" E 100° 41' 44.5524"

**Table 1: Address and Coordinates of Mill**



**Figure 1: Location of Pantai Remis Palm Oil Mill in Manjung Districts of Perak**

#### Description of Mill Processing Capacity

Pantai Remis Palm Oil Mill Sdn. Bhd (the company) established in 1<sup>st</sup> November 1986 previously owner was Mr Lee Boon Chye and later bought by new owner Mr Wong Chong Ngin on 1993. The mill located in Manjung District of Perak which is almost 15km from the nearest town Pekan Pantai Remis.

Under the Palm Oil Mill structure, it was consisted more than 74 workforce consist with 74 is local employee while the rest 25 are Nepalese. The palm oil mill is leaded by Mill Engineer 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.

Name of Mill	Actual Last FY 2017/2018	Actual Last FY 2017/2018		Estimated New FY 2018/2019	Estimated New FY 2018/2019	
	FFB Process	CPO (MT)	PK (MT)	FFB Process	CPO (MT)	PK (MT)
PANTAI REMIS PALM OIL MILL	212935.91	37746.52	10998.68	200000	35000	10000
		17.77	5.16		17.50	5.00

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

## 7.2. Area of Plantations

Area Statement (Ha)						
Estate	Titled Area (Ha) (Certified Area)	Planted (Ha)		Conservation (Ha)	HCV (ha)	Others (Ha)
		Immature Area (Ha) (Age group)	Mature Area (Ha) (Age group)			
Nil						
<b>TOTAL</b>						

**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	<b><u>Policy on Implementation of MSPO –</u></b>
	<p>Policy for the implementation of MSPO has been established by the company which is signed by the Company Executive Director on 1st October 2018. The policy emphasizes on the commitment to continual improvement with the objective of improving the milling operation.</p> <p>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.</p>
	<b><u>Internal Audit –</u></b>
	<p>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. Internal was conducted by the management 19<sup>th</sup> April 2019.</p> <p>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.</p>

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	<p>.</p> <p><b><u>Management Review –</u></b></p> <p>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 &amp; biodiversity objectives and corrective action, review on S&amp;H objectives, review on employment condition, site management and recommendation for improvement. The management review last conducted by the management on 13<sup>th</sup> May 2019.</p> <p><b><u>Continual Improvement –</u></b></p> <p>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 2019 is made available to the audit team during the audit dated on 1<sup>st</sup> April 2019</p>
<p>Comment on Principle 2</p>	<p><b><u>Transparency of documents relevant to MSPO requirements –</u></b></p> <p>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. However, there is no evidence on documents related to environmental transparency such as but not limited to environmental compliance and achievement as required by DOE under the Environmental Mainstreaming Tools. Therefore, minor non-conformance is raised for this issue.</p> <p><b><u>Transparent method of communication and consultation –</u></b></p> <p>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 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.</p> <p><b><u>Traceability –</u></b></p> <p>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.</p>



	<p>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.</p> <p>From the sample taken, traceability of the product outgoing is traceable.</p>
Comment on Principle 3	<p><b><u>Regulatory requirements –</u></b></p> <p>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 of the company himself has taken the responsibility of monitoring compliance and tracking update and changes in regulatory requirement.</p> <p><b><u>Legal land use rights –</u></b></p> <p>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. Total land title acquire by the management is six. Three of land titles is permanent type while the other two is country lease with validity until 2050. No land dispute case recorded. Further assessed complaint records, noted no complaint made pertaining to land issue.</p> <p><b><u>Customary rights –</u></b></p> <p>There are no issues or encumbered by customary rights in the land occupied by POM.</p>
Comment on Principle 4	<p><b><u>Social Impact Assessment –</u></b></p> <p>SIA conducted internally by appointed consultant on 10<sup>th</sup> April 2019. It was conducted to identify positive and negative impacts. Every feedback is being recorded and addressed accordingly by the estate management. Noted from the inputs given by engaged stakeholders, several positive impact was highlighted.</p> <p>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 and was classified either negative or positive.</p> <p>For every feedback received, an acknowledgment notice will be issued to the stakeholder and action plan to address the issue will be informed by the mill management.</p> <p><b><u>Complaints and grievances –</u></b></p>

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	<p>SOP Complaints and grievances procedure dated 20<sup>th</sup> August 2019. Process flow of complaints and grievances included in the procedure to specify on suggested period should be taken to resolve any complaint received.</p> <p>The relevant stakeholders have been made aware of the complaints and grievance mechanism. It was communicated during of stakeholder meetings and briefing with workers. Copies of feedback form were provided during the meetings and briefings done. It also made available at the mill office.</p> <p>Noted all the complaint and feedback forms from Social Impact Assessment and Stakeholder Meetings are being retained accordingly.</p> <p><b><u>Commitment to contribute to local sustainable developments –</u></b></p> <p>The mill has been actively contributing to its local development of the surrounding communities including internal and external.</p> <p><b><u>Employees health and safety –</u></b></p> <p>Sighted safety and health policy signed by Company Director dated 13<sup>th</sup> April 2019. The establishment of the policy has been communicated through trainings and stakeholder meetings conducted.</p> <p>OSH Plan was sighted during the audit. The plan consists of the requirement of indicator 4.4.4.2 of this standard.</p> <p>All operation risk has been assessed and documented in the HIRARC Form.</p> <p>Last audiometric test was conducted on 20<sup>th</sup> July 2018 with result 12 employees is having a possible of hearing problem, however notification under JKKP 7 not yet performed by the mill. The CHRA has recommended for the biological monitoring and medical surveillance to the lab personnel, however it was found the medical surveillance conducted on 12<sup>th</sup> June 2019 was done to the 1 of lab personnel instead of 3 lab personnel in mill which was not followed the recommendation by the assessor.</p> <p>Safety trainings for employees exposed to chemicals have been conducted; records of the training are available in the Training Record file.</p> <p>Appropriate PPE are found to be distributed for the specific risk assessed operations as per in the HIRARC. For the above, the company is utilizing the specific form i.e. Stock Record of Personal Protective Equipment (PPE) to record the issuance of the PPE to the works. The usage of safety mask for the laboratory and boiler station personnel were not accordingly as per recommendation in the CHRA</p> <p>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.</p> <p>The POM has established OSH Committee and appointed several employees of the POM as the committee members for coordinating the</p>
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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, the last safety meeting has lapse more than three month and there was no evidence of safety minutes distributions was done within 2 weeks.

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 was 1 fatality cases in the mill in this year and already communicated with the DOSH pertaining this incident.

Due to several findings were found in this area, major nonconformance is raised.

#### **Employment conditions –**

A policy dated on 1<sup>st</sup> October 2018 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). The employment contract is also found to be established and signed and maintained by the company.

Copies of signed of employment contract is made available review by the audit team during the audit.

The mill has established a time recording system by face recognition system and the punch card that records all working hours and overtime being transparent for both employees and employer. The working hours

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	<p>and breaks of each individual employee as indicate in the time records are in compliance with the Employment Contract which is duly signed and agreed by the workers.</p> <p>Pay slip and pay rolls records indicate that working hours for all employees is 8 hours daily from Monday to Saturday. Observed that the wages and overtime payment were documented on the pay slips.</p> <p>The mill has provided yearly bonus, monthly incentive is paid according to the workers performances. Apart from the above, the management also provides free housing facilities with water and electricity, meal for night shift and also the medical provision.</p> <p>On-site living quarters are provided to general workers and staff. Observed that the living quarters are habitable and have amenities such as water, electricity etc. However, for improvement mill is suggest to improve on their quarter cleanliness and sanitation</p> <p>No indication of sexual harassment happening in the mill as well been documented in the social policy with at statement of prohibition of all forms of sexual harassment within the compounds of the company.</p> <p>As to date, there was no employee joint any trade union in the mill as they not interested with any kind of union. This has been confirmed with worker representative during interview.</p> <p>Employment records evidenced that employment age requirement is met whereby the audit team has verified all workers for POM from the workers list and found that the youngest workers is 18 years old. In addition, ground observation during the audit also does not show any evidence of employment of underage workers.</p> <p><b><u>Training and competency –</u></b></p> <p>Sighted training plan for 2019 being developed into several programmes. Training Plan for 2019 has been established. Training needs analysis was established prior to developing training programme. Noted from the training needs, the estate has identified the applicability of each training type against job functions available. Observed the training plan is being executed progressively. To include the Safety Operating Procedure training programme as to ensure that operation of the mill is according to mill standard procedure.</p>
<p>Comment on Principle 5</p>	<p><b><u>Environmental management programme –</u></b></p> <p>The company has established an environmental policy namely date on 1<sup>st</sup> October 2019 signed by the Company Director.</p> <p>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.</p> <p>The environmental aspects and impact analysis (EAIA) are sighted for the site. This includes activities from the workshop, laboratory, and store,</p>

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among others. However the EAIA does not include the activities at empty bunch yard which may lead to air pollution due to fire, among other activities. Hence, minor non-conformance is raised for this issue.

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.

Interview with site representatives confirmed that there has been no training established and implemented for environment related training for employees who are below the supervisor level. Supervisors are provided with training on environmental related issues, however there is no evidence that training is performed. Interview with workers on site confirmed that they do not understand the policy, objectives and management plans related to environment. For this findings, minor non-conformance is raised.

The site has yet to perform the EPMC meeting for the quarter after the meeting on the 13<sup>th</sup> May 2019. The environmental regulatory compliance monitoring committee (ERCMC) which is required by DOE to be performed once a year has yet to be performed. Minor non-conformance is raised for this findings.

#### **Efficiency of energy use and use of renewal energy –**

Consumption of non-renewable energy is recorded and sighted during the audit. 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. Sighted that the usage for diesel and water consumption for 2019 is higher than the baseline data. There has yet to be any plan or action taken to assess the usage of non-renewable energy above the baseline. Due to this issue, minor non-conformance is raised.

#### **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.

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 discarded chemicals from the Lab was incorrectly labelled as SW409 Disposed containers, bags or equipment contaminated with chemicals, pesticides, mineral oil or scheduled wastes he 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. Scheduled waste located at the workshop, workshop store, engine room was found to be without any labelling. Scheduled waste store does not have a signage indicating that it is a scheduled waste store. Two drums of SW305 was sighted, the date of generation is has lapsed more than 6 month. Due to this findings, the minor non-conformance is raised.

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	<p>Domestic waste generated by the site is disposed at the local landfill managed by 3<sup>rd</sup> party waste collector</p> <p><b><u>Reduction of pollution and emission –</u></b></p> <p>Polluting activities assessment has been done concurrently with Environmental Aspects Impacts Assessment and included into Environmental Aspects and Impacts register documented on 20<sup>th</sup> August 2018. The environmental aspects and impacts however does not include the activities at empty bunch yard which may lead to air pollution due to fire, and boundary noise from the operations of the mill to neighbouring sites, among other items. Minor non-conformance is raised for this issue.</p> <p>During site visit, there was observed signs of burning at the empty bunch yard. There are currently no plans for the migration of burning of EFB. Sighted at the workshop area oily substance in the drain. Interview with site management confirmed that the drain flows directly to the external drain and there is no control measures in place to prevent the pollution from occurring. Minor non-conformance is raised for this issue.</p> <p>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.</p> <p><b><u>Natural water resources –</u></b></p> <p>Monitoring of water usage was performed on a daily basis and recorded in a logbook. The site assesses the water consumption based on the operation milling hours and FFB processed. The site does not use any other source of water other than from JBA.</p> <p>Monitoring of outgoing water is performed on a monthly basis as part of the monitoring for effluent discharged.</p> <p>The site optimises the water by recycling water from the turbine cooling back into the reservoir.</p>
Comment on Principle 6	<p><b><u>Mill management –</u></b></p> <p>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.</p> <p>Practice wise, the audit team observed that all POM operations are conducted accordingly to the SOPs.</p> <p>Regular inspection and supervision are conducted by each of the Mill Engineer and Mill Manager and will be audited during MSPO Internal Audit on annual basis.</p> <p><b><u>Economic and financial viability plan –</u></b></p> <p>The business viability plan dated May 2019 was sighted. The business plan established shows the planning of investments which include CEMS for boiler, ESP for boiler, staff and worker quarters upgrade, and other</p>

	<p>projects. The business plan includes the budget required for each of the projects. The budget shown is prepared on an annual basis and does demonstrate attention to economic and financial viability through long-term management planning.</p> <p><b><u>Transparent and fair pricing dealing –</u></b></p> <p>Sighted there is the contract agreement in between mill and the PK buyer (crusher). Contract renewing upon completion of request delivery and the payment term is clearly stated in the agreement.</p> <p><b><u>Subcontractor –</u></b></p> <p>A letter of acknowledgement and compliance to MSPO system issued to contractors and suppliers. The letters to both contractors were sighted. During stakeholder consultation with contractor, the contractor was found to be able to understand MSPO requirements, and explain legal requirements such as no discrimination, and no child labour.</p> <p>There was no evidence of agreed contracts with the contractors sighted. Interview with one of the stakeholder has confirmed with this noncompliance. Due to this findings, major non-conformance is raised .</p> <p>All works completed by the contractors are paid only after verification has been completed by the operation side</p>
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## 8. Non-conformities

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

<b>Non-Conformity</b>	N° 1 of 11	<input type="checkbox"/> Major	<input checked="" type="checkbox"/> Minor
Department / Function:	Principle 2 Transparency	Standard Ref.:	4.2.1.2
Document Ref.:		Issue / Rev. Status:	Open (Due by 10th June 2020)
Details of Nonconformity:	Some of the required documents are not publicly available.		
Objective Evidence:	There is no evidence that documents related to environmental transparency such as but not limited to environmental compliance and achievement as required by DOE under Environmental Mainstreaming Tools.		
Root Cause Analysis:	The POM does not practice publishing the information before implementing MSPO as it was thought not necessary.		
Correction & Corrective Action:	<p><b>Correction:</b> publishing the required document such as the environmental policies to several locations within the mill</p> <p><b>Corrective Action:</b> to make sure internal audits capture the required documentation to be published publicly within the mill.</p>		



<b>Non-Conformity</b>	N° 2 of 11	<input checked="" type="checkbox"/> Major	<input type="checkbox"/> Minor
Department / Function:	Principle 3 Compliance To Legal Requirement	Standard Ref.:	4.3.1.1
Document Ref.:		Issue / Rev. Status:	Closed on 1 <sup>st</sup> November 2019
Details of Nonconformity:	Site operation is not in compliance with applicable local, state, national laws and regulations		
Objective Evidence:	<ol style="list-style-type: none"> <li>1. The site yet submits quarterly review documents to DOE under regulation 10(2) for the 2nd and 3rd quarter year. Sighted last the submissions dated for the 1st quarter done on 02/05/2019.</li> <li>2. The mill is in the midst of sourcing of the process to install the the Electrostatic Precipitator ESP which to meet the implementation of “Peraturan Kualiti Alam Sekeliling (Udara Bersih) 2014 with the implementation of. However the mill does not obtained the “Lesen Pelanggaran” under Sec 22(1) of Regulations as directive by the Director General of DOE on 6th May 2019.</li> <li>3. The competent person for Schedule Waste (CepSWaM) has expiring since 31/05/2019 which is lapsed more than 4 month.</li> <li>4. 1-unit air compressor inside the workshop does not possess a certificate of fitness from DOSH.</li> <li>5. During site visit, there was no signage at the POME pond with information such as name of pond, capacity, retention period, and last desludging date, as required by the Jadual Permatuhan.</li> <li>6. Scheduled waste inventory is recorded by the site for SW305, records for other scheduled waste generated has yet to be established by the site. Sighted the records for August 2019, SW305 is reused internally to lubricate their internal machinery under special management (regulation 7 Environmental Quality (Scheduled Waste) Regulations). However, there is yet to be any application or approval for special management.</li> </ol>		
Root Cause Analysis:	Lack of monitoring mechanism		
Correction & Corrective Action:	<p><b>Correction:</b></p> <ol style="list-style-type: none"> <li>1. The required documents to be submitted to DOE for the 3<sup>rd</sup> quarter of 2019 will be submitted by 31<sup>st</sup> Oct 2019, while the POM has submitted until the month of June. (please refer to Appendix 1)</li> <li>2. The POM has appointed Ecolink Sdn Bhd to do submission to DOE on the CEMS data collected and to eventually apply for the “lessen Pelanggaran”</li> <li>3. Mr. Shazwan has already attended the CepSWaM course at 30<sup>th</sup> Sept to 4<sup>th</sup> Oct 2019.</li> <li>4. The POM has already decommissioned the mentioned air compressor as it does not have the proper CF.</li> <li>5. Signage has done.</li> <li>6. SW305 and other SW has been declared in the 5<sup>th</sup> schedule for the month of Sept, (Please refer to Appendix 6).</li> </ol> <p><b>Corrective Action:</b></p> <ol style="list-style-type: none"> <li>1. Review of the required DOE documents to be published publicly will be monitored in all the coming internal audit.</li> <li>2. List of permits and licenses will be updated quarterly by regulation officer so that nothing will be left out.</li> <li>3. SW competent person will be responsible for his own license renewal and approval.</li> </ol>		



	<ol style="list-style-type: none"> <li>4. Nil.</li> <li>5. SW competent person will make weekly rounds to POME pond to make sure the signage and its content are up to date.</li> <li>6. SW competent person will make weekly rounds to SW store to make sure all SW has been kept in accordance with regulation and eSWISS regularly updated and report submission.</li> <li>7. The next internal audit of Pantai Remis POM will make priority of the above mentioned findings to make sure all of it are in compliance.</li> </ol>
Close out evidence	<ol style="list-style-type: none"> <li>1. Submission of DOE of quarter report. Refer to attachment <b>"2nd and 3rd DOE quarterly report"</b></li> <li>2. Submission of license application. Refer to attachment <b>"Permohonan Lesen Pelanggaran"</b></li> <li>3. Verification of registration CepSWaM course at 30th Sept to 4th Oct 2019. Refer to attachment <b>"Pengesahan Permohonan CePSWAM"</b></li> <li>4. Decommissioned instruction of air compressor by the Mill Engineer. Refer to attachment <b>"Pelupusan Air Compressor"</b>.</li> <li>5. Signage of Effluent Treatment Plant. Refer to attachment <b>"POME Signage"</b>.</li> <li>6. Updated of SW305 other SW has been declared in the 5th schedule for the month of Sep. Refer to attachment <b>"SW Inventory Sep"</b></li> </ol>

<b>Non-Conformity</b>	N° 3 of 11	<input checked="" type="checkbox"/> Major	<input type="checkbox"/> Minor
Department / Function:	Principle 4 Employee Safety & Health	Standard Ref.:	4.4.4.2
Document Ref.:		Issue / Rev. Status:	Closed on 1 <sup>st</sup> November 2019
Details of Nonconformity:	The occupational safety and health plan does not adequately cover the requirements from 4.4.4.2.		
Objective Evidence:	<ol style="list-style-type: none"> <li>1. From the Audiometric Test report resulted with 12 cases of possible hearing impairment. However, the above said hearing impairment cases yet been notified under JKKP 7 within 7 days after the report issuance to the DOSH as stipulated in Section 9 (10) a.</li> <li>2. The CHRA has recommended for the biological monitoring and medical surveillance to the lab personnel, however it was found the medical surveillance conducted on 12th June 2019 was done to the 1 of lab personnel instead of 3 lab personnel in mill which was not followed the recommendation by the assessor.</li> <li>3. The usage of safety mask for the laboratory and boiler station personnel were not accordingly as per recommendation in the CHRA to use the recognize respirator 6006 (lab) and 3M Cupped Particulate Respirator 9923V (boiler station). Apart from that, there was no record of the safety mask been given to these personal involve with the chemical handling.</li> <li>4. The management has conducted the safety meeting as a two way communication with their employee. Last safety meeting conducted on 13th May 2019 which is already lapse more than 3 month. Apart from that, 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:	POM has already identified the issues mentioned above but delayed of action due to the daily operation of the mill are set as their priority.		
Correction & Corrective Action:	<b>Correction:</b> <ol style="list-style-type: none"> <li>1. The POM has already sent the mentioned 12 personnel for audiometric test.</li> </ol>		

	<p>2. Medical surveillance has been done for Nga Tee Hooi (Lab Operator), while the other lab operator Mr. Chandran has been re-located to another department of his request</p> <p>3. Update record of issuance of safety mask.</p> <p>4. Latest safety meeting has been carried out in 21<sup>st</sup> Sept 2019 supported with attendance list and acknowledgement of receipt of meeting minutes. (please refer to Appendix 10)</p> <p><b>Corrective Action:</b></p> <p>1. Safety officer will be charged with execution of submission reporting to JKPP of all the necessary documentation, MR will be monitoring the process.</p> <p>2. Safety officer will be charged with reviewing of CHRA recommendation, MR will be monitoring the safety officer.</p> <p>3. Store will monitor and record the issuance of all necessary PPE.</p> <p>4. Safety officer will chair the safety meeting and to also ensure the issuance and acknowledgement of the meeting minutes.</p>
Close out evidence	<p>1. Notification of JKPP 7 of hearing impairment cases. Refer to attachment <b>“JKKP7 Submission”</b>.</p> <p>2. Medical surveillance result for missed out employee. Refer to attachment <b>“Medical Surveillance”</b>.</p> <p>3. Record of issuance of safety mask. Refer to attachment <b>“Issuance of safety Mask”</b>.</p> <p>4. Safety meeting minutes distributions to the committee and the latest safety meeting attendance list. Refer to attachments <b>“Safety Meeting Minutes Distribution – 1<sup>st</sup> meeting, 2<sup>nd</sup> meeting &amp; 3<sup>rd</sup> meeting and Attendance List 3rd Safety Meeting on Sep’19”</b></p>

<b>Non-Conformity</b>	N° 4 of 11	<input type="checkbox"/> Major	<input checked="" type="checkbox"/> Minor
Department / Function:	Principle 5: Environment, natural resources, biodiversity and ecosystem services	Standard Ref.:	4.5.1.2
Document Ref.:		Issue / Rev. Status:	Open (Due by 10th June 2020)
Details of Nonconformity:	The environmental management plan does not adequately cover the environmental aspects and impacts analysis of all operations of the site.		
Objective Evidence:	The environmental aspects and impact analysis (EAIA) were sighted. The register does not include activities at the empty bunch yard which may lead to air pollution due to fire, among other activities.		
Root Cause Analysis:	The pom never identified the above findings as an aspect necessary to be included in the EAI.		
Correction & Corrective Action:	<p><b>Correction:</b> EAI for Empty bunch yard has been added.</p> <p><b>Corrective Action:</b> MR will be monitoring and updating the EAI monthly.</p>		

<b>Non-Conformity</b>	N° 5 of 11	<input type="checkbox"/> Major	<input checked="" type="checkbox"/> Minor
Department / Function:	Principle 5: Environment, natural resources,	Standard Ref.:	4.5.1.5

	biodiversity and ecosystem services		
Document Ref.:		Issue / Rev. Status:	Open (Due by 10th June 2020)
Details of Nonconformity:	Awareness and training program is not established and implemented to ensure that the employees understand the policy, objectives and management plans for the site.		
Objective Evidence:	<p>Interview with site representatives confirmed that there has been no training established and implemented for environment related training for employees who are below the supervisor level.</p> <p>Supervisors are provided with training on environmental related issues, however there is no evidence that training is performed. Interview with workers on site confirmed that they do not understand the policy, objectives and management plans related to environment.</p>		
Root Cause Analysis:	Verbal training given to employees, but not recorded.		
Correction & Corrective Action:	<p><b>Correction:</b> Training has been given to employee with training record.</p> <p><b>Corrective Action:</b> Will retrain on the topic yearly with proper record</p>		

<b>Non-Conformity</b>	N° 6 of 11	<input type="checkbox"/> Major	<input checked="" type="checkbox"/> Minor
Department / Function:	Principle 5: Environment, natural resources, biodiversity and ecosystem services	Standard Ref.:	4.5.1.6
Document Ref.:		Issue / Rev. Status:	Open (Due by 10th June 2020)
Details of Nonconformity:	The management does not organize regular meetings with workers where the concern of workers about the environmental quality are discussed.		
Objective Evidence:	<p>Sighted the meeting minutes for EPMC meeting. Based on the Environmental Mainstreaming Directive by DOE, the EPMC is required to be performed minimum once per quarter. The site has yet to perform the EPMC meeting for the quarter after the meeting on the 13/05/2019.</p> <p>The environmental regulatory compliance monitoring committee (ERCMC) which is required by DOE to be performed once a year has yet to be performed. The meeting is currently planned to be conducted on the month of October 2019. Email communication is sighted for the ERCMC meeting.</p>		
Root Cause Analysis:	Busy schedule of the mill's operation causing delay of action.		
Correction & Corrective Action:	<p><b>Correction:</b> EPMC meeting carried out in 1<sup>st</sup> Sept 2019 3pm</p> <p><b>Corrective Action:</b> MR to ensure the continuity of the meeting every quarter.</p>		

<b>Non-Conformity</b>	N° 7 of 11	<input type="checkbox"/> Major	<input checked="" type="checkbox"/> Minor
Department / Function:	Principle 5: Environment, natural resources,	Standard Ref.:	4.5.2.1

	biodiversity and ecosystem services		
Document Ref.:		Issue / Rev. Status:	Open (Due by 10th June 2020)
Details of Nonconformity:	The site does not have a plan to assess the usage of non-renewable energy in the operations over the baseline set.		
Objective Evidence:	Sighted that the usage for diesel and water consumption for 2019 is higher than the baseline data. There has yet to be any plan or action taken to assess the usage of non-renewable energy above the baseline.		
Root Cause Analysis:	Newly implementation of data collection for the non-renewable energy to compile energy baseline, the management plans are not recorded, only briefed to mill manager verbally.		
Correction & Corrective Action:	<b>Correction:</b> Updated the energy baseline sheet with analysis and reasoning. <b>Corrective Action:</b> MR to review the energy baseline sheet monthly.		

<b>Non-Conformity</b>	N° 8 of 11	<input type="checkbox"/> Major	<input checked="" type="checkbox"/> Minor
Department / Function:	Principle 5: Environment, natural resources, biodiversity and ecosystem services	Standard Ref.:	4.5.3.3
Document Ref.:		Issue / Rev. Status:	Open (Due by 10th June 2020)
Details of Nonconformity:	The site does not ensure the proper and safe handling, storage and disposal of scheduled waste.		
Objective Evidence:	The site has yet to establish 7th Schedule for the scheduled waste generated by the site.  During site visit the following were sighted: <ol style="list-style-type: none"> <li>Discarded chemicals from the Lab was incorrectly labelled as SW409 Disposed containers, bags or equipment contaminated with chemicals, pesticides, mineral oil or scheduled wastes. Date of generation of the scheduled waste is 20/05/2019.</li> <li>Scheduled waste located at the workshop, workshop store, engine room was found to be without any labelling.</li> <li>Scheduled waste store does not have a signage indicating that it is a scheduled waste store. Two drums of SW305 was sighted, the date of generation is 02/01/2008.</li> </ol>		
Root Cause Analysis:	Busy schedule of the mill's operation causing delay of action		
Correction & Corrective Action:	<b>Correction:</b> <ol style="list-style-type: none"> <li>Discarded chemical from the lab's container was properly labelled with SW429</li> <li>SW store was properly labelled</li> </ol> <b>Corrective Action:</b> SW competent person will make rounds every week to make sure the labels are adequate		

<b>Non-Conformity</b>	N° 9 of 11	<input type="checkbox"/> Major	<input checked="" type="checkbox"/> Minor
Department / Function:	Principle 5: Environment, natural resources, biodiversity and ecosystem services	Standard Ref.:	4.5.4.1
Document Ref.:		Issue / Rev. Status:	Open (Due by 10th June 2020)
Details of Nonconformity:	The site does not assess all polluting activities at the site.		
Objective Evidence:	All polluting activities by the site is recorded in the Environmental Aspects and Impacts Identification and Evaluation Form. The environmental aspects and impacts however does not include the activities at empty bunch yard which may lead to air pollution due to fire, and boundary noise from the operations of the mill to neighbouring sites, among other items.		
Root Cause Analysis:	The POM never identified the above findings as an aspect necessary to be included in the EAI.		
Correction & Corrective Action:	<b>Correction:</b> EAI are updated with the necessary areas <b>Corrective Action:</b> MR will be monitoring and updating the EAI monthly.		

<b>Non-Conformity</b>	N° 10 of 11	<input type="checkbox"/> Major	<input checked="" type="checkbox"/> Minor
Department / Function:	Principle 5: Environment, natural resources, biodiversity and ecosystem services	Standard Ref.:	4.5.4.2
Document Ref.:		Issue / Rev. Status:	Open (Due by 10th June 2020)
Details of Nonconformity:	The site does not establish an action plan to reduce significant pollutants and emissions from the site.		
Objective Evidence:	During site visit, there was observed signs of burning at the empty bunch yard. There are currently no plans for the migration of burning of EFB.  Sighted at the workshop area oily substance in the drain. Interview with site management confirmed that the drain flows directly to the external drain and there is no control measures in place to prevent the pollution from occurring.		
Root Cause Analysis:	The POM has identified the issue, the management of the pom are still planning on how and what mechanism to cater to the pollution.		
Correction & Corrective Action:	<b>Correction:</b> Above mentioned drain was blocked for the time being, and management are planning to build a drainage system to deter pollutants from flowing into the external drain, ease the mill operator to collect the pollutants weekly. <b>Corrective Action:</b> MR will monitor the collection of pollutants every week, and also to deter burning activities within the means of the mill.		

<b>Non-Conformity</b>	N° 11 of 11	<input checked="" type="checkbox"/> Major	<input type="checkbox"/> Minor
Department / Function:	Principle 6: Best Practices	Standard Ref.:	4.6.4.2
Document Ref.:		Issue / Rev. Status:	Closed on 1 <sup>st</sup> November 2019

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Details of Nonconformity:	There are no agreed contracts with the contractors
Objective Evidence:	<p>The contracts for LKN Trading (TRNS/19) and Ong Tat Enterprise (TRNS/19) was sighted. There was no evidence of agreed contracts with the contractors sighted.</p> <p>Interview with stakeholder during stakeholder consultation informed that there was no contract provided to him upon rental of the premise from the site. Interview with management confirmed that there is no contract provided.</p>
Root Cause Analysis:	Contract are agreed upon verbally.
Correction & Corrective Action:	<p><b>Correction:</b> Contract has been drafted and will be signed by contractors. Please refer to Appendix 11 and 12. Meanwhile for the canteen operation, the mill had conducted inspection to the canteen cleanliness by the 3<sup>rd</sup> party safety and health consultation, and refer to the assessment result the canteen the building has not follow the building safety specifications and have high risk to result in adverse effect with safety compromise for workers who operate within the said building. The management has issued the notification to the operator and an agreement to the operator.</p> <p><b>Corrective Action:</b> Contract will be reviewed yearly.</p>
Close out evidence	<p>For contract agreement with the transporter, refer to attachment of <b>"Signed Contract"</b>. For the canteen agreement, refer to attachment <b>"Canteen BUILDING SAFETY, Renovation or Rebuilding of Canteen Notice &amp; Tenancy Agreement"</b>.</p>

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)

Job n°:	MY05437	Report date:	12.11.2019	Visit Type:	MA	Visit n°:	1
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OBS #	Indicator	Observation/Opportunity for Improvement					
1	4.4.6.1	Date Recorded>	11 Sept 2019	Due Date>	-	Date Closed>	-
<b>Details:</b> All employees and contractors shall be appropriately trained. A training programme shall include regular assessment of training needs and documentation, including records of training.							
To include the Safety Operating Procedure training programme as to ensure that operation of the mill is according to mill standard procedure.							

#### Appendix 1: List of Stakeholders Contacted

Stakeholders Details	Relationship	Stakeholder's Input / Comments	Clients Feedback / Response
Wong Joon Chun (Nearby Community)	Head Village (Kg. Merbau)	<ul style="list-style-type: none"> <li>- The village folk has been brief regarding MSPO implementation by the mill.</li> <li>- Mill has make donation to the Kg Merbau regarding upgrading the temple in the village.</li> <li>- At moment, there is no complaints raised by the village folk regarding mill activities has impact to the local society</li> <li>- Most of the local employee is coming from this local community.</li> </ul>	Noted by the management. To maintain the good relation with the stakeholder
Internal Stakeholder	Boiler Operator	<ul style="list-style-type: none"> <li>- Has been with company such for a long time</li> <li>- Obtained his competency of boiler man 2<sup>nd</sup> Grade &amp; 1<sup>st</sup> Grade.</li> <li>- Understand well on his job knowledge.</li> <li>- Salary for meet with the market demand</li> </ul>	<ul style="list-style-type: none"> <li>- Noted by the management.</li> <li>- Continue to provide the staff with continues MPSO awareness</li> </ul>



		<p>suit with this competency</p> <ul style="list-style-type: none"> <li>- Well understanding with the MSPO implementation</li> </ul>	
External Stakeholder	Canteen Operator	<ul style="list-style-type: none"> <li>- He just appointed as the canteen operator for the past 3 month.</li> <li>- Canteen customer are the mill employee and transport driver.</li> <li>- Regarding the dust problem, his own initiative installing the netting</li> <li>- Has made a verbal grievance to the mill owner regarding the clogged drainage however no action taken as the management consider the problem should be rectify by the canteen operator itself.</li> <li>- No contract has been given to the canteen operator as to secure long term business of canteen operator.</li> <li>- Recently auditor has received the official complaints from this stakeholder regarding unfair contract agreement given which he believe it's a way to remove him from the canteen operation.</li> </ul>	<p>Official tenancy agreement will be drafted and signed by both parties. Please find the attached tenancy agreement.</p> <p>However, the management has decided to renovate/re-build the canteen building after an inspection by DOSH official, a letter has been issued to the canteen operator (please refer to renovation or rebuilding letter) but since then the canteen operator has not been showing up.</p>



## Appendix 2: MPOB License

MPOB License Number (Mill/ Estate)	Scope of Activity	Expiry Date
Pantai Remis Palm Oil Mill 500097404000	MENJUAL DAN MENGALIH- FFB,PK,CPO,SPO MEMBELI DAN MENGALIH-FFB,PK,CPO MENYIMPAN-PK,CPO,SPO MENGILANG-FFB	31/07/2020

**-End of Report-**