Report Initial

AUDIT TYPE (conducted at client site/sites)	Certification stage 2 ☒ Scope Change ☐	Surveillance ☐ Address Change ☐	Re-certification ☐ Special Audit ☐	
	Audit Conducted at the site of client. (✓Physical audit / partial audit by ICT / Full Audit by ICT)			
audit Standards	☑ISO 9001	☑ISO 14001	☑ISO 45001	Other : specify
	Combined audit /☑ Integrated / Single Audit			
REPORT NO				
COMPANY NAME	DEEVIN SEISMIC SYSTEMS PVT. LTD.			
MAIN OFFICE ADDRESS	73B, SECTOR -C, INDUSTRIAL AREA, MANDIDEEP, DIST- RAISEN MADHYA PRADESH - 462046, INDIA			
OTHER ADDRESS	N/A			
TEL NO / FAX NO / WEB	Tel: 6232928393	Fax:	web: akhiljain@deevinss.com	
TAX MANAGEMENT	Delhi	TAX IDENTIFICATION NO		
TOP MANAGEMENT		T.M. REPRESENTATIVE	Mr. Mr hemant	
EMPLYOEE NUMBER	*Gen Shift*	Shift 1	Shift 2	*Gen Shift*
Audit Objectives & Criteria for ISO 9001,14001,45001 & IMS	To determine evidence of conformity, evaluation of performance including regulatory, ability to provide & control product and services and responsibility for policies relevant to QMS ISO-9001/ EMS ISO-14001/ ISO 45001/IMS			
Audit Objectives & Criteria for ISO 27001	To ensure the effectiveness of the management system to ensure that the client, based on the risk assessment, has implemented applicable controls, and achieved the established information security objectives			
Audit Objectives & Criteria for ISO 20000-1;2018	It includes checking the interfaces at the boundaries of the SMS with which other parties participating in the activities of the SMS are identified and controlled. It also ensures that the client is aware of managing any risks to the SMS and the services arising from the interfaces.			
Audit Objectives & Criteria for ISO 37001	To determine evidence of conformity, evaluation of performance including regulatory, ability to provide & control processes in respect of Anti bribery controls and responsibility for policies relevant to ABMS-37001			
AUDIT SCOPE	MANUFACTURER OF STRUCTURAL BEARINGS, ELASTOMER BEARINGS, BRIDGE & BUILDING EXPANSION JOINTS, PRE STRESSING & POST TENSION ANCHORAGES, GEO COMPOSITE, GEO STRAP" AND ALLIED PLASTIC, MACHINED & RUBBER PRODUCTS WITH ACCESSORIES			
Comment of auditor on appropiateness of scope	Yes, scope was appropriate as per the work			
EA/ANZSIC	Allocated code is verified with scope (✓Yes/NO) 18			
Audit Date	11/08/2025	Audit Man/Day	3.0	
AUDIT TEAM	Name Surname	EA	NACE/SIC	SIGNATURE
LEAD AUDITOR	Dr Nilesh maheshwari			
AUDITOR				
AUDITOR				
AUDITOR CANDIDATE				
EXPERT				
un-resolved point (if any)				

Report innitial part

Standart Clauses	APPLICABLE	MINOR	MAJOR	OBSERVATION	FINDINGS EXPLANATIONS
4.1 Context of organisation/ understanding the organization and its context					
Has organisation determined external and internal issues relevant to the IMS?					Yes, the organization has determined external and internal issues relevant to the Quality Management System (QMS), Environmental Management System (EMS), and Occupational Health and Safety (IMS). Verified below documents - DSPL-HSE-F03 SWOT Analysis - DSPL-HSE-R12 Environmental Aspects and Impacts Register - DSPL-HSE-RA2 Health and Safety Risk Assessments - DSPL-HSE-R05 Employee Consultation Reports
Have monitored and reviewed information about external and internal issues ? (Record and Record) ?					Yes, the organization has monitored and reviewed information about external and internal issues. Verified belwo documents - DSPL-HSE-F18 Internal and External Issue Register, - DSPL-HSE-F12 MOM of MRM, - DSPL-HSE-F14 Change Request Form, - DSPL-HSE-P09 Procedure for change managment. - DSPL-HSE-P02 Procedure for Risk Management. This is recorded and procedurally managed to ensure that changes or developments are tracked and analyzed regularly.
Has organisation determines any chnages in context de to climate change? What changes in context is determine taken into consideration climate change ?					Climate Change records DSPL-HSE-F18 Yes. Climate change identified in DSPL-EMS-F18 Yes, the organization continuously monitors evolving climate conditions and their impact on business, and includes local, national, and global climate monitoring as well as research on how such climate changes may affect business. • Assess the impact of climate change on their operations and strategic objectives. • Engage with interested parties to understand and address any climate change-related requirements. Embed sustainability and environmental responsibility into their quality management systems.
4.**2 Understanding the need and expectation of workers and other interested parties**					

Are the need and expectation of workers and interested parties that are relevant to the IMS are identified?					Authorities Compliance Regulators Compliance Neighbors/Local community Lack of intrusive noise or odor or vibration Utility companies – power, water, fuel, telecoms Prompt payment/good resource management Staff dependents Maintenance of income, reputation Trade bodies/associations Adherence to professional and membership requirements. Maintenance of standards Emergency services Good risk management. Emergency procedures in place and drilled Contractors Level playing field/prompt payment/clear work instructions/good working conditions Environmental pressure groups Good risk management, active regeneration projects Society Environmental Protection, Ethical behavior, Compliance with statutory and regulatory requirements Yes, the requirements of interested parties relevant to the Health and Safety (IMS) are included in the management system. Verified below documents - DSPL-HSE-A10 - DSPL-HSE-R11
Are the requirements of these workers and interested parties that are relevant to the Occupational Health and Safety Management System addressed?					Yes in the interested parties needs and expectation register DSPL-HSE-A10 Workers'(labor) representative Good working conditions, training opportunities, maintenance of company reputation and good working relations Staff Good working conditions, training opportunities, Job security, recognition and reward, maintenance of company reputation and continued income
Have monitored and reviewed information about interested parties relevant to IMS? (Record and Record) ?					Yes in the interested parties needs and expectation register DSPL-HSE-A10
Do any interested party have climate change as requiirement? How organisation intent to fulfill the added requirement?					Yes, Added in DSPL-HSE-INP-01 Climate Change records DSPL-HSE-F18 Yes. Climate change identified in DSPL-EMS-F18 Yes, the organization continuously monitors evolving climate conditions and their impact on business, and includes local, national, and global climate monitoring as well as research on how such climate changes may affect business. • Assess the impact of climate change on their operations and strategic objectives. • Engage with interested parties to understand and address any climate change-related requirements. Embed sustainability and environmental responsibility into their quality management systems.
4.3 Determining the scope of the Occupational Health and Safety Management System					
Is IMS scope available and appropriate based on external internal issues, requirement of workers, interested parties and product or services of organisation?					DSPL-IMSMS-M-01 MANUFACTURER OF STRUCTURAL BEARINGS, ELASTOMER BEARINGS, BRIDGE & BUILDING EXPANSION JOINTS, PRE STRESSING & POST TENSION ANCHORAGES, GEO COMPOSITE, GEO STRAP AND ALLIED PLASTIC, MACHINED & RUBBER PRODUCTS WITH ACCESSORIES”

What clauses are not applicable with justification					No Exclusion
4.4 Occupational Health and Safety Management System and its processes					
4.4.1 Are processes needed for IMS have been identified and evaluated?					Yes, processes needed for the Occupational Health and Safety (IMS) have been identified and evaluated. - DSPL-HSE-M01 HSE Manual - DSPL-HSE-P09 to P 24 Process Procedures - DSPL-HSE-M01 – Annuexure 03 KPIs - DSPL-HSE-P03 Annuexure 01 Process Flowcharts for Processes. - DSPL-HSE-P1 to P13 IMS Procedures and Work Instructions - DSPL-HSE-P1 to P13 Annuexure 05 Process Flow Diagrams or Health and Safety Process Maps
What are the identified processes?					Project Management, Engineering, Installation and Commissioning, Sales and Marketing, Procurement and Supply Chain Management, Quality Assurance/Quality Control, Health, Safety, and Environment, Technical Support and Maintenance, Customer Service, Finance, HR and Administration
Do Processes interactions and PDCA approach is used for all processes?					Yes, Processes interactions and the Plan-Do-Check-Act (PDCA) approach are utilized for all departments or processes within the organization. - DSPL-HSE-M01 HSE Manual - DSPL-HSE-P09 to P 24 Process Procedures - DSPL-HSE-P03 Annuexure 01 Process Flowcharts for Processes. - DSPL-HSE-P1 to P13 IMS Procedures and Work Instructions - DSPL-HSE-F12 to F17 Monitoring, Measurement, and Analysis Records
Do responsibility and authority for all processes are defined?					Yes, responsibility and authority for all processes are defined within the organization. - DSPL-HSE-M01 HSE Manual - DSPL-HSE-MO1 Annuexure 04 Organizational Chart - DSPL-HSE-HR-JD/01 to 26 Job Descriptions - DSPL-HSE-MR – WR/1 to 31 Work Instructions
Have identified risk and opportunities for each processes?					Yes, the organization has identified risks and opportunities for each process. - DSPL-HSE-R08 Risk and Opportunity Register - DSPL-HSE-F03 SWOT Analysis - DSPL-HSE-F02/01 to 05 Corrective and Preventive Action Records (CAPA) - DSPL-HSE-MR – WR/1 to 31 Work Instructions - DSPL-HSE-RA2 Health and Safety Risk Assessments
How they plan to improve the processes and IMS?					Upgrading risk assessment register providing mitigation plans in management review meetings and by taking and implementing most suitable corrective action and preventive action Verified below documents - DSPL-HSE-MRM Management Review Meeting - DSPL-HSE-R08 Risk and Opportunity Register - DSPL-HSE-MRM Annuexure 02 Continual Improvement Plan - DSPL-HSE-F02/01 to 05 Corrective and Preventive Action Records (CAPA)

4.4.2 Has documented information to support the operation of its processes (Record)?					Yes, the organization has documented information to support the operation of its processes. - DSPL-HSE-P09 to P 24 Process Procedures - DSPL-HSE-MR – WR/1 to 31 Work Instructions - DSPL-HSE-HR-JD/01 to 26 Job Descriptions - DSPL-HSE-P03 Annuexure 01 Process Flowcharts for Processes. - DSPL-HSE-P1 to P13 IMS Procedures and Work Instructions - DSPL-HSE-P1 to P13 Annuexure 05 Process Flow Diagrams or Health and Safety Process Maps
Is documented information available to provide confidence that processes are carried out has planned (Record)?					Yes, documented information is available to provide confidence that processes are carried out as planned. - DSPL-HSE-PCL-01 to 13 Process Checklists, - DSPL-HSE-WO-01 to 10 Work Orders, - DSPL-HSE-HRT-001 to 009 Training Records,
5.1 Leadership and worker participation					
Is top management provided leadership and worker participation to the IMS?					Yes, top management provides leadership and commitment to the Occupational Health and Safety (IMS). - DSPL-HSE-M01 HSE Manual - DSPL-HSE-POL HSE Policy
5.2 Policy					
Establishing the Occupational Health and Safety policy					
Is IMS policy established, documented and appropriate to support its strategic directions?					Verified Company HSE Policy - DSPL-HSE-POL HSE Policy The company is committed to conducting its operations in an environmentally responsible and sustainable manner. We recognize our responsibility to protect the environment, conserve resources, and prevent pollution while delivering high-quality products and services to our customers.
Communicating the Occupational Health and Safety policy					
Is IMS Policy available, communicated and understood and available to relevant workers and other interested parties?					Yes, the HSE policies are available, communicated, and understood by relevant interested parties The HSE policy is displayed in the Office premises as a part of internal communication. Displayed in the Company website as a part of external communication.
5.3 **Organizational roles, responsibilities and authorities**					
Has roles, responsibility and authority defined for personnel and workers responsible for maintenance and implementation of IMS defined?					Yes, roles, responsibilities, and authorities are defined for personnel responsible for the maintenance and implementation of the Occupational Health and Safety (IMS). Verified below documents - DSPL-HSE-HR-JD/01 to 06 Job Descriptions - DSPL-HSE-HRT-001 to 009 Training Records, - DSPL-HSE-MR – WR/1 to 07 Work Instructions
5.4 **Consultation and Participation of workers**					
Is consultation and participation of workers documented and applicable at all levels in IMS?					Yes, the organization maintains a process for consultation and participation of workers at all applicable levels. - DSPL-HSE-TBT-R/01 to 11 Tool Box Talk Reports - DSPL-HSE--HSC/01 to 11 Health and Safety Committee Records - DSPL-HSE-MMO memo
6.0 planning					
6.1 Actions to address risks and opportunities					
6.1.1 general					

Are risk and opportunities known and defined?					Yes, risks and opportunities related to the Occupational Health and Safety (IMS) are known and defined within the organization. Fines for poor compliance with safety, health and environmental care requirements. Risk Classification: Important Risk Control Measures: - Updating of the matrix of legal requirements in safety, health at work and the environment. Degree of compliance: 67% Evaluation methodology: Matrix of legal requirements Verified below documents - DSPL-HSE-R08 Risk and Opportunity Register - DSPL-HSE-MRM Management Review Meeting - DSPL-EMS-R05 Environmental Aspects and Impacts Register - DSPL-HSE-R06 Hazard Identification and Risk Assessment - DSPL-HSE-F03 SWOT Analysis
What are the action taken (risk mitigation) to address risk and opportunities?					Verified below documents - DSPL-HSE-R08 Risk and Opportunity Register - DSPL-HSE-MRM Management Review Meeting - DSPL-EMS-R05 Environmental Aspects and Impacts Register - DSPL-HSE-R06 Hazard Identification and Risk Assessment - DSPL-HSE-F03 SWOT Analysis
Are actions (risk evaluation) integrated in IMS and evaluated for effectiveness?					Yes, actions related to risk evaluation are integrated into the Occupational Health and Safety (IMS), and they are evaluated for effectiveness. Verified below documents - DSPL-HSE-R08 Risk and Opportunity Register - DSPL-HSE-MRM Management Review Meeting - DSPL-HSE-F02/01 to 05 Corrective and Preventive Action Records (CAPA)
6.1.2 Hazards					
What kind of method is determined to define hazards, evaluate risks and determining necessary controls?					HIRA Register is maintained to identify the Hazards

<table>
<tr><td>When determining hazards and evaluating risks, are those below taken into consideration:
☐ Activities which are routine or not routine,
☐ Activities of the personnel who has the chance to reach working place,
☐ Factors of human abilities,
☐ Hazards arising from outside of the organization, which may affect people which are under control of the organization,
☐ Hazards related with works which are under organization's control, around workplace,
☐ Infrastructure equipment and materials supplied by organization/others,
☐ Proposed changes on organization's activities or materials,
☐ Changes made in OH&S management system and their affects on activities,
☐ Applicable legal obligations related with application of necessary controls and risk evaluation,
☐ Adaptation of working areas and machine/equipment to human abilities.</td><td></td><td></td><td></td><td></td><td>DSPL-HIRA-F-01

Activity: Administrative work
Danger: Flammable material
Hazardous event: fire
Consequence: burns, suffocation, death
Existing control: NA
Level: IMPORTANT, 21
Engineering Controls: Emergency Lights and Emergency Equipment
Administrative control: Place signaling signs and office evaluation, disseminate emergency plan, training and inspection of fire equipment

Danger: Stair railing and/or stairs in poor condition
Dangerous event: fall to different level
Consequences: falls, blows, death
Control measures: staff induction
Level: Important, 24
Controls:
Engineering Control: Placement of non-slip edges
Administrative control: Training in case of evacuation, implementation of emergency lights and signaling
Residual: Moderate,12

Hazard: Stressful working conditions: type of work increase in work assignment
Hazardous event: overwork, workload
Consequence: Mental and physical fatigue
Existing controls: Comply with established work schedules and not exceed the working day, control work schedules, establish a day off, active breaks
Level: moderate, 12
Controls:
Administrative: Training in stress management, active breaks, training in psychosocial risks.</td></tr>
<tr><td>Does it provide suitable documentation of risk control, determining priorities and controls?</td><td></td><td></td><td></td><td></td><td>Yes. DSPL-HIRA-F-01
<table>
<tr><th>#</th><th>Process / Area</th><th>Hazard</th><th>Potential Risk</th><th>Control Measures</th></tr>
<tr><td>1</td><td>Rubber compounding</td><td>Inhalation of dusts from fillers</td><td>Respiratory irritation, long-term lung damage</td><td>Local exhaust ventilation (LEV), use of respirators, enclosed mixing systems</td></tr>
<tr><td>2</td><td>Handling chemicals (curatives, bonding agents, etc.)</td><td>Skin contact with hazardous chemicals (e.g., isocyanates, resins)</td><td>Dermatitis, allergic reactions, chemical burns</td><td>Use of chemical-resistant gloves, PPE, SDS availability, proper training</td></tr>
<tr><td>3</td><td>Mixing & blending</td><td>Heat and mechanical hazards from mixers</td><td>Entanglement, burns, amputation</td><td>Machine guarding, interlocks, emergency stop systems, operator training</td></tr>
<tr><td>4</td><td>Preheating and mold curing (presses)</td><td>High temperature exposure</td><td>Burns, fire hazards</td><td>Thermal gloves, temperature controls, regular maintenance of press equipment</td></tr>
<tr><td>5</td><td>Mold handling and demolding</td><td>Hot surface contact, manual handling</td><td>Burns, strains, crush injuries</td><td>Mold handling tools, hoists, training on lifting techniques</td></tr>
</table></td></tr>
<tr><td>Are hazard identification, risk evaluation and determined control results documented and up to date?</td><td></td><td></td><td></td><td></td><td>Yes. DSPL-HIRA-F-01</td></tr>
<tr><td>6.1.3 Legal Requirements and other requirements</td><td></td><td></td><td></td><td></td><td></td></tr>
</table>

What are the legal requirements and its applicability to organisation?					Legal Register, DSPl-LR-01. CIN No: U45200MP2008PTC044683 Registration number is 44683. The Environment (Protection) Act, 1986 The Water (Prevention and Control of Pollution) Act, 1974 and its amendments. Electricity act 2003—revised in 2007. Water act 1974 revised in 2003. Air act 1981. The Hazardous and other waste (Management, Handling and Transboundary Movement Rules) 2016 and its amendments The solid Waste Management Rules, 2016. The Noise Pollution (Regulation and Control) Rules, 2000. CIN No: U45200MP2008PTC044683 Registration number is 44683.
Have legal requirements status has been determined while developing IMS. Very important (IMSMS) :Describe in detail what are legal compliance obligation and how organisation fulfill them.					Comprehensive Documentation of Procedures: The audit revealed that the organization has comprehensive documentation of procedures for key processes such as equipment maintenance, emergency response, and quality control. DSPL-HSE-LR1 Legal Compliance Register DSPL-HSE- P24 Compliance Obligations Procedure DSPL-EMS- LR5 Environmental Permits and Licenses Register DSPL-BDM- SPC/1/01 Customer Contracts and Specifications following below is how organization fullfil them Robust Training Program: It was observed that the organization has a robust training program in place, with well-documented training records and regular training sessions conducted for employees. This ensures that employees are adequately trained in occupational health and safety practices and are equipped to perform their roles effectively. High Level of Regulatory Compliance: The audit found that the organization demonstrates a high level of compliance with regulatory requirements, including those related to hazardous waste disposal, workplace ergonomics, and health and safety standards. This reflects a strong commitment to legal compliance and responsible business practices. Adherence to Personal Protective Equipment (PPE) Policies: Employees were observed to consistently use appropriate personal protective equipment (PPE) while performing tasks in high-risk areas, indicating a strong culture of safety within the organization and adherence to internal safety policies. Effective Emergency Response Preparedness: The audit revealed that the organization has well-developed emergency response plans and protocols in place, including comprehensive evacuation plans and clear communication procedures. This ensures that employees are adequately prepared to respond to emergencies and minimizes potential risks.
6.1.4 planning action					
Are processes are based on hazards, legal requiremets and risk and opportunities identified?					Yes. DSPL-HIRA-F-01
How legal requirements is evaluated?					DSPL-HSE-LR1 Legal Compliance Register. Evaluated Annually
6.2 Occupational Health and Safety objectives and planning to achieve them					

6.2.1 What are the IMS objectives?					Reduce hazardous waste generation > 10%. Increase PPE compliance among workers – 100% Reduce noise levels in machining area < 85b dB Conduct safety drills and emergency preparedness training – Min 2 in a year Reduce water usage in bearing washing operations – 5% Incident action < 5 hrs. DSPL-IMSMS-OBJ
Are IMS objectives measurable, appropriate, updated and documented?					Yes. As per DSPL-IMSMS-OBJ
6.2.2 Is plan available to achieve IMS objective?					Yes. As per DSPL-IMSMS-OBJ
6.3 **Planning of changes**					
Is documented information for expected plan to impart change in IMS available?					Yes, documented information outlining the expected plan to impart change in the Occupational Health and Safety (IMS) is available. - DSPL-HSE-P12 Change Management Plan: - DSPL-HSE- P14 Communication Plan: - DSPL-HSE-HR-P02 Training Plan:
7 Support					
7.1 Resources					
Are resources determined and provided as per the need to IMS ?					Yes, resources are determined and provided as per the need for the Occupational Health and Safety (IMS). • CNC Vertical Milling Center Machines • CNC Lathe Machines • CNC Vertical Turning Lathe Machines • Shot Blast & Water less Paint Booth • Shot Blast & Water less Paint Booth • GEO Composite Manufacturing Machines • GEO Strap Manufacturing Machines • Kneader & Mixing Machines • Rubber Moulding Hydraulic Presses & Others • Total plot area of 12,402 Sq. Mtr.
7.2 Competence					
Did organization determine training, education, experience and etc. competency terms of the workers, which may affect OH&S under control, in workplace?					Yes Verified - DSPL-HSE-HR-F03 Competency Matrix - DSPL-HSE-HRT-001 to 009 Training Records - DSPL-HSE-HR-JD/01 to 26 Job Descriptions
Are personnel competent as per defined competency?					During the interview w it was found that the employee is aware on the Job.
Are determined trainings realized, evaluated and recorded?					Induction Trainings are conducted by each department concerned person for all the new joiners, Trainings are QOC provided as per the requirements.
7.3 Awareness					
Are workers are aware of IMS Policy, Objectives, Incidents, Hazards And IMS risks?					During the interview with Mr vivek it was found that the person is aware on the HSE Policy & Objectives
Are workers are aware of implication of not confirming with IMS?					All the person at DSPL are aware on the non-conformance with the HSE System & DSPL has maintained the relevant procedure and records when a non-conformance arises.
7.4 Communication					

About IMS hazards and IMS MS, are methods of those below provided for documenting, answering, application and maintaining: ☐ Internal communication in organization's various levels and functions, ☐ Communication between contractors and other customers which come to work place, ☐ Receiving related communicaton coming from relevant exterior parties.					The organization has maintained procedure for QHSE Consultation and Communication. Verified: DSPL-HSE-SOP-P10 Consultation and Communication. Procedure Communication plan and log sheet is maintained.
7.5 Documented information					
7.5.1 General					
Are mandatory Records (Document information) available?					All the mandatory procedures are maintained as per ISO 45001:2018 geocomposite testing format — DSSPL/F/QA/03-02 geonet testing formet — DSSPL/F/QA/03-01 Geostrap parameter sheet — DSSPL/PROD/F/03 geostrap (perawab) mtc format — - geostrap testing formet — DSSPL/F/QA/03-03 geostrap trail format — - Jobcard formet of geocomposite — DSSPL/F/PROD/01-03 jobcard formet of gestrap — DSSPL/F/PROD/01-02 NON WOVEN TESITING FORMAT — DSSPL/F/QA/01-03 Non wpven geotextile mtc format — - paking list of geostrap — DSSPL/F/QA/PL-02 RAW MATERIAL TESTING FOMRAT — DSSPL/F/QA/01-01 yarn testing format — DSSPL/F/QA/01-02
Are other documented information required for effectiveness of IMS determine and documented?					Yes Verified : - Manuals - Procedures, plans and charts - Policies - Reports - Records - Memos, RFIs
7.5.2 Creating and updating					
Is document information (Record) for creating and updating document information available, appropriate and implemented?					Organization has maintained the relevant procedure for creating and updating the documented Information Verified DSPL-HSE-SOP-P8 Procedure for document create control and change
7.5.3 Control of documented information					
Are documented information's required by IMS is controlled, available and adequately protected?					Organization has maintained the relevant procedure for creating and updating the documented Information Verified DSPL-HSE-SOP-P8 Procedure for document create control and change
Are documented information of external origin is determined, identified and controlled?					Yes. Verified the Master list DSPL-HSE-EOD-01
Are documented information's (Record) available, appropriate, implemented and controlled?					Yes. Verified the availability of QHSE Policy. Document found available with all the departments. Document found in non-editable format with GM sign and stamp.
8 Operation					

8.1 Operational planning and control					List of SOP, DSPL-SOP-01. SOP – Tensil test roller grip SOP – Carbon black content SOP – CBR SOP – Cone Broke tester SOP – Geonet SOP – GSM SOP – Melt Flow index SOP – Ponding test SOP – Shear Bond Test Geo Strap The straps consist of distinct channels of tightly packed high tenacity polyester (PET) yarn encased in polyethylene sheath
How does the establisment determine processes and activities needed to apply controlling precautions to carry out IMS risks and ones related with determined hazards?					Verified : - DSPL-HSE-SOP-P01 to P17 Std. Operating procedures - DSPL-HSE-SOP-P01 to P17 Annexures: process flow charts - DSPL-HSE-R06 Hazard Identification and Risk Assessment - DSPL-HSE-HRT-001 to 009 Training Records - DSPL-HSE-SOP-P12 Monitoring and Measuring Equipment Procedure DSPL-HSE-MRM Management Review Meeting
Do organization apply and maintain methods specified for running criteria about whose requisition judged as necessary, ☐ for activities IMS integration of organization controls, ☐ Controls related with bought goods, equipment and services, ☐ Controls related with contractors or other customers who come to workplace, ☐ Documented Records which include situations for which it is possible for occurrence of refracting from IMS policy and aHSE, ☐ for situations in which refracting from IMS policy and aHSE is possible.					DSPL has establish, implement and maintain a process (es) for the elimination of hazards and reduction of OH&S risks using the following hierarchy of controls: a) Eliminate the hazard; b) Substitute with less hazardous processes, operations, materials or equipment; c) Use engineering controls and reorganization of work; d) Use administrative controls, including training; e) Use adequate personal protective equipment. DSPL control planned changes and review the consequences of unintended changes, taking action to mitigate any adverse effects, as necessary. DSPL also ensured that outsourced processes are controlled if any. Proper control is established at selection and evaluation stage to ensure that they are committed to implement related HSE actions as defined in our HSE.

<table>
<tr><td>Have determined how to reduce IMS risks and eliminate hazards?</td><td></td><td></td><td></td><td></td><td>Yes. Verified the HIRA Register.
<table>
<tr><th>Activities / Verifications/ Inspections</th><th>Frequency</th><th>Performed by</th></tr>
<tr><td>• Safety inspection checks</td><td>Monthly</td><td>IMS Head</td></tr>
<tr><td>• First aid box checks</td><td>Monthly</td><td>IMS Head</td></tr>
<tr><td>• PPE preventive maintenance</td><td>Six Months</td><td>IMS Head</td></tr>
<tr><td>• Fire frightening checks</td><td>Monthly</td><td>IMS Head</td></tr>
<tr><td>• Safety shower checks</td><td>Monthly</td><td>IMS Head</td></tr>
<tr><td>• OH&S Objectives and targets</td><td>Six Months</td><td>Functional Heads</td></tr>
</table></td></tr>
<tr><td>Does the organization maintained methods for temporary and permanent changes that impact IMS performance?</td><td></td><td></td><td></td><td></td><td>Yes. By change management procedure DSPL-HSEP-14</td></tr>
<tr><td>How does organization control the procurement of product and services with its contractor’s in order to ensure their conformity with IMS?</td><td></td><td></td><td></td><td></td><td>By Supplier Registration DSPL-PUR-F01</td></tr>
<tr><td>How does the organization ensure that outsourced functions and processes are controlled?</td><td></td><td></td><td></td><td></td><td>By Regular monitoring of the service providers</td></tr>
<tr><td>8.2 emergency preparedness and response</td><td></td><td></td><td></td><td></td><td></td></tr>
<tr><td>Have established, implemented and maintained processes for emergency situation including the provision of first aid?</td><td></td><td></td><td></td><td></td><td>Yes. Verified the procedure for Emergency Preparedness and response-DSPL-IMSEP-11</td></tr>
<tr><td>What are the planned actions to respond, prevent and mitigate adverse IMS. Impact during emergency?</td><td></td><td></td><td></td><td></td><td>Mock drills are conducted periodically.
DSPL-HSE-F12. Last conducted on 22/05/2025</td></tr>
<tr><td>How planned action are tested, reviewed and revised based on the test or actual emergency situation?</td><td></td><td></td><td></td><td></td><td>There is an Emergency Response Plan, with code DSPL-HSE-F12, in which the proposed actions have been identified.
1) List of different emergency situations in the organization. - fire due to different reasons, Oil spillage, Building collapse.
2)Training on fire fighting on dated 22/05/2025.
3) Mock drill records for evacuation dated 22.05.25
Response time 1.2 minutes.
4) Key management at security is effective which can affect during emergency situations
5)Emergency phone numbers are maintained-ambulance, police, hospital</td></tr>
<tr><td>Have relevant communication, information and training provided to all contractors, visitors, interested parties and workers under its control?</td><td></td><td></td><td></td><td></td><td>There is an Emergency Response Plan, with code version 02 and approval date 22/05/2025, in which the proposed actions have been identified.</td></tr>
<tr><td>What documented information is available?</td><td></td><td></td><td></td><td></td><td>Mock drills are conducted periodically.
DSPL-HSE-F12. Verified the procedure for Emergency Preparedness and response-DSPL-IMSEP-11</td></tr>
<tr><td>9 Performance evaluation</td><td></td><td></td><td></td><td></td><td></td></tr>
<tr><td>9.1 Monitoring, measurement, analysis and evaluation</td><td></td><td></td><td></td><td></td><td></td></tr>
<tr><td>9.1.1 General</td><td></td><td></td><td></td><td></td><td></td></tr>
<tr><td>Have organisation determined what, how, when monitoring, measuring, analysis and criteria for evaluation of IMS performance?</td><td></td><td></td><td></td><td></td><td>The organization has maintained the procedure for Performance Monitoring And Improvement</td></tr>
</table>

Are they using adequately calibrated monitoring and measuring equipments?					Yes. Verified the master list of equipment's, DSPL-MNT-F011. All Equipment's are calibrated Verified Test certificate of Fire extinguishers for Pressure testing, Refilling, Servicing & Inspection of Following Type. Calibrated Equipment: Thermal Scanner Status: O.K Due: December 2025 Calibrating Agency: Zeon & Tech. Calibration results are documented & verified.
How communication with relevant internal, external parties and for legal requirements is done?					Through Memos, Meetings, Emails
What document information organisations have on monitoring, measuring, evaluation and analysis?					Corrective Action Reports DSPL-HSE-QC-CAPA-R01 to R013 Training Records: - DSPL-HSE-HRT-001 to 009 Request for Information DSPL-HSE-QC-RFI/01 to 10 Records Retention: DSPL-HSE-QC-RTN/01 to 7.
9.1.2 Evaluation of Compliance.					
How they ensure that compliance obligations with legal requirements are established, implemented and maintained?					Regular Monitoring of the legal compliance register
Do they have knowledge and understanding of compliance status?					Yes. With the support of the HSE Officer Shahid
What documented information are available? Name of person responsible for employee's health/ health officer also education and licence number if any. Name of hospital /clinic contracted for employee's health checkup/ treatment with registration number. Name of doctor who has conducted health checkup last time. Describe the interview of person responsible for health of employees. Name of employees whose health record has been checked. Did hospital /clinic confirm that they have performed checks? What is comment of person responsible for health/ doctor on the general health of employees. What suggestion person responsible for health/doctor given for improvement in health of employees. In opening and closing meeting is health office signature is mentioned? And during closing and opening meeting auditor contact with the hospital/clinic doctor?					Name of person responsible for employee's health : Mr. Deepak Name of hospital /clinic contracted for employee's health: Kailash Hospital Name of doctor who has conducted health check-up last time: Dr. Ajay Khandelwal Name of employees whose health record has been checked : Hari Did hospital /clinic confirm that they have performed checks: Yes What is comment of person responsible for health/ doctor on the general health of employees: Overall, the general health of employees appears to be satisfactory, with a focus on preventive measures such as regular health screenings and wellness programs In opening and closing meeting is health office signature is mentioned? And during closing and opening meeting auditor contact with the hospital/clinic doctor: Yes.
9.2 Internal audit					
Do organisation have document information for internal audit					Internal audit Procedure: - The company maintains internal auditing procedure DSPL-HSE-SOP-P5 Internal audit procedure defined the scope, criteria's and frequency. Internal audit Date: -Last internal audit was conducted on 29.07.2025-30.07-2025. List of attendees: -05 Frequency :- Internal Audit is conducted once in 6 months.

Do the documented information confirm to the requirement of standard?					The organization conducts internal audits at planned intervals to determine whether the management system conforms to contractual and regulatory requirements, to the requirements of ISO 9001, and to management system requirements. Audits also seek to ensure that the management system has been effectively implemented and is maintained. These activities are defined in the document – DSPL-HSE-SOP-P5
Very important: Describe Internal audit process of organisation, which department are audited, And provide comment on effectiveness of Internal audit 1. Date of internal audit? 2. List of auditees involved in internal audit report and their designations. 3. Frequency of internal audit? 4. How many NC's in the internal audit? 5. Are all the NC's closed during certification audit?					Internal Audit procedure: DSPL/IA/01 Internal audit procedure defined the scope, criteria's and frequency. Internal audit Date:-Last internal audit was conducted on 29.07.2025 - 30.07.2025. Audit Schedule- Doc no: DSPL/ IA/01 Audit notes - Doc no: DSPL/IA/01 Done by the IA : Mr. vivek Frequency of IA is done once a year; last IA was done on 29.07.2025 - 30.07.2025. 01 minor NC raised and closed within timeframe. All Departments covered.
9.3 Management review					
Do organisation have document information for **Management review**					Management review procedure : - The company maintains Management review procedure DSPL-HSE-SOP-P6 List of attendees :-05 Frequency :- Management review meeting is conducted once in 6 months
Do the documented information confirm to the requirement of standard?					The organization conducts management review meetings at planned intervals to determine whether the management system conforms to contractual and regulatory requirements, to the requirements of ISO 45001, and to management system requirements. These activities are defined in the document – DSPL-HSE-SOP-P6
Very important: Describe Management review process of organisation, Who participated in MRM, What decision are taken And provide comment on effectiveness of Management review 1. Date of management review meeting? 2. Management review agenda no.? 3. Frequency of management review meeting? 4. Are all the internal audit NC's discussed in the MRM? 5. Did client discussed about the future plans and its mitigation during the MRM? All the internal audit NC's closing report found in MRM meeting?					The company maintains management review meeting Record, defines the process and methods for conducting both formal and informal management reviews of the IMS are conducted once in a year. The last MRM (MRM/P/01/16) is conducted on 05.08.2025. Headed BY: Mr. Sandeep Deshpande (Director) inputs: Risks and opportunities Possible changes that might affect the system External provider and supplier's performance Customer satisfaction and perception Audit results Non-conformity and corrective actions Outputs Process improvement actions MRM Outputs After employees are hired, they're trained on safe work practices. Supervisors which workers or have them watch each other to prevent unsafe actions. Inspections find safety problems which are then corrected. Safety Signes will be displayed in the entire plan. Management reviews are conducted once in 6 months. Duration of MRM-1 to 3 hours Venue- Meeting room of the office G.M, EC, IMS Manager else all the department managers attend the meeting on 30.07.2025.Ref # Minutes of meeting IMS-MSL-03.

10 Improvement					
10.1 General					
Have organisation identified opportunities for improvement and implemented any necessary actions and maintained documented information for it?					Yes, Verified - DSPL-HSE-R08 Risk and Opportunity Register
10.2 Incident, Nonconformity and corrective action					
How does the organization investigate and manage incidents and non conformities and corrective action taken as a result are maintained and controlled?					Verified Procedure for Control of Non-Conforming Product DSPL-HSE-SOP-P9 Verified DSPL-HSE-F02/01 to 05 Corrective Action Records Verified DSPL-HSE-P10 Incident Reporting Procedure DSPL-PRA-002-01 Sequence of Communication and Attention of Emergencies, Accidents and Incidents DSPL-PRA-002-02 Incident/Accident Report DSPL-PRA-002-03 Work Accident Investigation Report DSPL-PRA-002-04 Hazardous Incident and Incident Record DSPL-PRA-002-05 Analysis and Investigation of Accidents-MINTRA DSPL-PRA-002-06 Follow-up of Accidents and Incidents
10.3 Continual improvement					
What documnted informations available for to continually improve the suitability, adequacy and effectiveness of IMS and enhance environmetal performance?					The continual improvement of HSE is facilitated through the use of environment policy, objectives, and audit results, analysis of data, corrective action and output of management review to determine need or opportunities to be identified as a part of continual improvement. Safety awards will be introduced to avoid incidents.

Report last part

QACS Logo usage					
Where QACS Logo is used?	✓				Yes appropriate
Are QACS Logo usage instruction conditions fulfilled?	✓				Yes appropriate
Is it prevented from using on product?	✓				Yes
Is their any deviation form the audit plan if yes reason and it impact.	✓				Audit is conducted as per Audit plan
Any singnificant issue impacting audit programme	✓				No
What are the significant changes since last audit.	✓				Yes appropriate
Does management system is capable to meet applicable requirements and expected outcomes?	✓				Yes
Do internal audit and management review processes are effective?	✓				Yes
Have audit objectives have been fulfilled? And provide the details if partial / full audit is conducted by use of ICT.	✓				Yes appropriate
Recommendation from audit team.	✓				Recommended continue touse certificate

Positive Points	
Standard Clause No	Explanations

Opprtunities for improvement

Standard Clause No	Explanations

☐ After closing the discrepancies appropriately IMPLEMENTATION OF FOLLOW UP AUDIT

☐ After closing the discrepancies appropriately GIVING CERTIFICATE WITHOUT FOLOW UP AUDIT

☐ After closing the discrepancies appropriately CONTINUE TO USE CERTIFICATE WITHOUT FOLLOW UP AUDIT

Deadline for next audit & Notes;

Note: Please kindly warn the company that audit report, audit programme confirmation form and one copies of audit discrepancy forms should be kept and filled appropriately in the company.

Lead auditor evaluation of Auditor/ Audit team Member/ Technical Expert (if used) - Satisfactorily

Lead Auditor Signatures

According to data included in below mentioned report, our certification committee SYSTEM CERTIFICATE

☐ Giving Certificate ☐ Making Scope Change ☐ √ Continue to use certificate ☐ Renewal
☐ Cancel the certificate ☐ Suspend the certificate ☐ Continue to suspend position ☐ Making Address Change

System Certification Manager Sign & Date -