



GLOBAL INSPECTION AND CERTIFICATION NETWORK
- CGLOBAL -

Procedure No.:

PRC.09

Version:

02

Effective date:

18/07/2024

*Type of
conformity
assessment:*

**Certification, Verification,
Validation**

**PROCEDURE FOR AUDIT AND CERTIFICATION OF
MANAGEMENT SYSTEM**

Certification Body:

**GLOBAL INSPECTION AND CERTIFICATION NETWORK
(CGLOBAL) PTE. LTD.**

Compiled by

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Position:

Certification Department

(Signature)

Approved by Director

Vu Long Bien


(Stamp - if necessary)

(Signature)



VU LONG BIEN

*The compilation, review, amendment, approval, issuance, withdrawal and cancellation
of this document must comply with the provisions of PRC.01- Procedure for Document Control
issued by CGLOBAL*


	PROCEDURE FOR AUDIT AND CERTIFICATION OF MANAGEMENT SYSTEM		
	Code: PRC.09	Issuance times: 02	Effective date: 18.07.2024

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1. Director	<input checked="" type="checkbox"/>	4. Business Department	<input checked="" type="checkbox"/>
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3. Auditors Management Department	<input checked="" type="checkbox"/>		<input type="checkbox"/>

DOCUMENT REVISION LOG

Date of revision	Revision summary
18.07.2024	<p>Revise appendix 3 - How to calculate the manday of audit time and the risk classification (code)</p> <p>Content for Surveillance Audit</p> <p>Suspension, withdrawal and reduce scope of certification results</p> <p>Irregular audit</p> <p>Supplement Appendix 6- Requirement for Transfer CB</p> <p>Update F06-PRC.09, F07-PRC.09</p>

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I. GENERAL REGULATIONS

1.1 Purpose and scope:

This procedure prescribes the contents carried out by CGLOBAL in the audit and certification of management system standards according to **ISO standards** and management system standards issued by Coalition/Association/organization promulgating standards around the world.

The certification of management systems and standards will be based on the regulations and forms in this process. And specific audit checklists according to each standard will be issued in accordance with each standard to be audited.

1.2. Compilation, review and approval:

This procedure is compiled by the Certification Department and approved by the Director for issuance.

The compilation, review, revision, approval, issuance, revocation or cancellation of this procedure must comply with the provisions of the Procedure for Document Control – **PRC.01**.

1.3. Responsibility:

- Compiler: Disseminate, guide, monitor and update implementation.
- Relevant staff: Strictly comply with the prescribed requirements.


II. DEFINITIONS, ABBREVIATIONS AND REFERENCES

2.1. Definitions, abbreviations

- **Standard:** is a regulation on technical characteristics and management requirements used as a standard for classifying and evaluating products, goods, services, processes, environment and other objects in socio-economic activities in order to improve the quality and efficiency of these objects.
- **Conformity assessment** is the determination of the object of activity in the field of standards in accordance with the technical characteristics and management requirements specified in the corresponding standard.
- **Standard conformity certification** is the confirmation that the object of activities in the field of standards conforms to the corresponding standard.

2.2. References

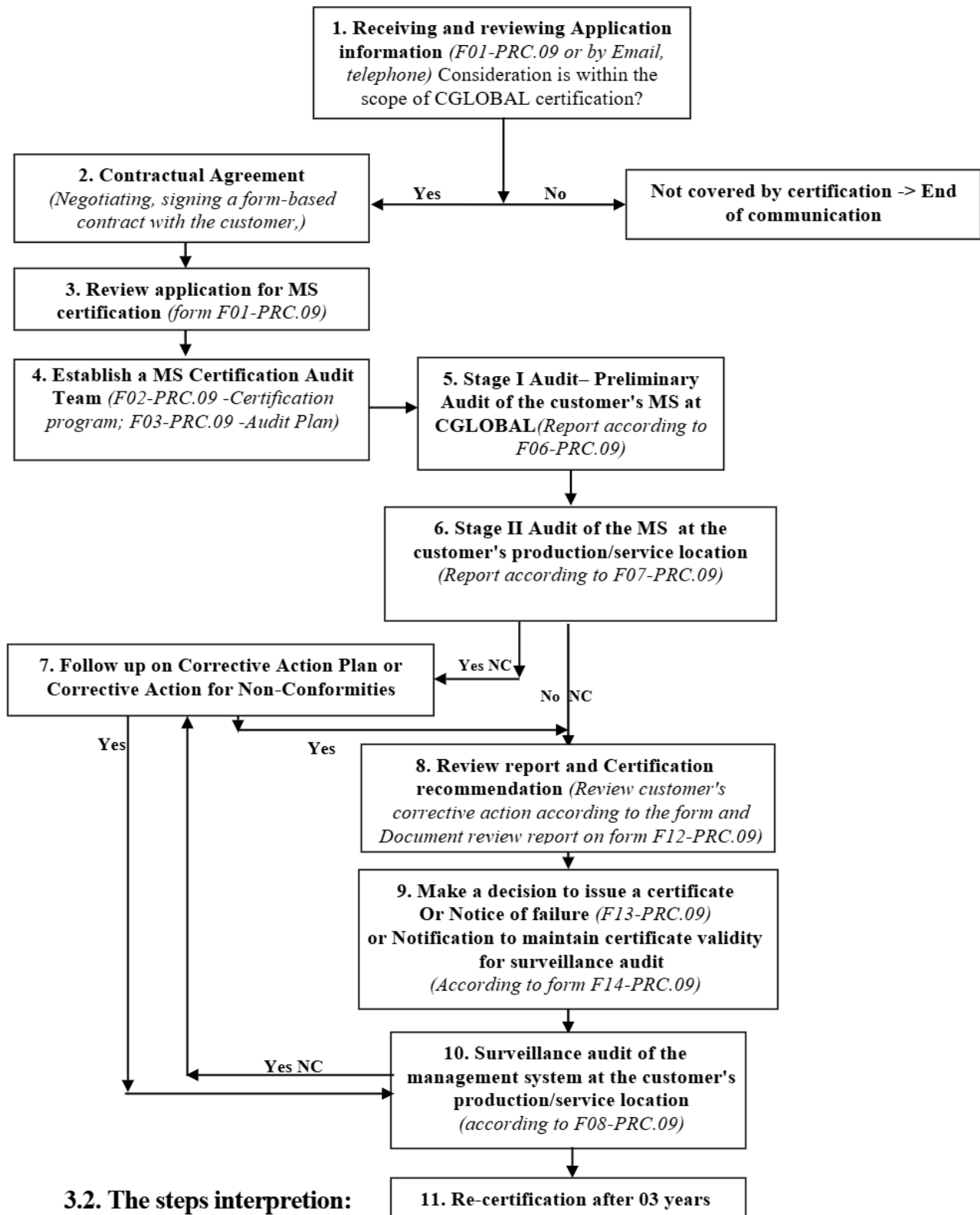
- MS.CG - Handbook Of System Management And Operational Risk Management;
- PRC.01- Procedure For Document Control;
- PRC.02- Procedure For Records Control;
- ISO/IEC 17021-1:2015, Conformity assessment - Requirements for bodies providing audit and certification of management systems - Part 1: Requirements
- ISO/IEC 17021-2:2016, Part 2: Competence requirements for auditing and certification of environmental management systems
- ISO/IEC 17021-3:2017, Part 3: Competence requirements for auditing and certification of quality management systems

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- Other relevant documents of the International Accreditation Forum (IAF).

III. PROCEDURE CONTENT

3.1. Flowchart Of Management System (MS) Audit



3.2. The steps interpretation:



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**Steps, personnel
and forms**

Procedure to follow

STEP 1-2: Receive the information and certification agreements

Sales/Customer
Services staff

- When receiving the certification needs of customers, Business Department staff contact customers to collect necessary information, if necessary, Sales staff directly go to the customer's production and business location to preliminarily survey and discuss implementation methods.
- After the customer agrees to use the service, the Business Department Staff discusses with the Certification Department about the certification competence, the number of audit mandays and discusses Technical Subject with the Expert Department (auditors/technical experts with appropriate code) to agree on the certification price and sign a certification contract with the customer.
- Business Department staff requests customers to complete the Application for Certification, Customer Information Inquiry and necessary documents as required in the Application for Certification to send to the Certification Department.
- In case customers encounter difficulties in completing the Application for Certification and Customer Information Questionnaire; then the Business Department staff is responsible for supporting customers to complete the information required by the form.

STEP 3: Review application for certification

Certification
Department
staff and
Auditors
approving
certification
Application (if
necessary)
F01-PRC.09

a) Receive application for certification

After signing a certification contract (including expansion, conversion, upgrade, re-audit) with the customer, the customer or sales staff forwards the Certification Application under F01-PRC.09 to Certification Department.

The form of sending Application can choose one of the following two methods:

- Send the original by post or fax (Application must be signed by the customer's representative) or
- Send Application Form via email (.doc file attached, no need to sign for confirmation)

After receiving the contract, the Certification Department codes the customer and pre-codes according to the provisions in Appendix 2 attached to this Regulation.

b) Review and approve application for certification

- If the Application is valid: Within 02 working days from the time of receiving the Application for certification with the customer's application, Certification Department must respond by email or phone to the customer about the application validity.

- If the application is invalid: Within 02 working days, Certification Department responds by email and then calls directly to ask the customer to add invalid or missing documents.

- The approval of the Certification Application is carried out at the end of F01-PRC.09, specifically as follows:

+ The Certification Department conducts a review of the adequacy of the documents attached to the requirements in the Management System Certification



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	<p>Application F01-PRC.09, CGLOBAL's competence. Define and Classify the field level (define the code) according to Section II, III, Appendix 3 of this Procedure.</p> <p>+ Auditor's approval: In case the staff of the Certification Department is incompetent according to Section 5.2, REG.05, a competent auditor shall be requested to review and approve the certification Application.</p>
STEP 4: Establish a team and prepare for audit	
<p>- Certification Department</p> <p>-Lead Auditor</p> <p><u>F02-PRC.09</u></p>	<p>a) Certification Programme</p> <ul style="list-style-type: none"> - The certification department coordinates with the lead auditor assigned to create a certification programme according to <u>F02-PRC.09</u> (for a certification cycle of 03 years). - The audit time is planned within the program in accordance with IAF MD 5 guidelines, specifically in Appendix 3 to this procedure. Certification Department notes the manday up-and-down factor. - This certification program can be updated and adjusted by the Certification Department/Auditor after each audit to suit the size, scope and complexity of the customer's management system, products and procedure along with the effectiveness and results of previous audits. - Certification Department considers establishing an audit team in the <u>F02-PRC.09</u> certification programme. When selecting auditors for the audit team (including both the Auditor and Technical Expert), the Certification Department must ensure the audit team includes auditors with appropriate qualifications (knowledge, experience, skills) with approved code to conduct the audit (depending on code level according to section II, Appendix 3). The audit team includes a Lead Auditor and may have additional Auditors and Technical Experts. The Lead Auditor is responsible for leading the members of the audit team and drawing conclusions of the audit. <p>In case the language of auditee is different with Auditor team language, Certification Department must ensure use an independent translator in audit team. The competence of translator is verified and approved.</p> <ul style="list-style-type: none"> - CGLOBAL provides auditors and technical experts with access to up-to-date procedures documents that provide guidance and information relevant to certification activities. <p>Note: - Apply multisite audit according to <u>Appendix 4</u>;</p> <p>- Apply integrated audit in accordance with <u>Appendix 5</u></p>
<p>Certification Department staff ;</p> <p>Audit Team Leader</p>	<p>b) Planning audit:</p> <ul style="list-style-type: none"> + No later than 02 working days after receiving a complete and valid Application dossier, Certification Department staff must send the dossier, monitor and urge the auditor team leader to send a notification of the official audit plan to the customer. + No later than 02 working days after receiving the customer's certification application dossier sent by Certification Department, the audit team leader must



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Procedure to follow

F03-PRC.09

make an audit plan according to F03-PRC.09 sent to the customer via email or sent by post and then call to confirm the audit schedule with the customer, at the same time, notify and instruct customers about having 02 working days to respond to the audit plan according to the section "**Customer feedback on the plan**" in the Audit Plan F03-PRC.09 to respond to CGLOBAL
+ Based on customer feedback, the audit team leader may or may not adjust the content of the audit plan. Then update the audit schedule for relevant departments to coordinate the implementation.

STEP 5: Stage I- Preliminary audit

Auditor

F03-PRC.09

(audit plan for on-site stage I audit),

F04- PRC.09

(list of participants for on-site Stage I audit)

F06-PRC.09

(Stage I report for both onsite and offsite)

Depending on the manufacturing sector and the scope of certification Application and the established Certification programme, preliminary audit planning may be required to be carried out at the customer's production and business site (then the plan must be sent to the customer) or at CGLOBAL (in case of audits at CGLOBAL, no audit plan is required).

a) Audit Time

- The time of the stage I audit shall not exceed 20% (accepting rounded integers or up to 0.5 manday) of the total audit time approved in the Audit Program.

b) Stage I audit Contents

A stage I is carried out to audit whether the client's management system is ready for a Stage II certification audit.

Note: With a Stage I audit at the CGLOBAL office, the auditor can directly phone or email with the customer's contact staff to record the information and evidence that needs to be collected during the stage I audit.

Stage I Audit report:

- The audit team should complete the Stage I audit report in accordance with F06-PRC.09

- The audit team sends the Stage I audit report to the Certification Department on the same day of audit. After reviewing and processing the results, and obtaining the final audit results, the Certification Department agrees with the auditor to finalize the stage II audit plan that may not require verification.

+ In case the Stage I audit results detect nonconformities leading to the postponement or cancellation of the stage II audit, within 03 working days, the Certification Department shall issue a written request (refer to F13-PRC.09) to request the customer to take corrective action.



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<p>Audit Team Leader Certification Department <u>F03-PRC.09</u> & <u>F04-PRC.09</u> (If the Stage I audit is onsite) <u>F06-PRC.09</u></p>	
STEP 6: Stage II audit/ Certification audit	
<p>Audit Team Leader <u>GUI.01</u> <u>F04-PRC.09</u></p>	<p>Note: Stage II audit must take place within 6 months from the end of the Stage I audit 6.1. Opening meeting: For <u>opening meeting</u>, Auditor follow the Guidelines to conduct Meetings - <u>GUI.01</u> - Before and during the opening meeting, the assigned auditor is responsible for giving the List of Participants according to <u>F04-PRC.09</u> to the customer for confirmation signing to get information about the customer's representative.</p>
<p>Audit Team <u>F03-PRC.09</u> <u>F05-PRC.09</u></p>	<p>6.2. Audit implementation: The purpose of the certification audit is to review and evaluate the implementation and effectiveness of the customer's management system;</p>
<p>Auditors <u>F05-PRC.09</u></p>	<p>During the audit process, the Auditor uses the Audit Note: <u>F05-PRC.09</u> or Audit Checklist to record all evidence of his audit, <i>recording the names of interviewers as evidence of the audit</i>. Recording methods to demonstrate on-site audit evidence in operational status to control the entire production process, at all planned processes (based on the field in which the customer registers the certification received), according to the requirements (terms) of the audit standards.</p>
<p>Auditor; Audit Report</p>	<p>The auditor records nonconformities discovered during the audit; Summarize the internal discussion of the audit team and <i>present the audit results in the audit report, including nonconformities findings and recommendations; Nonconformities must be discussed with the customer to ensure the accuracy of the evidence and the nonconformities are understood by the customer</i>. However, the auditor is not allowed to suggest the cause of the nonconformity nor suggest a solution. The audit team leader must attempt to resolve disagreements between the audit team and the customer regarding the audit evidence or findings, then</p>



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	<p>the disagreements will be recorded.</p> <p>Audit findings are divided into 4 categories: Conformity; Recommendation (Ob); Minor non-conformity (minor NC) and major non-conformity (major NC), Critical (Cr-NC). Each type is identified and sanctions are applied according to the Regulations in <u>Appendix 1</u>.</p> <p>Recommendations and non-conformities are recorded directly in the audit report (With the management system using <u>F07-PRC.09</u>)</p>
Auditor	<p>6.3. Review the relevant information:</p> <p>If the Auditor finds that the following information has changed:</p> <ol style="list-style-type: none"> 1. Ownership 2. Location 3. Management structure; Leadership Representative 4. Expanding/narrowing the workshops, products or production scope compared to certification Application. 5. Number of employees (the number of employees varies by more than 30% compared to the certification Application) 6. Resources that have an important impact on the management system; 7. If quality standards are updated without notifying CGLOBAL, the audit team leader must advise the customer: <ul style="list-style-type: none"> - The above changes should be notified to CGLOBAL's certification department. - A recertification or extension audit may be required to confirm compliance with the customer's applicable standards. - During a multisite audit, the audit team shall conduct finding evidence that the organization has conducted at least one internal audit at each site;
Audit Team <u>F07-PRC.09</u> <u>F09-PRC.09</u>	<p>6.4. Internal team meeting and summary of audit results</p> <ul style="list-style-type: none"> - Before the closing meeting, the audit team leader is responsible for meeting the audit team, requesting members of the audit team to gather audit notes, discuss and prepare an audit report according to the audit report forms for each management system.
Technical Expert <u>F10-PRC.09</u>	<p>If during the audit, the audit team uses a Technical Expert, at the end of the audit, the Technical Expert must complete the <u>F10-PRC.09</u> Technical Expert Comment Sheet</p>
Audit Team Leader <u>GUI.01</u> <u>F04-PRC.09</u>	<p>6.5. Closing meeting and gathering certification records</p> <ul style="list-style-type: none"> - Audit team leader conducts closing meeting, see Guidelines for conducting meetings <u>GUI.01</u>; - The audit team leader, on behalf of the audit team, announces the audit report and audit findings at the closing meeting and requests all participants in the closing meeting to sign and confirm in the list of participants <u>F04-PRC.09</u>. - Immediately after the end of the meeting, the Audit Team Leader will gather all audit records, request the customer to sign and stamp to confirm the documents that require signature and stamp.



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Audit Team	The audit team is responsible for gathering a full set of audit records to <u>transfer to the customer for retending</u>
Audit Team	<p>6.6. Audit documents auditor need to gather:</p> <p>After the end of the audit, the auditor is responsible for gathering all audit records</p>
STEP 7: Track corrective actions	
Assigned auditors	<ul style="list-style-type: none"> - The certification department is responsible for receiving the customer's corrective action plan or report. - The audit team leader is responsible for supporting the certification department to contact customers (via email, phone) to follow, request, urge the development of a Corrective plan and complete the Corrective Action (if any). <p>a) For Minor NC</p> <ul style="list-style-type: none"> - After receiving the enterprise's <u>Corrective Action Plan</u>, the certification department forward to an auditor for review. - The auditor assigned by the audit team is responsible for verifying acceptance or non-acceptance. - Note that customers only need to send a scanned copy via email or zalo of the corrective action plan, without sending the original to CGLOBAL. - If the auditor accepts the implementation of corrective plan, the certification department will carry out the procedures to issue a certificate to the customer. <p>b) Verification of corrective action for Major NC</p> <ul style="list-style-type: none"> - Within 60 days from the end of the audit, the Customer must initiate and send corrective action for nonconformities to the certification department. After 60 days from the date the certification audit ends, if the customer's corrective action is not accepted, the certification department can extend the above deadline for an additional 30 days. After the extension period, if the corrective action is still not accepted, the certification audit result will be canceled - After receiving the customer's corrective action report, the certification department is responsible for sending the file to the auditor assigned by the audit team for verification. - The auditor assigned by the audit team is responsible for verifying acceptance or non-acceptance <p>c) Unexpected situations arise</p> <ul style="list-style-type: none"> - In case there are difficulties in collecting plans or evidence for implementing the Action Plan, the auditor/certification department can notify the Sales Staff in charge to jointly urge and support. - CGLOBAL's failure to collect full plan documents/evidence of implementation of corrective action or related documents is a factor affecting the issuance of certification to the Customer.



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and forms**

Procedure to follow

STEP 8: Review report and Certification recommendation

Certification
Department
F12-PRC.09

8.1. Verify the completeness and compliance with regulations of the records

After receiving the complete audit records, the Certification Department is responsible for verifying the audit and certification records, including:

- Verify whether the audit records comply with CGLOBAL regulations?
- Legal documents and certification Application documents of customers;
- Information on certification requirements and scope of certification provided by the audit team is complete;

Auditor with
approved code
F12-PRC.09
(Appendix 2)

8.2. Review technical audit records

- All certification records, after being verified through the steps mentioned in section 8.1, will be transferred to the Review and Independent Counter-Argument Board/experts to review the records and make a certification decision.

STEP 9: Certification decision

Certification
Department
F12-PRC.09

9.1. Certification decision

- After completing the verification according to the contents mentioned in Step 06, the Certification Department gathers all audit records, verification records and prepares draft certification decisions/Certificates/Notifications to submit to the Director for signing of approval.

Certification
Department
Certificates
according to
F01-REG.01 &
F04-REG.01
F13-PRC.09

- In case of issuing a certificate to a customer: Draft the decision to issue a certificate and the certificate to send to the customer for confirmation. After the customer confirms the content of the certificate, the Certification Department drafts a decision to issue the certificate and prints the certificate and submits it to the Director for signature. Certificate validity is 3 years.
- In case of not issuing a certificate to the customer: Certification Department drafts an official dispatch notifying the customer of not issuing the certificate and clearly stating the reason according to F13-PRC.09.
- In case there are other recommendations from the Review and Independent Counter-Argument Board/auditor: the Director considers the Certification Department 's recommendations and makes a decision on the recommendations.



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	<p>Certification Department bases on the Director's decision and notifies customers according to <u>F13-PRC.09</u>.</p> <p><i>Time: Within 03 working days from the date of receiving the review Report of the certification records, the Certification Department must complete the signing of the Decision and certificate or Notification of failure to the customer.</i></p>
Certification Department F04-REG.01 F01-REG.03	<p>9.2. Gather certification documents to send to customers</p> <p>After the certificate is approved, the Certification Department is responsible for gathering the following certification documents to send to customers:</p> <ol style="list-style-type: none"> 1. Certification certificate; 2. Notification of use of certification mark (F01-REG.03) send hard copy and send electronic copy of certification mark sample via customer's email <p>A set of certification documents (Notification and certificate) must also be kept at CGLOBAL (photocopy of certificate can be kept)</p>
Certification Department https://cglobal.sg.com/	<p>9.3. Return results and update Customer List</p> <ul style="list-style-type: none"> - After submitting the certificate for signature, the Certification Department send the certification results to the Administration Department to stamp and carry out payment procedures and send the results to customers. - Certification Department is responsible for updating customer information on the Tracking List and send information to the Administration Department – Summarize, updates every Saturday on CGLOBAL's website with the following contents: Customer name; scope of certification; Certification Number.
STEP 10: Periodic surveillance maintains certification validity	
Certification Department Business Department	<p>10.1. Track the maintenance of surveillance</p> <ul style="list-style-type: none"> - Surveillance audit aims to find evidence of conformity of the client's management system with the corresponding standard. The surveillance audit cycle depends on each standard but is not more than every 12 months/times and the first year's surveillance audit cycle is not more than 12 months from the effective date of the certificate. - Every month, the Certification Department is responsible for gathering a list of customers to the expected surveillance audit schedule for the next 3 months to send the Business Department to contact the customer to sign an surveillance contract (if there is no contract yet).) and inform about the preparation of surveillance audit arrangements.
Certification Department	<p>10.2. Delay surveillance audit</p> <p>In case the customer requests to delay the surveillance audit for a legitimate reason (the production season has not yet arrived, production is temporarily stopped, the factory is under repair, there is a problem/emergency). , ...) and with evidence to ensure that the management system is still being maintained according to the requirements of the Standard, CGLOBAL will consider the customer's request for delay and respond in writing or email to the customer to accept a delay with a</p>



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	<p>timeline determined by CGLOBAL to be appropriate.</p>
<p>Auditor <u>F03-PRC.09</u> Surveillance Audit report <u>F08-PRC.09</u></p>	<p>10.3. Surveillance audit procedure</p> <ul style="list-style-type: none"> - The audit team leader is assigned to refer to the previous Certification Program and Audit Plan to make the surveillance audit plan <u>F03-PRC.09</u>. Surveillance audit does not have a stage I audit, the auditor conducts the audit at the facility, the steps are similar to the certification audit. - The scope of a surveillance audit does not have to audit the entire management system but can only focus on a number of departments and processes that the auditor determines are important and need to find evidence of conformity but must still fully cover the areas according to the scope of certification. It is the responsibility of the program manager to ensure that surveillance audit take into account the entire management system. - If using the Audit Checklist, the auditor can proactively adjust and remove (delete lines) some clauses that are not audited when performing surveillance audit, however, the main provisions related to the Standard to operations (do) and check as well as make improvements (Action) need to be considered in the surveillance audit - Surveillance audit includes the following contents: reviewing the implementation of corrective actions for the previous surveillance audit; review changes related to the customer and the customer's management system; system operation, effectiveness of the management system with regard to achieving the certified client's objectives and the intended results of the respective management system(s) internal audits and management review, complaints handling, progress of planned activities aimed at continual improvement, continuing operational control, use of CGLOBAL certification marks and/or any other reference to certification, etc.
<p>Auditor <u>F08-PRC.09</u></p>	<p>* Verification corrective actions against NC from the previous audit</p> <p>The auditor requires the organization to provide objective evidence when reviewing the corrective action for NC in the previous audit to determine:</p> <ol style="list-style-type: none"> a) Confirming that plans to implement corrective actions as committed by the organization have been implemented and are effective. b) Open a new NC for the detected NC (in case the re-verification finds that the actual implementation of corrective action at the facility is not implemented or is implemented but is not effective). Auditor acts as follows: <ul style="list-style-type: none"> + If the previous NC is a major NC and is repeated, the Auditor will open a major NC for corrective action by the organization, and + If a minor NC is repeated, the auditor opens a major NC for corrective action by the organization.



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Procedure to follow

STEP 11: Re-certification

Certification
Department
Auditor

- Recertification audit is an audit conducted before the management system certification certificate expires.
- The recertification audit is planned and conducted to review and assess the ongoing compliance with all requirements related to the standard and must be conducted at **least 01 month** before the certificate expires and the certification department must track and ensure corrective actions are checked and confirmed before the certification expires receive.
- The recertification audit is conducted as a certification audit, unless there is no significant change to the client's current management system, a stage I audit is not required.
- The recertification audit shall consider the operation of the management system at the time of certification, including review of the reports of the previous surveillance audit: the effectiveness of the entire system, including internal and external changes and applicability to the scope of certification; the operation of a certified quality management system to achieve the organization's policies and objectives; effectiveness of the entire quality control system including internal changes and applicability to the scope of certification

Certification
Department

- When recertification is completed before the expiration date of the current certification, the expiration date of the new certification can be based on the expiration date of the current certification. The date of issuance of the new certificate must be on or after the date of the recertification decision.
- After the certification expires, the certification organization can restore the certification within 06 months provided that the recertification activity has been completed or at least phase 2 has been carried out. The effective date of the certificate must be on or after the recertification decision date and the expiration date must be based on the previous certification cycle. Details on how to implement this request are outlined in section: "Restoring certification validity" below.

OTHER TYPES OF AUDIT

Certification
Department

FOLLOW UP AUDIT

- When CGLOBAL needs to consider auditing the effectiveness of corrective actions or needs to take further actions when the certificate is suspended, or needs an additional audit for a previous audit, CGLOBAL must conduct an follow up audit and must be notified to the customer.
- The order and procedures for follow up audit are similar to surveillance audit



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Steps, personnel and forms	Procedure to follow
<p>Certification Department <u>F01-PRC.09</u></p>	<p>EXPANSION/NARROW/UPGRADE/STANDARD CONVERSION AUDIT</p> <ul style="list-style-type: none"> - When customers need expansion/narrow/upgrade/standard conversion audit, they must sign a sub-contract and send <u>F01-PRC.09</u> Certification Application to CGLOBAL. The steps taken in the expansion/narrow/upgrade/standard conversion audit are carried out as surveillance audit (in the scope section of the surveillance audit report, it is necessary to clearly state the audit objectives and adjusted scope). <p>The expansion audit report according to form F09-PRC.09 is applicable to some cases where the expansion audit scope does not have many major changes in risks or too large differences in applicable subjects. Form F09-PRC.09 can be applied without using the Audit Checklist. In case the expansion audit scope has many major changes in risks or too large differences in applicable subjects, the auditor will use the Audit Checklist with the corresponding Standards to recognize audit evidence (However, the general audit content of the management system will not need to be recorded in the audit Checklist because it has been audited in the most recent audit). In case of expansion audit combined with surveillance audit, use the surveillance audit report as a form for audit, and the scope section needs to clearly state which scope is the scope of expansion audit audited in this surveillance.</p> <ul style="list-style-type: none"> - CGLOBAL performs the Application review and determines what audit needs to be performed to decide whether to allow certification expansion. After reviewing the certification Application and planning the expansion scope, the Certification Department and the auditor will decide whether the customer's quality management system has many major changes or not.
<p>Certification Department</p>	<p>IRREGULAR AUDIT</p> <ul style="list-style-type: none"> - When there is a request from a management agency, or CGLOBAL needs to review complaints, audit changes or need to take further action when the certificate is suspended, CGLOBAL must conduct an irregular audit. - The Irregular audit will be short noticed audit, When there is the request from management agency or CGLOBAL needs to review complaints, audit changes or need to take further action when the certificate is suspended. - This irregular audit will be unannounced audit, When there is the request from management agency, government agency to CGLOBAL keep confidential information about audit. - The order and procedures for irregular audit are similar to surveillance audit
<p>Certification Department</p>	<p>TRANSFER AUDIT</p> <ul style="list-style-type: none"> - Transfer audit is CGLOBAL's audit and issuance of certificates to customers who already had a certificate from a certification body recognized by CGLOBAL (According to the annual approved list). The condition to be



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	<p>audited for transfer is that the certificate must be valid for at least 6 months. The validity of the certificate issued by CGLOBAL is equal to the remaining validity period that the certification body issued to the customer by CGLOBAL.</p> <ul style="list-style-type: none"> - When a customer needs a transfer audit, the Business Department negotiates and signs a surveillance contract in the form: The number of surveillance audit is equal to the number of surveillance audit that the certification body issued that certificate had agreed, Minus the number of surveillance audit that this organization has performed. - Customers make a written request to use CGLOBAL's audit service and additional documents according to the corresponding Certification Application form - The order and procedures for transfer audit are similar to surveillance audit but in review Application step, Certification staff need to inform client to send all latest audit report and related documents or send to auditors with approved code (in case Certification staff is not approved this code) to verify if client is eligible for certification transfer. Requirements for accept transfer CB follow process shown in Appendix 6
SUSPENSION, WITHDRAWAL AND REDUCE SCOPE OF CERTIFICATION RESULTS	
<p>Certification Department DE.01 https://cglobal-sg.com/</p>	<ul style="list-style-type: none"> - Suspension of certification: Based on the use of the certification mark; the certification fee payment; results of surveillance audit and typical sample testing results; implementation of customer corrective action; failure to meet other certification requirements and inspection results of state agencies, Certification Department makes a proposal to suspend the certification validity for no more than 03 months. - Withdrawal of certification: After the above 3-month period, if the customer still does not have satisfactory evidence of the corresponding corrective actions, CGLOBAL will issue a written decision to cancel and withdraw the certification validity. The decision to withdraw the validity is sent to customers and published on the website: https://cglobal-sg.com/ - Reduce scope of certification: Based on results of surveillance audit and typical sample testing results; implementation of customer corrective action, the client has persistently or seriously failed to meet the certification requirements for those parts of the scope of certification, Certification Department makes a proposal to reduce the client's scope of certification to exclude the parts not meeting the requirements. The decision to reduce scope of certification is sent to customers and published on the website: https://cglobal-sg.com/
RECOVERY OF CERTIFICATE VALIDITY	



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	<p>CGLOBAL can recover certification validity for customers in the following cases:</p> <p>Case 1: Customer's certification is suspended due to failure to conduct surveillance audit in accordance with CGLOBAL's regulations (including cases where surveillance audit is postponed beyond the time allowed by CGLOBAL)</p> <ul style="list-style-type: none">- Necessary conditions: The enterprise can arrange a surveillance audit schedule before CGLOBAL makes a decision to withdraw the validity of certification- Sufficient condition: Surveillance audit results meet the requirements of audited standards. In case the surveillance audit includes NC, the client must fulfill its obligations with each corresponding NC (according to Appendix 1 of this PRC.09). <p>Case 2: The customer's certification validity is affected due to not meet the requirements of the recertification audit process.</p> <ul style="list-style-type: none">- Necessary condition: The customer's recertification audit (stage 2) has been completed before the expiration date.- Sufficient conditions include:<ul style="list-style-type: none">+ The recovery time must not exceed 6 months from the expiration date+ Nonconformities of the recertification audit must be closed before the certification expires.- Special regulations for restoring certification validity in Case 2: The validity of the new cycle certificate must begin on or after the date of the certification decision; and the validity of the new Certificate will be based on the validity of the previous Cycle.

IV. CONFIDENTIALITY:

- All information relating to the customer and the complaining partner must be kept completely confidential, especially the complaint information related to the strategy, business operations, technology and market of the client during the performance of the contract, unless the written consent of the authorized person of that client is obtained.
- When it is necessary to provide customer information as required by law or authorities, CGLOBAL will notify customers by email, post, or phone unless the law or authorities do not allow CGLOBAL to notify customers.

V. AUDIT RECORDS NEED TO SAVE

No.	Records	Code	Save Place	Save Time
1.	Application For Management Systems Certification	F01-PRC.09	CD	06 years
2.	Audit Programme	F02-PRC.09	CD	06 years




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3.	Audit Plan	F03-PRC.09	CD	06 years
4.	List of Meeting participants	F04-PRC.09	CD	06 years
5.	Audit note (<i>If use</i>)	F05-PRC.09	CD	06 years
6.	Management system Stage I Report	F06-PRC.09	CD	06 years
7.	Management System Certification Audit Report	F07-PRC.09	CD	06 years
8.	Management system surveillance audit report	F08-PRC.09	CD	06 years
9.	Audit report for expanding Management system scope	F09-PRC.09	CD	06 years
10.	Technical Expert Comment	F10-PRC.09	CD	06 years
11.	Audit Log	F11-PRC.09	CD	06 years
12.	Review report of certification records	F12-PRC.09	CD	06 years
13.	Notification of unsatisfactory audit result (if any)	F13-PRC.09	CD	06 years
14.	Notification of surveillance audit result	F14-PRC.09	CD	06 years
15.	ISO 9001 Audit checklist	F18-PRC.09	CD	06 years
16.	ISO 14001 Audit checklist	F19-PRC.09	CD	06 years
17.	Decision to suspend the validity of the Certificate	//	CD	06 years
18.	Decision to withdraw the validity of the Certificate	//	CD	06 years

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Appendix 1: CLASSIFICATION OF AUDIT FINDINGS

Finding	Description	Sanctions	
		Certification	Surveillance
Conformity	Meet standard requirements	Qualified	Qualified
Obs / Observation	+ At the audit time, there was not enough evidence to conclude that it was 1 NC + are auditor's recommendations for improvement so that the organization's management system becomes more and more perfect	The organization is under no obligation to do so immediately. However, CGLOBAL will consider these improvement recommendations in the next surveillance audit	Same as certification
Mi-NC	+ Failure to meet standard requirements but does not affect the management system + Failure to meet the document system requirements that the organization has established	The organization must have a plan for implementing corrective action. Corrective action will be verified at the surveillance audit CGLOBAL will issue a certificate after the Corrective Action Implementation Plan is accepted.	The organization must have a plan to implement the corrective action. The corrective action will be verified at the most recent surveillance audit
Ma-NC	+ Failure to meet standard requirements but affect the management system + There is a minor NC systematically. Systematicity is: having more than 3 minor NCs in one department or having the same minor NC in 3 departments	The team leader decides whether conduct follow up audit to verify the corrective action onsite or just verify the corrective action at CGLOBAL. CGLOBAL will issue a certificate after the corrective action t is accepted.	The organization must have a plan to implement the corrective action, commit to a deadline for completion and send evidence upon completion of the corrective action. At the commitment time, if the corrective action has not been completed, the certificate will be suspended
Cr-NC	Is non-compliance with legal requirements related to the management system that the organization is obliged to implement	Stop the audit. Move on at the right time	Suspend the certificate validity until there is sufficient evidence of compliance

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Appendix 2: REGULATIONS ON CODING CUSTOMER

1. Customer code

- The customer code is granted by CGLOBAL to comply with the control of the certification contract.

- **The customer code is specified as follows: CGLOBAL.yyy**, in which:

+ **CGLOBAL**: is the abbreviation and brand name of CGLOBAL;

+ **yyy**: is the customer code.

2. Records code:

- **The records code is specified as follows: C.yyy.W**, in which:

+ **C**: is the abbreviation of CGLOBAL;

+ **yyy**: is the customer code.

+ **W**: is the audit times code specified in the Table below

Audit times	Code
Stage I Audit	I
Certification Audit – Stage II	A
Surveillance Audit (1 st , 2 nd , 3 rd , 4 th)	B, C, D, E
Follow up Audit	N
Expansion/Narrow Audit	P
Recertification Audit	R
Transfer Audit	T
Special Audit	S
Standard upgrade Audit	U

3. Certificate code

- **The Standard conformity certificate code is specified as follows:**

+ **CGLOBAL.zz.yyyy**


In which: - **CGLOBAL**: is the abbreviation of CGLOBAL Company;

- **zz**: is the management system certification field code.

- **yyyy**: is the customer code.

The management system certification field code is specified as follows:

Type of certification	Field of Certification	Code
Management System	ISO 9001	01
	ISO 14001	02

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Appendix 3: HOW TO CALCULATE THE MANDAY OF AUDIT TIME AND THE RISK CLASSIFICATION (CODE)

I. HOW TO CALCULATE THE MANDAY – AUDIT TIME FOR QMS

1. Initial certification audit:

1.1. Audit time according to IAF MD5:2023:

The time of auditing the quality management system/quality assurance conditions according to IAF MD5:2023 is specified in the following table:

Number of employees (directly affects product/service quality)	Audit Time (Stage 1 + Stage 2 – certification audit)	Number of employees (directly affects product/service quality)	Audit Time (Stage 1 + Stage 2 – certification audit)
1-5	1.5	626-875	12
6-10	2	876-1175	13
11-15	2.5	1176-1550	14
16-25	3	1551-2025	15
26-45	4	2026-2675	16
46-65	5	2676-3450	17
66-85	6	3451-4350	18
86-125	7	4351-5450	19
126-175	8	5451-6800	20
176-275	9	6801-8500	21
276-425	10	8501-10700	22
426-625	11	>10700	Director decides

Note: The table above applies only to initial certification audits

1.2. Factors that up or down the Audit Time

Based on the risk classification according to Section II of this Appendix, the Certification Department can decide to up or down the number of mandays, specifically as follows:

No.	Description	Scope of application
Group of factors that up audit time		
	The work is carried out at various locations.	All
	The client does not speak the same language as the audit team, requiring time for translation	All
	Extremely large production area (such as forest, sea)	All
	High-level sectors (food, medicine, space, nuclear, etc.)	All
	The system includes activities that has high complexity or have many specific activities	All




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No.	Description	Scope of application
Group of factors that up audit time		
	The specific field of the customer requires 1 onsite audit at a point that is not within the scope of the customer's certification	All
	Activity identified as high risk	All
	Use external resources to participate in management system activities	All
	The degree of sensitivity to the surroundings that customer activity can affect.	EMS
	Stakeholder Requirements	EMS
	Indirect aspects that can cause a manday upward correction	EMS
	Additional environmental aspects, specific environmental aspects, or special legal conditions for related environmental aspects arise	EMS
	An increase in risks related to accidents/environmental hazards and emergency situations. Or in the past the customer was involved in an environmental emergency.	EMS
	Use external resources to participate in quality management system activities	EMS
Group of factors that down audit time		
	The customer is not responsible for the design or exclusion clauses in the scope that the customer registered	All
	The number of effective personnel at the audit site is very small	All
	System maturity	All
	The customer's understanding of the quality management system registered for certification (For example, the customer's quality management system was previously certified by another certification body for a different standard)	All
	The readiness of the customer's quality management system (certified and acknowledged by a third-party CB). For OH&SMS, this means that customers are subject to periodic inspection by competent authorities within the state apparatus.	All
	High level of automation	All

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No.	Description	Scope of application
Group of factors that up audit time		
	Own a number of off-site employees (For example: sales staff, drivers, service staff, etc.) and can assess their work compliance through review of records.	All

Calculation of audit time as required by IAF MD5:2023 is carried out according to Form F21-PRC.09 – Manday Calculation Sheet.

2. Surveillance and Expansion Audit: Minimum time of surveillance audit = 1/3 of the time (Stage I+ Stage II: Formal Certification audit) but not less than 01 manday.

3. Recertification audit: Minimum recertification audit time = 2/3 of the time (Stage I + Stage II) but not less than 1 manday.

4. Multisite audit when the project is outside the scope of application of IAF MD 1:2018:

The time of the first certification audit for each arising site will be calculated based on the risk level of the identified code , As follows

- With high risk level: each arising site will + 50% of the formal certification audit time of the original site.
- With medium risk level: each arising site will + 30% of the formal certification audit time of the original site
- With low risk: each arising site will be + 20% of the formal certification audit time of the original site.

** For definition of risk level, see Section II of this Appendix.*


II. CLASSIFICATION OF RISK LEVELS (CODE)

1. General principles for classifying Code levels (Reference document: IAF MD 5:2023)

- For QMS - Quality Management System, the provisions in this document are based on 3 types, depending on the risks arising from the impact of products or services at the organization. These three types are considered low, medium and high risk. High-risk activities (e.g., nuclear, pharmaceutical, food, construction) often require longer audit time. Medium-risk activities (e.g., simple manufacturing) typically require moderate audit time, and low-risk activities require even less.

- These risk levels are not definitions but are only examples for CB to use in calculating the risk level of an audit.

1.1. High risk

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When the error of a product or service will cause an economic crisis or danger to life.

Some examples: Food, pharmaceuticals, aircraft, shipbuilding, load-bearing structures and equipment, complex construction activities, electrical and gas equipment, health and medical services, assessment capture, nuclear energy, chemicals, chemical products and chemical fiber fabrics.

1.2. Medium risk

When the error of a product or service could cause injury or illness.

Some examples: Non-load-bearing structures and components, simple construction operations, base metal and manufactured products, non-metallic products, furniture, optical equipment, services entertainment and personal services.

1.3. Low risk

When the error of a product does not pose a risk of injury or illness.

Some examples: Textiles, clothing, pulp, paper and paper products, publishing, office services, education, retail, hotel and restaurant business.

III. HOW TO CALCULATE THE MANDAY – AUDIT TIME FOR EMS

1. Initial certification audit:


1.1. Audit time according to IAF MD5:2023:

The minimum time must include both the preliminary audit (stage 1) and the Stage 2 audit.

- Audit time also depends on the complexity of the environmental aspects mentioned in section 1.2 of this chapter III.

Table 1- Relationship between Effective Number of Personnel, Complexity and Audit Time (Initial Audit only- Stage 1 + Stage 2)

Effective Number of Personnel	Audit Time (Stage 1 + 2)				Effective Number of Personnel	Audit Time (Stage 1 + 2)			
	High	Med	Low	Lim		High	Med	Low	Lim
1-5	3	2.5	2.5	2.5	626-875	17	13	10	6.5
6-10	3.5	3	3	3	876-1175	19	15	11	7
11-15	4.5	3.5	3	3	1176-1550	20	16	12	7.5
16-25	5.5	4.5	3.5	3	1551- 2025	21	17	12	8
26-45	7	5.5	4	3	2026-2675	23	18	13	8.5
46-65	8	6	4.5	3.5	2676-3450	25	19	14	9
66-85	9	7	5	3.5	3451-4350	27	20	15	10
86-125	11	8	5.5	4	4351-5450	28	21	16	11
126-175	12	9	6	4.5	5451-6800	30	23	17	12
176-275	13	10	7	5	6801-8500	32	25	19	13
276-425	15	11	8	5.5	8501-10700	34	27	20	14

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426-625	16	12	9	6	>10700	Special


Note:

- 1: Audit time is shown for high, medium, low and limited complexity audits.
1. The number of employees in the table above only counts the number of people whose activities affect the organization's environmental policies and objectives. The number of employees in the table above is viewed as a continuum.
 2. Special cases (Special danger or number of employees greater than 10,700) decided by the Director of CGLOBAL
 3. High, medium, low, lim especially environmental levels to determine the minimum manday are identified according to Section II.
- 1.2 Classification of complexity of the environmental aspects according to IAF MD5:2023**

Table 2 – Examples of Linkage between Business Sectors and Complexity Categories of Environmental Aspects

Complexity Category	Business Sector
High	<ul style="list-style-type: none"> – mining and quarrying – oil and gas extraction – tanning of textiles and clothing – pulping part of paper manufacturing, including paper recycling processing – oil refining – chemicals and pharmaceuticals – primary productions – metals – non-metallics processing and products covering ceramics and cement – coal-based electricity generation – civil construction and demolition – hazardous and non-hazardous waste processing, e.g. incineration, etc. – effluent and sewerage processing
Medium	<ul style="list-style-type: none"> – fishing/farming/forestry – textiles and clothing except for tanning – manufacturing of boards, treatment/impregnation of wood and wooden products – paper production and printing, excluding pulping – non-metallics processing and products covering glass, clay, lime, etc. – surface and other chemically-based treatment for metal fabricated

	<ul style="list-style-type: none"> products, excluding primary production – surface and other chemically-based treatment for general mechanical engineering – production of bare printed circuit boards for electronics industry – manufacturing of transport equipment – road, rail, air, ships – non-coal-based electricity generation and distribution – gas production, storage and distribution (note: extraction is graded high) – water abstraction, purification and distribution, including river management (note: commercial effluent treatment is graded as high) – fossil fuel wholesale and retail – food and tobacco processing – transport and distribution by sea, air, land – commercial estate agency, estate management, industrial cleaning, hygiene cleaning, dry cleaning normally part of general business services – recycling, composting, landfill (of non-hazardous waste) – technical testing and laboratories – healthcare/hospitals/veterinary – leisure services and personal services, excluding hotels/restaurants
<i>Low</i>	<ul style="list-style-type: none"> – hotels/restaurants – wood and wooden products, excluding manufacturing of boards, treatment and impregnation of wood – paper products, excluding printing, pulping, and paper making – rubber and plastic injection moulding, forming and assembly, excluding manufacturing of rubber and plastic raw materials that are part of chemicals – hot and cold forming and metal fabrication, excluding surface treatment and other chemical-based treatments and primary production – general mechanical engineering assembly, excluding surface treatment and other chemical-based treatments – wholesale and retail – electrical and electronic equipment assembly, excluding manufacturing of bare printed circuit boards
<i>Limited</i>	<ul style="list-style-type: none"> – corporate activities and management, HQ and management of holding companies – transport and distribution management services with no actual fleet to manage – telecommunications – general business services, except commercial estate agency,

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	estate management, industrial cleaning, hygiene cleaning, dry cleaning – education services		
Special Cases	– nuclear – nuclear electricity generation – storage of large quantities of hazardous material – public administration – local authorities – organizations with environmental sensitive products or services, financial institutions		

Complexity Categories of Environmental Aspects

The clauses specified in this section are based on five main levels of complexity. The type of nature and importance of an organization's environmental aspects fundamentally influence the audit time of the environmental management system.

CGLOBAL will base on the complexity of environmental aspects to decide to increase or decrease the audit time according to the calculation in Table 01, Chapter III.

High – environmental aspects with significant nature and gravity (typically manufacturing or processing type organizations with significant impacts in several of the environmental aspects);

Medium – environmental aspects with medium nature and gravity (typically manufacturing organizations with significant impacts in some of the environmental aspects);

Low – environmental aspects with low nature and gravity (typically organizations of an assembly type environment with few significant aspects);


Limited – environmental aspects with limited nature and gravity (typically organizations of an office type environment);

Special – these require additional and unique consideration at the audit planning stage.

Calculation of audit time as required by IAF MD5:2023 is carried out according to Form F21-PRC.09 – Manday Calculation Sheet.

2. Surveillance and Expansion Audit: Minimum time of surveillance audit = 1/3 of the time (Stage 1 + Stage 2: Certification audit) but not less than 01 manday.

3. Recertification audit: Minimum recertification audit time = 2/3 of the time (Stage 1 + Stage 2) but not less than 1 manday.


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Appendix 4: REQUIREMENTS FOR MULTI-SITES AUDIT

(Using IAF MD1 / Used IAF MD1)

1. This regulation is for organizations to be issued one certification certificate for all sites.
 - + Sites with similar operation and in the same country;
 - + Sites are operated under the control and management of the management system or;
 - + An internal audit must be conducted at each site within 3 years before certification;
 - + The final audit of individual facilities should cover the entire system and corrective action should be performed as appropriate.
2. Multi-site sampling is only applicable to organizations with 3 or more sites. Applies to both certification audits and surveillance audits. /
 - + *For audit a facility with multisite, the minimum number of sites that must be audited is as follows: Initial audit is $y = \sqrt{x}$; The surveillance audit is $y = 0.6 \cdot \sqrt{x}$; Re-certification, the minimum number of sites as the initial audit, **however, if during the 3-year audit cycle the organization does not open any NCs, the number of sites will be calculated as $y = 0.8 \cdot \sqrt{x}$***

With x: is the number of sites that generally apply the quality management system of the organization that needs certification
3. The arrangement of audited sites must ensure that at least 25% of the audited sites are randomly selected.
4. Review of audit findings at sampling points should show correlation with internal audit findings at those sampling points within the organization;
5. Every year, an audit must be carried out at CGLOBAL on the management system and during the validity of the certificate, all points must be audited and surveillanced at least once.
6. Audit findings at sampling points must ensure coverage of the entire system and corrective action must be implemented appropriately.

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Appendix 5: REQUIREMENTS FOR MULTIPLE SYSTEMS INTEGRATION AUDIT

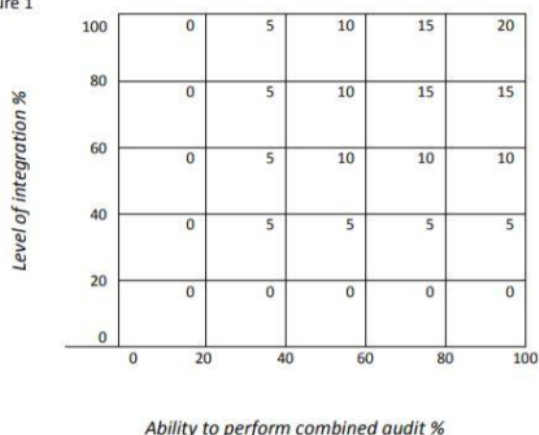
(Using IAF MD11 / Used IAF MD11)

1. For organizations applying multiple systems at the same time:

- Systems built and integrated within the same organization and assessment site;
- To determine the integrated audit time for a multi-standards audit, for example A+B+C, it is necessary to:
 - Calculate audit time for each audit according to individual standard requirements (apply calculations based on documents such as IAF MD5, ISO/TS 22003, ...)
 - Calculate the starting point T by adding the sum of the individual parts (e.g. $T=A+B+C$)
 - Adjust the starting point by taking into account factors that may increase or decrease the audit time. Those factors include: (Reduce): Level of integration; staff's ability to meet requirements related to multiple quality management systems; Capacity of auditors to conduct audit of multiple quality management systems; (Increase): the complexity of audit the integration of multiple management systems compared to audit each management system individually. The upward adjustment must not exceed 20% from the starting point T.
 - Audit a facility that integrates multiple systems, the audit manday is calculated in the following way:


ANNEX 1 – REDUCTION OF AUDIT TIME

Figure 1



Vertical column: Level of integration of the management system, including:

1. Establish an integrated documentation system;
2. Management review of the entire strategy and business plan
3. Integrated approach to internal audit
4. Integrated approach to policy and objectives
5. Integrated approach to system processes
6. Integrated approach to improvement mechanisms (Corrective action, measurement, continuous improvement)

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7. Integrate management and support responsibilities

Convention /:

- The percentage rate for a compatible content is 1/7.100%

Horizontal:


$$\% \text{ Mandays reduced} = \frac{100 ((X1-1) + (X2-1) + (X3-1) + (Xn-1))}{Z.(Y-1)}$$

In which

X1,2, 3...n: Number of standards that an auditor is capable of auditing

Y: Number of standards that the organization applies and integrates

Z: Number of auditors

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APPENDIX 6: REQUIREMENTS FOR TRANSFER CB

(Used IAF MD 2: 2023)

1. Eligibility of a Certification for Transfer

- Only certification which is covered by an accreditation of an IAF or Regional MLA signatory at level 3 and where applicable level 4 and 5 shall be eligible for transfer.
- Only valid accredited certification shall be transferred. Certification which is known to be suspended shall not be accepted for transfer.
- In cases where certification has been granted by a certification body which has ceased trading or whose accreditation has expired, been suspended or withdrawn, the transfer shall be completed within 6 months or on expiration of the certification whichever is sooner. In such cases, the CGLOBAL shall inform the accreditation body, under whose accreditation it intends to issue the certification, prior to the transfer.

2. Pre-Transfer Review Process


CGLOBAL assigns a certification staff with full competence (in case CD staff doesn't have code approved for applied scope, Auditor with approved code will review all documents from client before accept transfer) to see if applicant is eligible for a Transfer Certification

CD staff or Application Reviewer with review application form and all related documents as below:

- Latest Audit report
- Corrective action Plan and Corrective action if had any NC
- Compliers if any
- Existing Certificate
- Audit plan and an audit programme if any

After review, CGLOBAL accept this transfer certification if all below met:

- the client's certification falls within the accredited scope of the issuing and accepting certification body;
- the issuing certification body's accredited scope falls within its accreditation body's MLA scope;
- the reasonable reasons for seeking a transfer;
- that the site or sites wishing to transfer certification hold a valid accredited certification;

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- the initial certification or most recent recertification audit reports, and the latest surveillance report; the status of all outstanding nonconformities that may arise from them and any other available, relevant documentation regarding the certification process.
- complaints received and action taken acceptable;
- any current engagement by the transferring client with regulatory bodies relevant to the scope of the certification in respect of legal compliance.