

Assessment Report

Date: 28th February To 28th February

2023

[Disclaimer: The audit report has been generated to reflect the compliance of the company toward the MSPO standard and every criterion's have been in every effort taken to ensure the accuracy of the assessment and reporting produced. As the assessment is been carried out based on sampling, certain areas or processes may not be able to verified on its compliances.]

MSP0 2530:2013 Part 3

NAME OF CERTIFIED ENTITY	PERSATUAN NELAYAN NEGERI PERAK
MSPO CERTIFICATE NO &	MYMS11227637 EXPIRES 23/11/2027
VALIDITY	
MAIN ADDRESS	NO. 41, TINGKAT ATAS, PERSIARAN PM/7, PUSAT BANDAR SERI
	MANJUNG, 32040 SERI MANJUNG, PERAK.
REPORT NO	MS23 SM505
TYPE OF CERTIFICATION	SINGLE
TYPE OF AUDIT	ON-SITE VERIFICATION (FIELD VISIT DOCUMENTATION)
AUDIT STAGE	SURVEILLANCE If surveillance No.1

Thank you for your trustful cooperation during our audit of your organization. This report has been prepared of every effort to ensure the accuracy of the information recorded. The assessment is based on sampling on the records, practice, documents and personnel; therefore, the final results of the assessment is of representative towards the system implementation of the organization. This report is generated to record as much of the system implementation information but may still limited due to the sampling. This report details the assessment results including strengths, opportunities, and weaknesses. These results were presented to your management at the closing meeting of the audit. You can use these results to improve the effectiveness of your management system. We look forward to continuing our partnership towards sustainable business success. This report has been prepared in compliance to the ISO 17021:2011 requirements.

To ensure the next assessment will be carry out in compliance to the ISO 17021:2011, please remember to immediately notify CARE Certification International about any significant change to your company at any point of time. Together we will then coordinate appropriate measures to maintain your current certification. Such circumstances include, for example, changes relating to the legal, commercial, organizational status or ownership, organization and management (e.g. key managerial, decision making or technical staff), contact address and sites, scope of operations under the certified management system, and major changes to the management system and processes. Together we CARE and will then ensure the smoothness of the upcoming assessment. Thank you for your persistence of support.

	Signed for on behalf of CCI	Signed for on behalf of client
Sign	Thus	Name: Designation:
Name	Muhammad Syamil B Mat Salleh	Company stamp
Date	28/2/2023	
Email	admin@cciglobe.com; w.hidney@cciglobe.com	
Fax no	03 - 8073 2688	

Confidentiality:

The Auditor shall not at any time during his/her assignment or after the completion of his/her assignment disclose to any person any information on business dealings practice or affairs of the establishment or the establishment's clients or any other matters which may come to the knowledge of the auditor by reason of his/her assignment. The Auditor agrees that the material term of this assignment is to keep all Confidential Information absolutely confidential and to protect its release to unauthorized party. The Auditor agrees not to divulge, reveal, report or use any of the Confidential Information which the Auditor has obtained or which was disclosed to the Auditor by the Client as result of the assessment for purposes other than to fulfil the audit objective.

Together, we CARE.

The result of the last audit system has been reviewed, in particular to ensure appropriate correction and corrective action has been implemented to address any nonconformities identified. This review has concluded that: No nonconformities have been raised during last assessment. Any nonconformities identified during last previous audit have been corrected and the corrective action continuous to be effective. The management system has not adequately addressed non conformity identified during previous audit activities and the specific issue has been re-defined in the nonconformity section of this report. Section B Conclusion The audit team conducted a process-based audit focusing on significant aspects/risk objectives required by the standard(s). The audit methodology used is based on 3P which were People, Paper and Practice.
corrective action has been implemented to address any nonconformities identified. This review has concluded that: No nonconformities have been raised during last assessment. Any nonconformities identified during last previous audit have been corrected and the corrective actic continuous to be effective. The management system has not adequately addressed non conformity identified during previous audit activities and the specific issue has been re-defined in the nonconformity section of this report. Section B Conclusion The audit team conducted a process-based audit focusing on significant aspects/risk objectives required by
concluded that: No nonconformities have been raised during last assessment. Any nonconformities identified during last previous audit have been corrected and the corrective actic continuous to be effective. The management system has not adequately addressed non conformity identified during previous audit activities and the specific issue has been re-defined in the nonconformity section of this report. Section B Conclusion The audit team conducted a process-based audit focusing on significant aspects/risk objectives required by
 No nonconformities have been raised during last assessment. Any nonconformities identified during last previous audit have been corrected and the corrective active continuous to be effective. The management system has not adequately addressed non conformity identified during previous audit activities and the specific issue has been re-defined in the nonconformity section of this report. Section B Conclusion The audit team conducted a process-based audit focusing on significant aspects/risk objectives required by
Any nonconformities identified during last previous audit have been corrected and the corrective action continuous to be effective. The management system has not adequately addressed non conformity identified during previous audit activities and the specific issue has been re-defined in the nonconformity section of this report. Section B Conclusion The audit team conducted a process-based audit focusing on significant aspects/risk objectives required by
continuous to be effective. The management system has not adequately addressed non conformity identified during previo audit activities and the specific issue has been re-defined in the nonconformity section of this report. Section B Conclusion The audit team conducted a process-based audit focusing on significant aspects/risk objectives required by
The management system has not adequately addressed non conformity identified during previous audit activities and the specific issue has been re-defined in the nonconformity section of this report. Section B Conclusion The audit team conducted a process-based audit focusing on significant aspects/risk objectives required by
audit activities and the specific issue has been re-defined in the nonconformity section of this report. Section B Conclusion The audit team conducted a process-based audit focusing on significant aspects/risk objectives required by
audit activities and the specific issue has been re-defined in the nonconformity section of this report. Section B Conclusion The audit team conducted a process-based audit focusing on significant aspects/risk objectives required by
Section B Conclusion The audit team conducted a process-based audit focusing on significant aspects/risk objectives required by
The audit team conducted a process-based audit focusing on significant aspects/risk objectives required by
The audit team concludes and express ☐ CONGRATULATION and has ☐ CONGRATULATION however some processes need to address non-compliance(s) but others has ☐ SORRY and the organization has not established and maintained its management system in line with the requirements of the standard and ☐ demonstrated ☐ not demonstrated the ability of the system to systematically achieved agreed requirements within the scope of the organizations.
Base on the record, there is/are 8 unresolved issue. Therefore, the audit team recommends that based on the results of this audit and the system's demonstrated state of development and maturity, management system certification be: Granted (initial certification or recertification) Granted upon the acceptance of the noncompliance(s) Continued (surveillance) Continued (surveillance) upon the acceptance of the noncompliance(s) Withheld

NOTE:

The assessment and recommendation for the initial or continue was based on random samples and therefore nonconformities may exist which have not been identified. All the pages should be attached if the organization wishes to copy and delivered to the interested party.

☐ Suspend until satisfactory corrective action(s) is completed

Others (please specify)

1	The company has demonstrated effective implementation and maintenance/improvement on its			
	management system			
2	The internal audit program has been fully implemented and demonstrates its effectiveness as a	□Yes □No		
	tool for maintaining and improving the management system.			
3	The management review process demonstrates its capability to ensure the continuing suitability,	□Yes □No		
	adequacy and effectiveness of the management system			
4	Throughout the audit process, the management system demonstrates overall conformance with	□Yes □No		
	the requirements of the audit standard			

Section D Auditor and Auditees Names

CCI Assessors	Attendance during opening and closing meeting		
Team leader	Name	Designation	
Muhammad Syamil Bin Mat Salleh (ML)	Amirah Liiya Binti Zainal Abidin Amizah Amin Nordin	General Manager Administrative	
Team member Hidney Wahid (HN)			
Trainee auditor NIL			
Observer			
NIL			

Section E Audit Process Matrix

Next Audit Matrix (legend "⊠" plan to cover & covered, "□" for uncover)

Planned month & year	2/2022	2/2023	2/2024	2/2025	2/2026
Internal Audits	\boxtimes	\boxtimes	\boxtimes	\boxtimes	\boxtimes
Stakeholder consultation / survey	\boxtimes	\boxtimes	\boxtimes	\boxtimes	\boxtimes
Use of logo	\boxtimes	\boxtimes	\boxtimes	\boxtimes	\boxtimes
Follow-up from previous audit finding	\boxtimes	\boxtimes	\boxtimes	\boxtimes	\boxtimes
4.1 Management Commitment & Responsibility					
4.1.1 MSPO Policy	\boxtimes	\boxtimes	\boxtimes	\boxtimes	\boxtimes
4.1.2 Internal audit	\boxtimes		\boxtimes		\boxtimes
4.1.3 Management Review	\boxtimes	\boxtimes	\boxtimes		\boxtimes
4.1.4 Continual Improvement	\boxtimes	\boxtimes	\boxtimes		\boxtimes
4.2 Transparency					
4.2.1 Transparency of information and documents relevant to MSPO requirements	\boxtimes	\boxtimes	\boxtimes	\boxtimes	\boxtimes
4.2.2 Transparent method of communication and	\boxtimes	\boxtimes	\boxtimes		\boxtimes

consultation					
4.2.3 Traceability		\boxtimes	\boxtimes		
4.3 Compliance to legal requirements					
4.3.1 Regulatory requirements					\boxtimes
4.3.2 Land use rights					
4.3.3 Customary rights					
4.4 Social responsibility, health, safety and employment of					
4.4.1 Social impact assessment (SIA)					
4.4.2 Complaints and grievances					\boxtimes
4.4.3 Commitment to contribute to local sustainable					
development			\boxtimes	\boxtimes	\boxtimes
4.4.4 Employees safety and health	\boxtimes	\boxtimes	\boxtimes	\boxtimes	\boxtimes
4.4.5 Employment conditions					
4.4.6 Training and competency					
4.5 Environment, natural resources, biodiversity and ecos	system service	es		<u></u>	<u> </u>
4.5.1 Environmental management plan	\boxtimes	\boxtimes	\boxtimes	\boxtimes	\boxtimes
4.5.2 Efficiency of energy use and use of renewable					
energy					
4.5.3 Waste management and disposal	\boxtimes	\boxtimes		\boxtimes	
4.5.4 Reduction of pollution and emission	\boxtimes			\boxtimes	\boxtimes
4.5.5 Natural water resources	\boxtimes	\boxtimes	\boxtimes		\boxtimes
4.5.6 Status of rare, threatened, or endangered species		\boxtimes	\boxtimes		
and high biodiversity value area				\boxtimes	
4.5.7 Zero burning practices	\boxtimes	\boxtimes	\boxtimes	\boxtimes	\boxtimes
4.6 Best Practices					
4.6.1 Site management	\boxtimes	\boxtimes	\boxtimes		\boxtimes
4.6.2 Economic and financial viability plan	\boxtimes		\boxtimes		\boxtimes
4.6.3 Transparent and fair price dealing	\boxtimes		\boxtimes		\boxtimes
4.6.4 Contractor	\boxtimes	\boxtimes	\boxtimes		\boxtimes
4.7 Development of new planting					
4.7.1 High biodiversity value	□ NA	□ NA	□ NA	□ NA	□ NA
4.7.2 Peat land	□ NA	□ NA	□ NA	□ NA	□ NA
4.7.3 Social and Environmental Impact Assessment	☐ NA	☐ NA	☐ NA	☐ NA	☐ NA
4.7.4 Soil and topographic information	□ NA	☐ NA	☐ NA	☐ NA	☐ NA
4.7.5 Planting on steep terrain, marginal and fragile soils	□ NA	□ NA	□ NA	□ NA	□ NA
4.7.6 Customary land	□ NA	□ NA	☐ NA	□ NA	☐ NA
Group Member Audit Matrix (SINGLE Certification)	2/2022	2/2023	2/2024	2/2025	2/2026
Persatuan Nelayan Negeri Perak	\boxtimes	\boxtimes	\boxtimes	\boxtimes	\boxtimes

Assessment man days for the next assessment: 2 md. Recertification: 9/2027

NOTE:

- (i) Recertification should be carried out minimum 2 months prior to the expiry of the certificate
- (ii) The Audit Programme shall include Stage 1 and Stage 2 audit, surveillance audits in the first, second, third and fourth years, and a recertification audit in the fifth year prior to expiration of certification.
- (iii) The recommended minimum on-site audit duration for individual and group certification respectively, which includes the opening meeting, site auditing, document verification, and closing meeting as documented in ACB OPMC 2, Issue 2, 04 September 2020.
- (iv) Additional auditor days may be required for conducting post audit follow-up activities, such as verification on major non-conformities raised or addressing of any contentious stakeholder issues.

Section G Audit Summary

Summary of Area Audited

BUSINESS AREAS	DETAILS OF AUDITED SUMMARY	
Auditor	Date	Time
ML & HN	28/2/2023	9.30 AM

Opening Meeting

- a) introduction of the participants, including an outline of their roles;
- b) confirmation of the scope of certification;
- c) confirmation of the audit plan (including type and scope of audit, objectives and criteria), any changes, and other
 relevant arrangements with the client, such as the date and time for the closing meeting, interim meetings
 between the audit team and the client's management;
- d) confirmation of formal communication channels between the audit team and the client;
- e) confirmation that the resources and facilities needed by the audit team are available;
- f) confirmation of matters relating to confidentiality;
- g) confirmation of relevant work safety, emergency and security procedures for the audit team;
- h) confirmation of the availability, roles and identities of any guides and observers;
- i) the method of reporting, including any grading of audit findings;
- j) information about the conditions under which the audit may be premature terminated;
- confirmation that the audit team leader and audit team representing the certification body is responsible for the audit and shall be in control of executing the audit plan including audit activities and audit trails;
- I) confirmation of the status of findings of the previous review or audit, if applicable;
- m) methods and procedures to be used to conduct the audit based on sampling;
- n) confirmation of the language to be used during the audit;
- o) confirmation that, during the audit, the client will be kept informed of audit progress and any concerns;
- p) opportunity for the client to ask questions.

Auditor	Date	Time
ML & HN	28/2/2023	5.00 PM

Closing Meeting

- a) informing the client that the audit evidence collected was based on a sample of the information; thereby introducing an element of uncertainty
- b) the method and timeframe of reporting, including any grading of audit findings;
- the certification body's process for handling nonconformities including any consequences relating to the status
 of the client's certification;
- d) the timeframe for the client to present a plan for correction and corrective action for any nonconformities identified during the audit;
- e) the certification body's post audit activities;
- f) information about the complaint handling and appeal processes.
- g) any diverging opinion that are not resolved.
- h) opportunity for the client to ask questions.

Executive Summary

CARE Certification International (M) Sdn Bhd (CCI) is first private certification body originating from Malaysia, that been accredited by Standard Malaysia under the purview of Ministry of Science, Technology and Innovation (MOSTI). CARE Certification International have been fully complying to ISO 17021. The company is established with CARE of the needs of system certification and training in mind and is one of the leading multi-sector certification body in Malaysia.

CARE Certification International (M) Sdn Bhd (CCI) has vast experience in conducting audits related to MSPO certification. It has certified more than hundred palm oil estates throughout Malaysia. CCI has obtained accreditation from Standards Malaysia for its MSPO certification scheme, holding certificate No. MSPO 28122017 CB 06 since 28 December 2017.

This assessment was conducted on 28/2/2023. The audit plan is included as Appendix 2 of this report. The approach to the audit was to treat the Persatuan Nelayan Negeri Perak as a MSPO Certification Unit. A range of environmental and social factors were covered. This includes consideration of topography, palm age, proximity to areas with HCVs, declared conservation areas and local communities.

The methodology for collection of objective evidence included physical site inspections, observation of tasks and processes, interviews of staff, workers and their families and external stakeholders, review of documentation and monitoring data. MS 2530-3:2013 MSPO Part 3: General principles for oil palm plantations and organized smallholder was used to guide the collection of information to assess compliance. The comments made by external stakeholders were also taken into account in the assessment. The computation of the sampling size is elucidated by the following formula as per table below.

This report will be externally reviewed by MSPO approved Peer Reviewer prior to certification decision by CARE Certification International (M) Sdn Bhd. CCI does not provide any advice on compliance with any legislation, regulation, or standards. All audit reports and other documentation provided by the company, are given in good faith and in reliance on the accuracy and completeness of the information provided by the client. No responsibility is accepted to any third party that may rely in whole or in part on the content of this report, to the extent permitted by Law.

Meetings were held with stakeholders to seek their views on the performance of the company with respect to the MSPO requirements and aspects where they considered that improvements could be made. At the start of each meeting, the interviewer explained the purpose of the audit followed by an evaluation of the relationship between the stakeholder and the company before discussions proceeded. The interviewer recorded comments made by stakeholders and these have been incorporated into the assessment findings. Structured worker interviews with male and female workers and staff were held in private at the workplace and the estates.

Audit Findings			
1 MAJOR NONCONFORMITY	MAJOR NONCONFORMIT		
MJNC 1			
Indicator 4.4.4.2 (j):			
There is no evidence to show that the management has submitted the			
JKKP8 form to the DOSH Malaysia as required under the OSH (NADOPOD)			
Regulation 2004. This finding is a repeated finding which was raised as a			
Minor NC during the previous audit.			
7 MINOR NONCONFIRMITIES	MINOR NONCONFORMIT		
MNNC 1			
Indicator 4.1.2.1			
There is no evidence that the management has carried out an internal aud	t		
for this year. This does not comply with the requirements in this MSPO			
Standard.			

MNNC 2

Indicator 4.1.3.1

There is no evidence that the management has implemented the Management Review Meeting for this year. This does not comply with the requirements in this MSPO Standard.

MNNC 3

Indicator 4.2.2.3:

The management had prepared, maintained and documented the list of stakeholders. However, it was found that the list of stakeholders is not updated as other neighboring communities and key government agencies. This was raised as OBS during the previous audit.

MNNC 4

Indicator 4.4.4.2 (b)

It is confirmed that management not yet conducted CHRA as per requirement under the OSH (USECHH) Regulations 2000. It is noted that the management has obtained a quote for the implementation of CHRA and Noise Risk Assessment (NRA) from Konsultansi OSH (Ref No: KOSH OTH 2021.012) dated 6/12/2021. The management needs to speed up the implementation of the CHRA to comply with the requirements in the law mentioned above.

MNNC 5

Indicator 4.4.4.2 (i):

All work in the Estate is carried out by appointed contractors. However, no workers trained in first aid were present during field operations. Confirmed during the SAV1 audit, training for first aid has not yet been carried out. This was raised as OBS during the previous audit.

MNNC 6

Indicator 4.5.3.1:

The management has documented an SOP for Waste Management and Disposal (SOP-20), which identifies the following wastes categories, generated from its operations:

- 1. Domestic waste Non-recyclable wastes
- 2. Domestic waste Recyclable wastes
- 3. Schedule waste
- 4. Empty pesticides containers
- 5. Empty fertilizer bags

However, there has been no documents established by the management to

monitor the generations and monitoring of the wastes within its operations.

MNNC 7

Indicator 4.5.3.4:

Refer to 4.5.3.3. Noted that the management has established a Chemical Management and Handling SOP (SOP-16) on 1/12/2018, to which the handling of chemical containers has been mentioned. However, there has been no evidence to show that the management has taken proactive actions to improve the efficiency of monitoring or recycling potentials to the empty chemical containers generated from its operations. This has been raised as Observation in the previous assessment.

12 OBSERVATIONS OBSERVATION

OBS 1

Indicator 4.3.1.3

The management has adequately listed the laws applicable to its operation within the Master List of Standards, Legislation and Other Requirement, which included Acts and Regulations relevant to the management's operations. However, the following were either not included or updated within the listing:

1. Employment Act (Amendment) 2022

OBS 2

Indicator 4.4.6.1

It is confirmed that the management has established a training program for the year 2022. It is noted that the management has not yet established a training program and training needs analysis for the year 2023.

OBS 3

Indicator 4.5.1.2:

The management has established and maintained an Environmental Aspect & Impact Assessment (SOP-18) on 28/1/2020. The assessment covers the following operations:

- 1. Chemical storage
- 2. Field chemical premixing
- 3. Prunning, stacking & harvesting
- 4. Fertilizer storage
- 5. Manuring
- 6. Knapsack spraying
- 7. Visitors and contractors

General plan to address the negative impacts identified within the assessment form. However, there has been no indicator whether the plan has been monitored and implemented.

OBS 4

Indicator 4.5.1.3:

Referring to 4.5.1.2. General plan to address the negative impacts identified within the assessment form. However, there has been no indicator whether the plan has been monitored and implemented .

OBS 5

Indicator 4.5.1.5:

Noted that the management has conducted the following training on 17/8/2022, which has been attended by 3 general workers. However, it was noted that the management has not conducted any training in regard to environment for FY2023 and that no training plan has been sighted thus far.

This has been raised as Minor Non-Conformity in the previous assessment.

OBS 6

Indicator 4.5.1.6:

Noted that the management has conducted environmental meetings on 2/8/2022, which the minutes has been verified accordingly. However, there has been no evidence that the management has conducted any meeting or planning to conduct environment related meeting within FY2023.

This has been raised as Minor Non-Conformity in the previous assessment.

OBS 7

Indicator 4.5.2.1:

Noted that the management is monitoring the actual consumption of non-renewable energy (diesel) for estate operations by maintaining a monthly records with appropriate baseline values. Sighted and verified records for FY2022 as of August. However, there is no evidence of continuous monitoring throughout FY2022 and FY2023.

This has been raised as Minor Non-Conformity in the previous assessment.

OBS 8

Indicator 4.5.2.2:

Noted that the management is monitoring the actual consumption of non-renewable energy (diesel) for estate operations by maintaining a monthly records with appropriate baseline values. Sighted and verified records for FY2022 as of August. However, there is no evidence of usage

estimation and continuous monitoring throughout FY2022 and FY2023

OBS 9

Indicator 4.5.3.2:

The management has documented an SOP for Waste Management and Disposal (SOP-20), which identifies the following wastes categories, generated from its operations. However, there has been no evidence to show that the management has taken proactive actions to improve the efficiency of resource utilisation and recycling potentials to the waste generated from its operations.

OBS 10

Indicator 4.5.4.2:

The assessment of all polluting activities has been covered within the Environmental Aspect & Impact Assessment (SOP-18) on 28/1/2020. Refer to 4.5.1.2. General plan to address the negative impacts identified within the assessment form. However, there has been no indicator whether the plan has been monitored and mitigated.

OBS 11

Indicator 4.5.5.1 (a):

Noted that the management has established an SOP for Natural Water Resources (SOP-21) on 28/1/2020, to which the management shall monitor the water resources and its consumption baseline. Noted that the management has documented a Water Management Plan, which covers the following matters:

- 1. Chemical spillage at premixing area
- 2. Use of rainwater during spraying
- 3. Use of rainwater for tractor cleaning
- 4. Outgoing water monitoring

Mitigation plans are observed within the Continual Improvement Plans. However, there has been no indicator whether the plan has been monitored and mitigated by the management.

OBS 12

Indicator 4.5.5.1 (c):

Refer to 4.5.5.1 (a). Noted that the management has established an SOP for Natural Water Resources (SOP-21) and Water Management Plan. Mitigation plans are observed within the Continual Improvement Plans. However, there has been no indicator whether the plan has been monitored and mitigated by the management.

2 OPPORTUNITY FOR IMPROVEMENT (OFI)

OPPORTUNITY FOR IMPR

OFI 1

Indicator 4.6.4.1:

Refer to 4.6.3.1. Sighted and verified contract agreements between the management and Ban Boon Teng Sawit (M) Sdn Bhd. Noted that the appointed contractor is aware of the MSPO requirements and that they shall abide to it accordingly. However, there has been no document indicator to show that the appointed contractor has given their consent on abiding to the MSPO requirements.

OFI 2

Indicator 4.6.4.3:

Refer to 4.6.3.1. Sighted and verified contract agreements between the management and Ban Boon Teng Sawit (M) Sdn Bhd. Noted that the appointed contractor is aware of the MSPO requirements and that they shall abide to it accordingly. However, there has been no document indicator to show that the appointed contractor has given their consent on abiding to the MSPO requirements.

During the assessment_8_nonconformities were identified.

All Non-conformance will be further detailed in CAR Form # CCI-QP-07-3B

Note:

The assessment has been assessed and summary of the findings by Principle and Criteria – MS 2530-3:2013 Malaysian Sustainable Palm Oil (MSPO) Part 3: General principles for Plantations and Organized Smallholders.

Sampling Calculation

	Initial		Surveillance		
Entity	Stage 1	Stage 2	our vemanee	Recertification	
Oil palm estate (40.47 - 100 ha)	1	1.5	2	2	
Oil palm estate (101 - 500 ha)	1	3	3	3	
Oil palm estate (500 ha onwards)	2	3	4	4	
Oil mill	2	3	3	3	

Table 1: Recommended minimum on-site audit durations (man-days) for each Operating Unit

Conclusion:

A total of 1 estates were randomly sampled for this round of assessment. This is SINGLE Certification.

(i) Main Assessment Visit (MAV):

(ii) Surveillance Assessment Visit (SAV):

Х

:

= \(\sqrt{}\)

NOTE:

The details in above tables are developed to provide sufficient time under normal circumstances to adequately carry out auditing of a management unit against the certification standards for oil palm management under the MS 2530: Part 3; "General principles for oil palm plantations and organised smallholders". However, the time allocated to the various locations of complex audits must be documented to justify the allocated audit durations. The audit duration is calculated on the basis of 8 hours per day. Audit working days will be calculated to the nearest full or half day.

Summary of Assessment

The assessor(s) concluded that, based on all objective evidences reviewed, observed and discovered during this round of assessment, the Company Does Comply to the MS 2530: Part 3; "General principles for oil palm plantations and organised smallholders" standards and requirements. The following finding(s) were identified:

OATEOODV	Number of Finding (s)						
CATEGORY	P1	P2	P3	P4	P5	P6	P7
Major Nonconformity				1			NA
(Major NCR)	-	-	-		-	-	INA
Minor Nonconformity	0	4		0	0		NIA
(Minor NCR)	2	1	-	2	2	-	NA
Observation (OBS)	-	-	1	1	10	-	NA
Opportunity for	-	-	-	-	-	2	NA
improvement (OFI)							INA

PRINCIPLE 1 The client has demonstrated an acceptable degree of commitment in embracing MSPO standard requirements in its entirely through continuous internal complete.	_
PRINCIPLE 1 MSPO standard requirements in its entirely through continuous internal comp	
	iance
assessment as well as bolstering managerial and operational improvements contin	ually.
The client is able to maintain its transparency and efficiency in communicating dat	a and
PRINCIPLE 2 information internally and/ or externally. The client has also established an effective principle of the control o	ective
system in upholding the traceability elements across its daily operations.	
Review of documents and physical observations during the audit stint indicated th	at the
PRINCIPLE 3 client is aware and abide all governing rules and regulations (with several exception	ns, if
applicable) pertaining its daily operations throughout.	
The client has demonstrated its ability in providing substantial amount of considera	tions
PRINCIPLE 4 towards the welfare of all stakeholders. The general and specific wellbeing of its	
employees (and contractors' employees) were also being sufficiently accounted for.	
It is evident that the Client has established a considerably holistic approach and pla	ns in
PRINCIPLE 5 mitigating all potential negative environmental impacts arising from its oil plam	
plantation activities; while simultaneously enhancing the positive impacts.	
The Client has proved that all operations are governed by certain sets of procedures	(with
PRINCIPLE 6 several exceptions, if applicable). Additionally, the Client was able to demonstrate in	S
commitment in upholding proper governance against its business directions as well	as
contract management.	
The Client is able to ensure that its new planting exercise is being carried out lawful	y and
PRINCIPLE 7 taking into account the surrounding social and environmental aspects.	
[Omit this entire statement if P7 is not applicable]	

NOTE:

By the virtue of random sampling approach, there may exist chances of non-conformities not being identified during the assessment. Such occurrence shall therefore not be related with the assessor's competency and integrity in any way.

Stakeholder Consultation					
List of Stakeholders Interviewed	NA	Position	NA		
Inputs					
Management Response					
Audit Team Conclusion					

NOTE:

With reference to ABC- OPMC 4 Issue 2 dated 04 September 2020. Whenever deemed applicable, stakeholder consultation/ interview may be held in order to obtain the internal and external stakeholders' inputs on the Company's compliance towards the MSPO standards and stakeholders' views on areas where the Company could improve. Such consultation will be conducted professionally and in absolute isolation from the Company officials. All comments made by the stakeholders will be recorded and presented in this assessment report.

Competency Criteria of Audit Team

With reference to ABC- OPMC 1 Issue 2 dated 04 September 2020. This assessment has been conducted by

the following approved assessor(s) which hold sufficient qualifications and experiences to conduct MSPO Assessment. CARE Certification International (M) Sdn Bhd holds copies of educational qualifications, certificates and audit logs for each of the audit team members. Summary of the Assessor's credentials are as follows:

Criteria	Requirement	Lead Auditor	Auditor
Education	Post-secondary education, college or university diploma/degree in one of the following i. Agriculture; ii. Science & Technology (e.g., Environmental Sciences, Life Sciences, Geological Sciences, Natural Sciences,); iii. Engineering, Process Technology; iv. Energy Management, Quality Management; v. Social Sciences and/or Anthropology; vi. Business Management; or vii. Other relevant related fields	Muhammad Syamil Bin Mat Salleh holds a Diploma in Mechanical Engineering from MARA University of Technology, Malaysia.	Diploma in Plantation Industry and Management (DPIM), MARA University of Technology, Kota Samarahan
Work Experience	Lead: At least five (5) years of work experience in the oil palm sector or related fields such as social, health, safety and environment Auditor: Post Secondary education: At least ten (10) years of work experience in the oil palm sector or related fields such as social, health, safety and environment Tertiary education: At least three (3) years of work experience in the oil palm sector or related fields such as social, health, safety and environment	He has almost 10 years' experience in sustainability palm oil industry and he is also implemented scheme RSPO, MSPO and SCCS certification in his previous company.	More than 20 years of experience in oil palm operation specializing in quality management, occupational safety & health, food safety and CSR; in Sime Darby Plantations Bhd, Tradewinds Plantation Bhd and BOH Plantation Sdn Bhd
Training	i) Attended the MS 2530 series of standards training or other auditor competency trainings endorsed by MPOCC or MPOB (pre-2016). ii) shall have undergone 40 hours of accredited OR 40 hours of lead auditor course	He has successfully attended MS2530 series of standards auditor competency training and attended Lead Auditor course in Quality Management System (ISO 9001:2015) & Environmental Management System (ISO 14001:2015) -	Successfully attended Integrated ISO 9001:2015 & ISO 14001:2015 Lead Auditor Course (PSV) and MSPO Auditor Course (OSH-ISIS) in January 2019

	either in Quality Management Systems (QMS) or Environmental Management Systems (EMS) or Occupational, Health and Safety Management Systems (OSH)	Integrated Management System. Also attended the MSPO SCCS Auditor Training.	
Auditing Experience	Lead: Conducted at least three (3) MSPO or equivalent sustainability certification audits as Lead Auditor-in-training with a minimum of fifteen (15) man-days under the direction and guidance of a qualified Lead Auditor for MSPO or equivalent sustainability certification schemes within the last two (2) years. Auditor: Conducted a minimum four (4) on-site audits for a total of at least 20 man-days of audit experience as an auditor-in-training under the direction and guidance of a qualified Lead Auditor for MSPO or equivalent sustainability certification schemes within the last two (2) years.	Currently a freelance MSPO Auditor since May 2019 and has been conducted auditing in relevant areas of palm oil plantation & mill.	Conducted more than 100 mandays of MSPO audit under the capacity of Lead Auditor and Auditor with several Certification Bodies in Malaysia
General	A good knowledge in handling and evaluating sources of information and data. Able to communicate in Bahasa Malaysia or any other local language	Have a good knowledge in handling and evaluating sources of information and data. Able to communicate in Bahasa Malaysia and English Language.	Able to communicate and understand Bahasa Malaysia and English well

Details of Certified Entity (Single Certification)

1. ESTATE INFORMATION:

Category of the listed organisation is Estate

NAME OF UNIT	MPOB LICENSE NO	LOCATION	GPS COORDINATES	CERTIFIED AREAS (HA)	PLANTED AREAS (HA)
Ladang Sawit	50401270200	PT 5349, Mukim	3.85644,	80.94	80.94
Persatuan Nelayan	rsatuan Nelayan 0		n Melintang, 101.03109		
Negeri Perak		Hilir Perak, Perak			
Other Sustainability Certification		NIL			

Note

(i) Maps showing geographical location, with close-up of the certified estates are attached as in Appendix 1 of this report. (ii) With reference to Circular MPOCC dated 2 April 2021

2. AREA STATEMENT AND FFB FORECAST:

Category of the listed organisation is Estate

NAME OF UNIT	CERTIFIED AREA (HA)	PLANTED AREA (HA)	FFB TON/ YEAR 2022	YIELD TON/ YEAR
Ladang Sawit Persatuan Nelayan	80.94	80.94	868.09	10.73
Negeri Perak				
TOTAL	80.94	80.94	868.09	10.73

Appendix 1: Location and Field Map

