



## Management System Certification Audit Summary Report

Organization:	The Safe House SG Pte. Ltd.				
Address:	506 Chai Chee Lane #01-01 Singapore 469026				
Standard(s):	ISO 9001:2008	Accreditation Body(s): UKAS			
Representative:	Mr. John Tay				
Site(s) audited:	As above	Date(s) of audit(s):	26 <sup>th</sup> Jan 2016		
EAC Code:	31, 35	NACE Code:	63.12, 74.82	Technical Area code:	31.4, 35.5
Effective No. of Personnel:	5	No. of Shifts:	Normal shifts		
Lead auditor:	T1 – Alex Chai	Additional team member(s):	N.A.		
Additional Attendees and Roles	N.A.				
This report is confidential and distribution is limited to the audit team, client representative and the SGS office.					

### 1. Audit objectives

The objectives of this audit were:

To determine conformity of the management system, or parts of it with audit criteria and its:

- ability to ensure applicable statutory, regulatory and contractual requirements are met,
- effectiveness to ensure the client can reasonably expect to achieve specified objectives and to identify as applicable areas for potential improvement

### 2. Scope of certification

#### Testing, Packing and Storage of Precious Metal Bullion

**Note:** Describe below in detail the activities in the organisation under certification:

Has this scope been amended as a result of this audit?

Yes       No

**Note:** Highlight the changes in the amended scope.

(Example: Technical and geographical extension, reduction and changes)

**The organization has an extension to include Testing.**

**Therefore the scope of certification shall revise as,**

**Testing, Packing and Storage of Precision Metal Bullion**

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

Yes       No

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For integrated audits, confirm the current level of the client's IMS integration:  N/A  Basic  High

**BASIC Level of Integration:**

Is there a single internal audit program, a single management review and a single, commonly managed document control system covering the entire IMS?

YES  NO

**HIGH Level of Integration:**

Is there a single IMS Management Team responsible for its implementation and maintenance and able to respond to questions about the entire system?

YES  NO

### 3. Current audit findings and conclusions

The audit team conducted a process-based audit focusing on significant aspects/risks/objectives required by the standard(s). The audit methods used were interviews, observation of activities and review of documentation and records.

The structure of the audit was in accordance with the audit plan and audit planning matrix included as annexes to this summary report.

The audit team concludes that the organization  has  has not established and maintained its management system in line with the requirements of the standard and demonstrated the ability of the system to systematically achieve agreed requirements for products or services within the scope and the organization's policy and objectives.

Number of nonconformities identified: 0 Major 0 Minor

Therefore the audit team recommends that, based on the results of this audit and the system's demonstrated state of development and maturity, management system certification be:

Granted /  Continued /  Withheld /  Suspended until satisfactory corrective action is completed.

### 4. Previous Audit Results (N.A.)

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

- Any nonconformity identified during previous audits has been corrected and the corrective action continues to be effective. (Refer to Section 6 for details)
- The management system has not adequately addressed nonconformity identified during previous audit activities and the specific issue has been re-defined in the nonconformity section of this report.

### 5. Audit Findings

The audit team conducted a process-based audit focusing on significant aspects/risks/objectives. The audit methods used were interviews, observation of activities and review of documentation and records.

The management system documentation demonstrated conformity with the requirements of the audit standard and provided sufficient structure to support implementation and maintenance of the management system.  Yes  No

The organization has demonstrated effective implementation and maintenance / improvement of its management system and is capable of achieving its policy objectives.  Yes  No

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The organization has demonstrated the establishment and tracking of appropriate key performance objectives and targets and monitored progress towards their achievement.  Yes  No

The internal audit program has been fully implemented and demonstrates effectiveness as a tool for maintaining and improving the management system.  Yes  No

The management review process demonstrated capability to ensure the continuing suitability, adequacy and effectiveness of the management system.  Yes  No

Throughout the audit process, the management system demonstrated overall conformance with the requirements of the audit standard.  Yes  No

Certification claims are accurate and in accordance with SGS guidance and the organization is effectively controlling the use of certification documents and marks.  N/A  Yes  No

## 6. Significant Audit Trails Followed

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

- **Relating to Previous Audit Results/ Stage 1 Findings/ Certification History:**  
There is no finding from the previous audit
- **Relating to this Audit; including any significant changes (eg: to key personnel, client activities, management system, level of integration, etc.):**  
The organization has an extension to include Testing in the scope of certification and activities.

**(Note: Delete item if not applicable or not part of audit area for surveillance visit)**

Item	Audit result
Policy / objectives & programmes	Checked and verified quality policy and quality objectives for 2016:- There is no change to the Quality objectives issue since 16/5/14.  1) Achieving 90% of overall customers' satisfaction, result 100% 2) All visitors' information shall be checked, verified and recorded. (100%) 3) 100% stock accountable during yearly stock take., result 100% from the 3 <sup>rd</sup> party audit.
Documentation and records control including level of integration (for Integrated Management System)	Not in the audit V02 schedule.
Process control including outsourced processes including control of nonconforming product; infrastructure; control of	TSH-QP-06, Packaging and Storage Provision TSH-QP-08, Monitoring and measurement of processes TSH-QP-09, Monitoring and measurement of product TSH-QP-10, Control of non-conforming product TSH-QP-12, Control of monitoring and measuring equipment

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<p>monitoring and measuring equipment; and monitoring and measurement</p>	<p><b>TSH-QP-13, DUX Testing,</b></p> <p>Seen the calibration master-list, randomly select and verified the below equipment :-</p> <ol style="list-style-type: none"> <li>1) Precision Balance , model MS32001L, s/n B502451395 with calibration cert # SG0009-121-030615, calibration date 6/3/15 and next cal date 31/3/16.</li> <li>2) Ultrasonic Flaw Detector, model USM/DMS Go+, s/n GOPLS14100186 is a newly purchased equipment with calibration done on 9/2/15,</li> <li>3) Ultrasonic instrument, model EPOCH 600, s/n 13056607 is a newly purchased equipment dated 21/10/15 and was calibrated to factory specification</li> </ol> <p><b>Seen the Inspection Test report # 2268, parcel ID ID SB20007362, TPL 002165, performed by Saifullah Khan on 28/12/2015 for Johnson Matthey Silver Bar – 100 Ounces. The test result showed the authenticity of test were within expected tolerances.</b></p> <p>The equipment maintenance is on the motorized stacker, verified the quarterly preventive maintenance for equipment model 20BT11OA, s/n 1A414021, service job card # P290997 date 12/11/15 as well as previous maintenance records # P286980 dated 27/08/15, the checklist was stamped and verified by the client .</p> <p><u>Storage and Preservation</u></p> <p>Seen the store area with strong and tight security. There is no special storage condition required. Generally the goods are stored in a clean environment and secured with CCTV monitoring and sensors.</p> <p>Seen the incoming goods are being verified and receipt with acknowledgement. Reference to the email dated 9/12/15 that there is an incoming transfer from the end-customer in which the order information are provided by the parent company and the Deposit Receipt #670.</p> <p>Seen the receiving through system, identifying the parcel ID, randomly verified the parcel ID SB20007347 with testing result under inspection # 2261 test date 28/12/15 and photograph of the bullion with parcel ID on it.</p> <p>Seen the internal inventory check as well as a quarterly inventory check by external party, Inspectorate (Singapore) Pte Ltd. Randomly verified the internal inventory statement for 26/1/16 with the information on the parcel ID, pallet # and location as well as the external audit report on 24/11/15 on the inventory with cert # SGMSGJ15090542/KT/MN, all the above records are managed through software system.</p> <p>Seen and verified the withdraw, the procedure is the same as receiving, seen the email information dated 6/1/16 on the withdraw information , randomly select withdraw receipt # 654 dated 28/12/15 with the information on withdraw with the packing list attached, the withdraw receipt was signed and stamp by the receiver, the security and the vault personnel.</p>
<p>Customer-related and other requirements</p>	<p>The organization take orders from the parent company and has no external dealing.</p> <p>Seen the email dated 9/12/15 that there is an incoming transfer from the end-customer in which the order information are provided by the parent company.</p>

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	A Deposit Receipt #670 was created with informations of the product, the net weight and signed and stamped by the security, the forwarder and the vault keeper.
Customer satisfaction and complaints	TSH-QP-11, Corrective and preventive action Seen the customer complaint log sheet, till date, there is no customer complaint. Verified customer feedback form dated 19/10/15 from Silver Bullion Pte Ltd with score of 100%.
Communication, responsibility and authority Competence, training and awareness	TSH-QP-04, Human Resource Seen and verified training record for the newly joined staff :- 1) Qu Qing, 2) Saifullah Khan Training includes internal auditor training done on 12/1/16 and was conducted by the consultant. Verified the training evaluation form feedback by Qu Qing on the ISO 9001 Internal audit training and was signed off by the HOD
Internal audit and management review	TSH-QP-03, Management Review Management review was conducted on the 21/1/16 covering all required requirements. Checked and verified minutes of meeting, the management has reviewed and decided that there is no change to the QMS objectives and policy.  TSH-QP-07, Internal Audit Seen the internal audit schedule for 2016 issue on 4/1/16, the internal audit was carried out in January 2016 by the consultant. Verified the internal audit report with no NCs raise, except for 1 findings whereby no non-conforming was raised.
Nonconformity, corrective, preventive action, analysis of data, continual improvement	TSH-QP-11, Corrective and preventive action Till date, there is no customer complaint. No CAPA raise during internal audit.
Other relevant information	N.A.
Use of certificate and logo	The organization does not uses the logo and the certificate (e.g. on business cards, company brochures, websites etc.) in compliance with SGS on the use of logo.

- Client Proposed Action to Address Minor Non-Conformances Raised at this Audit:  
There is no non-conformances raised at this audit.



## 7. Nonconformities

**NonConformity** N° \_\_\_ of \_\_\_

Department /

Function:

Document Ref.:

Major  Minor

Standard

Ref.:

Issue / Rev.

Status:

Details of

Nonconformity:

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

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

Organisation Closed (Received)

Date:-

SSC (Auditor) Closed

Date:-

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

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

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## 8. General Observations & Opportunities for Improvement

### Positive Aspect of the Organization:

- 1) The management and staff are committed in implementing the Quality Management System.
- 2) Good management system are well maintain due to regular external audit.

## 9. Opening and Closing Meeting Attendance Record

Name	Position	Opening	Closing
Mr. John Tay	Management Representatives	√	√
Ms Qu Qing	Deputy MR	√	√