

AUDIT REPORT: THE SAFE HOUSE SG PTE. LTD.

TYPE OF VISIT(S): RECERTIFICATION AUDIT 4.1 (UKAS - ISO

9001:2015)

CONTRACT NUMBER: SG/SIN/601595

BE THE BENCHMARK



| SGS DELIVERING OFFICE: | SGS International Certification Services Singapore Pte Ltd. | | | |
|------------------------|---|---|--------------------|-------------------------------|
| ORGANISATION NAME: | The Safe House SG Pte. Ltd. | | | |
| HEAD OFFICE ADDRESS: | 6 Changi South Street 3, #03-00, Singapore 486128 | | | |
| REPRESENTATIVE: | Aaron Tan | | | |
| AUDIT CRITERIA | | | | |
| ACCREDITATION | ACC | | REDITED SGS OFFICE | EFFECTIVE NUMBER OF PERSONNEL |
| UKAS | SGS United Kinç | | gdom Limited | 6 |
| Standard/Scheme | | SCOPE | | |
| ISO 9001:2015 | | Testing, Packing and Storage of Precious Metals Storing and Releasing of Cryptocurrencies | | |

SITES IN CERTIFICATION SCOPE

| SITE 1 : The Safe House SG Pte. Ltd 6 Changi South Street 3, #03-00, Singapore 486128 | | |
|---|---|--|
| Standard/Scheme | SCOPE | |
| ISO 9001:2015 | Testing, Packing and Storage of Precious Metals Storing and Releasing of Cryptocurrencies | |

| AUDIT TEAM ALLOCATION | | |
|---|---------------------|--|
| AUDIT TEAM LEADER | Alex Chai - Auditor | |
| ANY OTHER ACCOMPANYING PERSON (NAMES & ROLES) | | |
| AUDIT DATE(S) | 16 Jan 2024 | |

1. AUDIT OBJECTIVES

The objectives of this audit/visit are, for the scope of certification:

Determination of the conformity of the client's management system, or parts of it, with audit criteria;

Determination of the ability of the management system to ensure the client meets applicable statutory, regulatory and contractual requirements (NOTE: A management system certification audit is not a legal compliance audit.);

Determination of the effectiveness of the management system to ensure the client can reasonably expect to achieving its specified objectives;

As applicable, identification of areas for potential improvement of the management system.

CONSIDERATIONS:

The scope of the audit, dates and places where audit activities were conducted are identified in the audit plan (any changes are identified in the audit report).

This audit report contains a summary of the capability of the management system to meet applicable requirements and expected outcomes.

This report is confidential, and distribution is limited to the audit team, audit attendees, client representative, the SGS office and may be subject to Accreditation Body, Certification Scheme owners or any other Regulatory Body sampling in line with our online Privacy Statement which can be accessed at www.sgs.com/en/privacy-at-sgs.

Audits use a sampling process, based on the information available at the time of the audit. The audit methods shall include, but are not limited to, interviews, observation of activities and review of documentation and records.

2. SUMMARY AND CONCLUSIONS

CONCLUSIONS

The audit team recommends that, based on the results of this audit, the management system certification be:

| STANDARD & ACCREDITATION | CONCLUSIONS |
|--------------------------|-------------|
| ISO 9001:2015 - UKAS | Renewed |

Continued Certification is conditional to satisfactory processing of non conformities where applicable.

AUDIT SUMMARY

- The management system documentation demonstrated conformity with the requirements of the audit standard(s) and provided sufficient structure to support implementation and maintenance of the management system.
- The organisation has demonstrated effective implementation and maintenance / improvement of its management system and is capable of achieving its policy objectives.
- The organisation has demonstrated effective implementation and monitoring of its management system's ability regarding meeting of applicable statutory, regulatory and contractual requirements.
- The organisation has demonstrated the establishment and tracking of appropriate key performance objectives and targets and monitored progress towards their achievement.
- The internal audit program has been fully implemented and demonstrates effectiveness as a tool for maintaining and improving the management system.
- The management review process demonstrated capability to ensure the continuing suitability, adequacy and effectiveness of the management system.
- Throughout the audit process, the management system demonstrated overall conformance with the requirements of the audit standard(s).

| Number of nonconformities identified | 0 |
|--------------------------------------|---|
| | |

- · Nonconformance was not identified at the previous audit.
- Previous surveillance audit reports and additional information in SGS databases have been reviewed, and the performance of the management system over the certification cycle is considered adequate for re-certification purposes.

There is no finding from the previous audit.

- Certification Scope is appropriate.
- · Audit objectives have been fulfilled.
- · Audit Plan was followed.
- · Audit Programme is adequate.
- · Any issues resolved.

3. PREVIOUS FINDINGS

The results of the last audit of this system have been reviewed, in particular to assure appropriate correction and corrective action has been implemented when non-conformities (or Stage 1 findings) were identified. When the management system has not adequately addressed non-conformity (or Stage 1 finding) identified during previous audit activities, the specific issue has been raised in the non-conformity section of this report.

4. NON-CONFORMITIES

Not applicable

In the case of a multi-site organization, the organization is required to verify in the root cause analysis of nonconformities whether they can affect other sites. Where appropriate, corrective actions must be taken both at the level of the central functions and at each affected site.

5. OBSERVATIONS AND IMPROVEMENT OPPORTUNITIES

6. SPECIFIC REQUIREMENTS

Any significant changes?

Are certification claims accurate and in accordance with SGS guidance and is the organisation effectively controlling the use of certification documents and marks?

N/A

The organization does not use the certification claims in the operation.

7. AUDIT TRAILS

SITE 1 : The Safe House SG Pte. Ltd. - 6 Changi South Street 3, #03-00, Singapore 486128

| PROCESS: Storing and Releasing of Cryptocurrencies, preservation of product, infrastructure, calibration | | |
|--|-----------|--|
| PROCESS OWNER | AUDITOR | |
| Sim Tee Jay | Alex Chai | |
| SUMMARY | | |

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

TSH-QP-13, DUX Testing

License for Radiation Worker under the Radiation Protection Act, validated the certificate# R1/2023/03180 issued dated 20-02-2023 for Aaron Tan Chee Beng

, type of radiation work for production material, inspection / testing / analysis not using radioactive materials.

Seen the calibration master-list, randomly select and verified the below equipment:-

- 1) Digimatic Caliper with s/no SH1910A00001, calibration dated 16-03-2023 and calibration report# 03111-0323-01665-CMDD.
- 2) Sigmascope Gold B, s/no SN14000250, and probe type, s/no 0713P00013 calibrated on 21-02-2023 with calibration report # CL4994-23
- Balance weight, s/no B502451395 calibrated on 21-11-2023 with calibration cert# BC2311021
- 4) Ultrasonic thickness gauging transducer, model DA 401 s/no GOPLS14100186 and model DA 412 s/no 8237 with calibration on 06-11-2024 and calibration cert# 2023TC034.
- Thermo Fisher Scientific Nitron ™ XRF Analyzer, s/no 82244 with calibration on 15-03-2023 and calibration cert# T23030127.
- Flaw Detector, s/no 130566007 with calibration on 01-11-2023 and calibration cert# 178141900491

Storage and Preservation

Walked the store area with Tee Jay, the work environment is bright, the racking is properly label, with sensor and tight security, noted that there is no special storage condition required for the preservation of product and the goods are stored in a clean environment with CCTV monitoring, motion sensor as well as the security system which is linked to Ademco Security Management, the cages are numbered and sealed with RFID security tag, sampled and verified: -

- · Withdrawal Receipt# 16986 dated 18-12-2023 with instruction from the customer to withdraw 15 parcels of silver bar.
- Deposit Receipt# 16989 dated 19-12-2023, validate the order confirmation# 100875 dated 29-11-2023 and the email communication on the transfer-in PO# 18560 on the test result.

As verified with Tee Jay that there is no testing at the current premise but will do so in the future.

Verified yearly inventory verification by the 3rd party with certificate #: SGIMT-23-60092/MN/AMH dated 02-05-2023 conducted at 6 Changi South Street 3, #03-00 Singapore 486128. The audit concluded that there are no abnormalities identified during the audit

| PROCESS : Context of Organization, Risk & Opportunities, Scope, Policy, Roles & Responsibilities and Leadership | | |
|---|-----------|--|
| PROCESS OWNER | AUDITOR | |
| Aaron | Alex Chai | |
| SUMMARY | | |

Interviewed Aaron and understood that there is no significant change to the context of the organization related to the QMS, validated the QMS manual issued on 16-01-2023 and the management review conducted on 29-12-2023 that there is no significant change.

Sampled the needs and expectations of the interested parties, reviewed and updated on 01-12-2023: -

- Customers Needs of safe and secured deposit and storage of bullions and the expectations of Quality customer services.
- · Vendors Need of Business Continuity and the expectation of timely payment for delivered materials / services.
- Regulatory bodies / Authorities Need of Safe management measure and expectation business continuity.
- · Management and employees Need of work-life balance and expectation social responsibility.
- · Top Management Need of reliable team who can perform well in each position and the expectation employees to be take ownership.
- · Shareholders Need of yearly financial reporting and expectation the company to growth its revenue.

The risk analysis form (Risks / Opportunities) reviewed on 01-12-2023 and the next review on 31-11-2024, sampled and validated: -

- · Content dispute during phone conservation with Silver Bullion that is not documented, possible impact on the potential bullion stolen and the control is to deploy security guards on CCTV monitoring, to inform TSH staff immediately through walkie-talkie on any suspicious activity
- · Unexpected customer visit with possible impact on security breaches, with control on performing background compliance check with the customer ID / passport.
- · Damage to packaging with possible impact unsure extent of damage and control method is stop receiving, contact vendor.

Leadership – the CEO has the ultimate authority and responsibility for the quality aspects in the organization, validated the organization structure listed in appendix B of QMS manual and the responsibilities in appendix C of QMS, sampled and validated MR, security, security logistic, vault operation. Verified the assignment role of MR assigned to John Tay who is also a document controller.

Verified the QMS scope with Aaron that there is no change and validated the scope in the manual to be: -

- a) Testing, Packing and Storage of Precious Metals
- b) Storing and Releasing of Cryptocurrencies

Checked and verified quality policy and quality objectives:-

The Quality Policy and the Quality Objectives were established and has been endorsed by the CEO on 02-01-2024, validate the Quality objective

- 1) Achieving 90% of overall customers' satisfaction, result 100%
- 2) All visitors' information shall be checked, verified and recorded. (100%)
- 100% stock accountable during yearly stock take., result 100% from the 3rd party audit.

| PROCESS: Customer satisfaction, internal audit and management review | | | |
|--|-----------|--|--|
| PROCESS OWNER | AUDITOR | | |
| Aaron | Alex Chai | | |

SUMMARY

TSH-QP-11, Corrective and preventive action

Seen the customer complaint log sheet, validated till date there is no customer complaint.

As clarified that there is one customer and validate the customer feedback form dated 12-01-2024 from Silver Bullion Pte Ltd with score of 100%.

Seen the customer complaint log sheet, till date, there is no customer complaint.

Quality

- Consistency
- Compliance to requirements
- Safety consciousness
- Corrective actions

·Service

- Handling of queries professionally
- Responsiveness
- Competency of staff
- Co-operative

The assessment scoring of 1 to 5 with '1' being poor and '5' being excellent.

TSH-QP-03, Management Review

Reviewed the minutes of management review for the year 2023 conducted on 29-12-2023, the attendee are Gregor Gregorsen, Joh Tay, Sim Tee Jay and Aaron Tan, validated that the meeting minutes covers and complies with ISO 9001:2015 clause 9.3, sampled and verified the meeting minutes discussed on the changes in risks / opportunities, internal feedback and communication as well as changes to QMS.

TSH-QP-07, Internal Audit

Reviewed the internal audit, verified: -

- Internal schedule issued on 01-12-2023 and the plan date is 28-12-2023.
- · Internal audit report, there is no finding raised
- Internal auditors are Sim TeeJay, Aaron Tan and Edmond Chow.

| PROCESS: Support - Human Resource, Competency, Awareness, Communication | | |
|---|-----------|--|
| PROCESS OWNER | AUDITOR | |
| Sim Tee Jay | Alex Chai | |
| SUMMARY | | |

TSH-QP-04, Human Resource

As verified that there is no new staff employed and there is no training conducted, sampled and the staff are trained and certified on ISO 9001:2015 internal auditor by ACE team Management Consultancy, validated: -

- Aaron Tan Chee Beng trained on 29-10-2018
- Gary Soon Tien Seng trained on 29-10-2018
- John Tay trained on 17-10-2017
- · Sim Tee Jay trained on 17-10-2017

The organization has determined the knowledge necessary for the operation of its processes and to achieve conformity of products and services through performance review. The training plan is established and monitor to ensure organization knowledge is managed.

External communication is basically through email while internal communication is verbal

| PROCESS : Documented information | | |
|----------------------------------|-----------|--|
| PROCESS OWNER | AUDITOR | |
| Aaron | Alex Chai | |
| SUMMARY | | |

As verified with Aaron that there are no document changes as there is no change in the operation since the last audit, sampled: -

- · Doc# TSH-QP-01, rev. 01, title Document Information
- Doc# TSH-QP-03, rev. 01, title Management Review
- · Doc# TSH-QP-09, rev. 01, title Nonconformity and corrective action.
- · Doc# TSH-WI-03, rev. 01, title Analysis of customer feedback
- Doc# TSH-WI-04, rev. 01, title Security.

Verified the document change notice and the document release notice for Doc# TSH-QP-13, title DUX Testing, rev. 2, the objective is to "release for use with testing using alternate equipment" issued on 13-01-2023 and has been approved by the CEO, Gregor Gregersen.

Seen the document retention with a retention period of 5 years, sampled and verified: -

- · Quality manual
- Work Instructions
- · Non-conformity material report
- · Internal audit report
- · Storage and withdrawal form.

8. ADDITIONAL INFORMATION / COMMENTS

Not applicable

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