



IND-EXPO CERTIFICATION LIMITED
 INTEGRATED MANAGEMENT SYSTEMS CERTIFICATION SCHEME
 NON-CONFORMITY REPORT

Name of Organization: Carolina Tea Factory - Hattai Plantations PLC

NC No. : 02 of 04

Section : Management

Team Leader : Mr. Aruna Amaradasa

Relevant Standard : ISO 22000:2018

Auditor :

Relevant Clause : 6.2

Date of audit : 2021-02-15

Relevant company document :

Non-conformity detected:

Category : Major/Minor

Many damaged conveyors have been observed. Company has identified need of replacement of the same. However this matter has not been addressed in food safety objective. ~~Cost~~

.....
Auditor

.....
Team Leader

.....
Auditee

Correction:

Have proposed to revise and add conveyors replacement to Carolina food safety objective plan and replace damaged all conveyor belts before end of May 2021

.....
Auditee

.....
Date

16/02/2021

Root cause for Non-conformity:

Managers have discussed change all damaged conveyor belts. but not any documented evidence.

.....
Auditee

.....
Date

16/02/2021



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Corrective action:

Date of completion: 18/02/2021

Have add damaged conveyor belts replacement to Objective plan of Food safety management system of Carolina tea factory and will be able to replace all damaged conveyor belts before May 2021

Auditee

18/02/2021

Date

Verification of corrective action:

NC Closed/Open

Evidence provided for the corrective action taken is verified. So NC is closed

Auditor


21/02/2021

Date

Effectiveness of corrective action:

Auditor

Date

	Carolina Tea Factory, Hattion Plantations PLC ISO 22000 (2018) FOOD SAFETY MANAGEMENT SYSTEM RECO
Record Name:	FSMS Objectives, targets & planning actions
Record No:	FSMS-R-02
Original Date:	Revision No: 30/01/2021 Revision Date:

Mgt Prog. No	Objective	Resource required	Target	Planned actions
8	Replace all damaged conveyor belts in Factory	Budget allocation for replace new conveyor belts	100% replace all damaged conveyor belts before end of May, 2021	i) Take quotations & evaluate quotations (considering prices, durability, food graded & after services) ii) Select supplier and make purchase order iii) Replace all damaged conveyor belts

Prepared by :	F. S. M. S. Team Leader	Authorized by :	Top Management
Signature:	Moakshan Kulathunga	Signature:	Lalindra Abeywardhane
Date:	18. 02. 2021	Date:	18. 02. 2021



IND-EXPO CERTIFICATION LIMITED
MANAGEMENT SYSTEMS CERTIFICATION SCHEME
MANAGEMENT AUDITORS/AUDITORS/TEAM LEADERS/LEAD AUDITORS
FOOD SAFETY MANAGEMENT SYSTEMS (Delete whichever is inappropriate)

NOTE: Clause 1, 2 and from 3.1 to 3.2.7 are applicable to trainee auditors/Auditors/Team Leaders / Lead Auditors and sub-sub clauses 3.2.8, 3.2.9, 4 and 5 are applicable to Team Leaders/Lead Auditors only.

1. GENERAL

1.1 Name of the trainee auditor/ Auditor/Lead Auditor/Team Leader

1.2 Name of evaluator

1.3 Date of evaluation

1.4 Place of evaluation

2. PERSONAL ATTRIBUTES

Auditors should possess personal attributes to enable them to act in accordance with the principles of described in ISO 19011 standard (Please tick "x" the appropriate cage)

MARKING SCHEME

	Excellent (5)	Good (4)	Average (3)	Needs improvement (2)	Below average (1)
2.1 Ethical – fair, truthful, sincere, honest and discreet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.2 Open minded- willing to consider alternative ideas/points of view	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Doc. No. QP-21-F-02A

Reviewed and approved by : Director

Issue No. 02
 Revision No: 01

Date of issue : 2016-02-19
 Revision Date: 2017-02-24
 Issued by : Management Representative
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18/2/2021

Responsible staff	Start date	End date	Actual result	Allocated resources	Performance measurement indicator
Estate Manager/ Asst: Manager/ Factory executive	18-Feb-2021	28-Feb-2021	Have requested quotations from supplier	email & internet facility	Numbers of recived quotations, according to all considering criterias
Estate Manager/ Asst: Manager/ Factory executive	5-Mar-2021	10-Mar-2021		Allocate budget	Actually selected supplier & PO rasied supplier been a same one
Estate Manager/ Asst: Manager/ Factory executive	1-Apr-2021	30-May-2021		Allocate budget	By visual inspection, Zero spillages

IND-EXPO CERTIFICATION LIMITED
MANAGEMENT SYSTEMS CERTIFICATION SCHEME
-SITE EVALUATION FOR TRAINEE AUDITORS/AUDITORS/TEAM LEADERS/LEAD AUDITORS
FOOD SAFETY MANAGEMENT SYSTEMS (Delete whichever is inappropriate)

	Excellent (5)	Good (4)	Average (3)	Needs improvement(2)	Below average (1)
al and recall procedure including any regulatory requirements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n requirements for measurement equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ty requirements (eg standard, customer, regulatory)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cation (internal and external)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ent responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
y preparedness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l contamination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ce of personnel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
election and management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5					
y food chain category and subcategory practices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
elation to:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
lationship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
with respect to PRP, OPRP, CCP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>