

The Director/CEO,

Ind-Expo Certification Ltd,  
CNCI Secretarial,  
Apt # 20, 1<sup>st</sup> Floor,  
Galle Face Court 02,  
Colombo 03,  
Sri Lanka.

for office use

DATE RECEIVED	
REFERENCE NUMBER	
NEW CERTIFICATION	
RECERTIFICATION	
REVIEWING OFFICER	

1. GENERAL:

1.1. Registered Name of the Applicant Organization: Rockland Distilleries (Pvt) Ltd

1.2. Address (Head Office): Rockland Distilleries (Pvt) Ltd, 7E, Ovitamulla, Thotupola Road, Welgama, Titta Pattara or H.O. 160/24, Kirimandala Mawatha, Colombo 05

Telephone: 0334551486 Fax: - E-mail: athila.nadeeshani@rockland.lk

1.3. Contact Person of the Organization:

a) Nominee 1:

Name

V. P. A. Nadeeshani

Designation

Quality Assurance Manager

Telephone

076-7795804

Fax

-

E-mail

athila.nadeeshani@rockland.lk

b) Nominee 2:

Name

Anurudda Wijesundara

Designation

Operation Manager

Telephone

077-7592457

Fax

-

E-mail

anurudda.w@rockland.lk

1.4. Legal status of the organization:

a) Registration authority: Registered Company

b) Registration number: PV9841 Date: 01/12/2008

1.5. VAT registration number: 104002323 - 7000

2. REQUESTED MANAGEMENT SYSTEM CERTIFICATION:

GMP;  HACCP;  ISO 22000: 2008;  ISO 9001: 2015;  ISO 14001: 2015;

OHSAS 45001: 2018;  ISO 50001: 2011



3. APPLICABLE LOCATION(S) FOR THE CERTIFICATION:

(Please indicate the permanent physical locations (subsidiaries, branches, warehouses etc.) registered under the Applicant (Organization) that are to be included in the certification. Attach a separate sheet for temporary locations (eg.: Construction Projects) (If required please attach a separate sheet)

Name & Address	Telephone/Fax/E-mail
Rockland Distilleries (Pvt) Ltd, 7E, Ovitamulla, Thotupola Road, Welgama, Thitta Pattara	0767795804 athila.nadeeshani@rockland.lk

4. DEPARTMENTS/DIVISIONS APPLICABLE AND NUMBER OF EMPLOYEES:

Departments/Divisions (eg.: Management, Design, Production, Quality Assurance, Human Resources, etc.)	Total Effective Number of Employees**				Number of employees working on each shift and time of shift		
	Full Time Employee	Part Time Employee	Casual Employee	Sub Contracted Employee	Shift 1 & time	Shift 2 & time	Shift 3 & time
Head Office:	NA						
Location 1 Rockland Distilleries Bottling Plant 7E, Ovitamulla, Thotupola Road, Welgama, Thittapattara	43			14			
Location 2	/						
Location 3	/						
Total	43			14			



[If required Please attach a separate sheet]

\*\* The effective number of employees shall include all employees within the scope of certification including seasonal and temporary employees on night shift. Non-permanent (seasonal, temporary and contracted employees) and part time employees who will be present at the time of the audit shall be included in this number.

5. LEGAL & OTHER OBLIGATIONS OF THE COMPANY

[Please indicate the legal obligations to be abide by the Applicant Organization] (eg: CEA regulations, CDDA regulations, industry specific regulations, compulsory product certifications etc.)

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6. CORE INFORMATION

6.1. System of the organization (ex. Quality Management System, Food Safety Management System, Environmental Management System, etc) is developed by: [outside consultant(s) and/or organization itself] If you used service from consultant mentioned the name of consultant.

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6.2. Type of certification [New Certification or Recertification] and required certification (Accredited certificate or Non Accredited certificate):

Note: Non Accredited certificates will be issued only for scope where Ind-expo does not process accreditation)

New certification & Accredited certificate

6.2.1 How long has the Management system been in place?

ISO 9001 - From 2018 August onwards

6.2.2 If Recertification;

- a) Date of first certification: .....
- b) Validity period of previous certification: .....
- c) Scope of previous certification: .....
- d) Major changes done in the Management System during the previous year [if any]: .....



6.3. Description of products manufactured and/or services offered/Nature of the Business:

Liquor and Hand sanitizer bottling & Blending

6.4. Markets Serving (at present): [ Local only, Local and International (note down the countries), International only (note down the countries)]

Local & Export Market

6.5. Description of manufacturing processes and/or services which has been outsourced to the external party:

Bottle washing & Logistic is outsourced.

6.6. Description of products manufactured and/or services offered which are to be excluded from the scope of the certification:

6.7. Desired scope of the certification:

Activities pertaining to alcohol based products & blending and manufacturing of hand sanitizer

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6.8. Reason for the certification:

Name: GMS, FSMS & EMS

6.9. Preferred language to conduct audit:

Sinhala

English

Tamil

7. DOCUMENTED INFORMATION

Please submit copies of the following documents along with the duly perfected Application.

7.1 HACCP

- a) Scope of the organization
- b) HACCP plans, Policies & Procedures for implementation

7.2 ISO 22000:2005

- a) Scope of the organization
- b) HACCP plans, Policies & Procedures for implementation
- c) Food Safety Policy and objectives

7.3 ISO 9001:2015

- a) Scope of the organization, and justification for applicability,
- b) Documented information to support the operation of processes of the organization,
- c) Quality Policy,
- d) Quality Objectives,
- e) Operational planning and control.
- f) Any other documented information (ex: Business plan, vision and mission, corporate strategies)

7.4 ISO 14001:2015

- a) Scope of the organization, and justification for any exclusion,
- b) Environmental Policy,
- c) Environmental Objectives,
- d) Operational planning and control.
- e) Environmental Aspect and Impact Evaluation

7.5 OHSAS 45001:2018

- a) Scope of the organization,
- b) OHSAS Policy,
- c) OHSAS Objectives,
- d) HIRA, Policies & procedures for implementation,
- e) Operational planning and control.

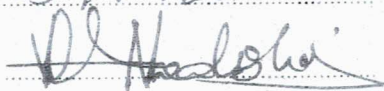


7.6 ISO 50001:2011

- a) Scope of the organization
- b) Energy policy, objectives, targets and energy management action plan
- c) Energy review, energy performance & energy performance indicators
- d) Operational control

8. DECLARATION BY APPLICANT

- 8.1 I /We have read and understood the Terms and Conditions for certification (IMSM/TCC/01) of Ind-Expo certification scheme.
- 8.2 Should any initial enquiry be made by the Certifying Authority, I/We agree to extend to the Certifying Authority all required facilities at my/our command and I/We agree to pay all costs involved prior to the grant of the Certificate.
- 8.3 I/We will not hold liable either the Ind-Expo Certification Ltd or those having a function in its activities for damages resulting from the consideration of the application for certification, including the possible rejection.

Date : 15/9/20  
Signature :   
Name : V.P.A. Nadeesham  
Designation : Quality Assurance Manager  
For and on behalf of Rockland Distilleries (Pvt) Ltd  
[Name of the Applicant Organization]