



BUREAU OF INDIAN STANDARDS  
MANAGEMENT SYSTEMS CERTIFICATION

FORM

**TITLE: MANAGEMENT SYSTEMS AUDIT REPORT [Certification/Recertification/Surveillance(I/II)]**

DOC: MSC-F6.4-04

ISSUE: 12

DATE: Feb 2023

PAGE 1 of 9

PREPARED BY : HEAD (MSCD)

APPROVED BY: DDG (MSC)

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CONFIDENTIAL (when filled)

0. Reference: Application Q,E,O No.App2024076726,App2024076728,App2024076729		0.2 Validity NA	
0.3 Name of the Organization		M/S GUJARAT POLLUTION CONTROL BOARD, RO VAPI	
0.4 Address (Pl. mention Pin Code, State, also)		C-5/124,NH NO08.GIDC-VAPI DIST VALSAD- GUJARAT-396195	
0.5 Address(es) of site(s) covered		Indicated at SI No 0.4 above	
0.6 Telephone & Email address.		ro-gpcb-vapi@gujarat.gov.in ; M-9099011681	
0.7 Name of the concerned Contact Person (with E-mail id)		SH Jay Patel,AEE & MR ro-gpcb-vapi@gujarat.gov.in	0.8 Telephone No. M-9099011681
0.9 Effective no. of personnel		35nos including contractor workers	0.10 No. of shifts G
0.11 Date (s) of Last Audit		09 Sep 2024; Stage I Audit by Sh Mahesh Chilakwad	0.12 Shift(s) selected General & night on 27.11.2024
0.13 Audit date(s)		26.27&28FN NOV2024	0.14 Duration (mandays/audit days) 5.0 mandays/2.5 Audit days
0.15 Technical Sector/Area		General public Administration Activities	
0.16 CPA Code(s) (up to 2)		84.11 & IAF36	
0.17 Working Language		English & Hindi	
0.18 Audit Criteria [Management System Standard, organization's documented information (Title, Issue No., Date, No. of Amendments, etc.)]		IMS APEX Manual GPCB/IMS/AM/VAP/01 Issue no 01 Date of Issue 01/01/2024; Procedure manual and Work Instructions. All related OCP's. And related records and documents maintained at site.& applicable legal requirements.	
0.19 Objectives & Scope of Audit (organizational and functional units or processes to be audited. For multi-site audit mention the actual sites being audited)		To verify compliance of implemented IMS to QMS,EMS &OHSMS stds (IS/ISO 9001:2015; IS/ISO14001:2015; IS/ISO 45001:2018) for consideration of certification Licence for the scope asked for.	
Date of report		28/11/2024	
Name of Team Leader		N.D. DESHMUKH	
Signature of Team Leader			
<p><b>MSCO WRO Sh Alok Singh MSCOW/DDGC</b> - in case audit is undertaken by MSCO(R)  <b>DDG(MSCD)/ADG</b> - Through MSCO(R) in case audit is undertaken by DDG(R)</p>			

Auditing Organization <b>Bureau of Indian Standards</b>	Auditee (Organization) M/S GUJARAT POLLUTION CONTROL BOARD-RO,VAPI DIST VALSAD-GUJARAT-396195
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Disclaimer: Auditing is based on a sampling of the available information

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**1. SUMMARY**

**1.1 Non-conformities** (Data on NCs raised against Clause/Sub-clause of standard(s) against which firm was audited)

NC	Minor				Major				Total
Clause of IS/ISO									
No. of NCs raised			Nil				Nil		Nil
No. of NCs cleared									
No. of NCs pending									

**1.2 Verification of actions taken by firm on nonconformities pending from surveillance/other audit (for recertification audit) and on pending points from Stage 1 audit (for certification audit)**

Date of NC/Points Raised	Clause of IS	Action taken	Current Status
NA			

**1.3 Verification of change from the existing licence in structure of licensee (example - change in name, address, management, merger, new sites covered, change of scope etc)NA**

**1.4 Non applicability of process(es), where applicable, sought by the firm and verification of justification by the Audit Team.-** Audit observation sheet also reflect the justifications and evidences related to the applicable processes .All clauses were applicable except Cl no 8.3 of IS/ISO9001:2015 & Justification addressed in Apex manual under cl 4.3 and is acceptable.

**1.5 Scope to be covered in the license document** (Attach letter from the organization for the scope sought with details of sites to be covered, duly countersigned by Team Leader. Ensure that the audit plan and observations cover the scope) : (Applicable for Certification/Recertification Audit)

Scope letter for QMS,EMS OHSMS given by the firm duly endorsed by TL is enclosed.

**1.6 Summary of audit process | Also specify the techniques & methodologies used|**The Renewal/Certification audit of QMS EMS & OHSMS as per relevant IS /ISO Standard(s) was carried out by physical visit at site. The Audit was carried out on sampling basis and following usual techniques of audit like interview with auditee, site visit and physical verification of documents and records. Everything was found normal and well in control. The auditee was found to be very cooperative. Questions related to activities carried out were also asked and it was found that concerned persons have understanding & knowledge about QMS, EMS & OHSMS. Brief audit report was handed over to the auditee during closing meeting.

**1.7 Observations on reliability of internal audit and effectiveness of management review**

Internal Audits done for QMS, ; EMS and OHSMS were done on 10/06/2024 and were found to be reliable and also MRM done on 18/06/2024 found to be effective.

**1.8 Review of past performance** (based on Continual Improvement, trends and evaluation of conformances and non-conformances observed during surveillance audits/follow-up audit/any other audit conducted since certification)/last recertification audit/System Performance).

Satisfactory

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**1.9 Whether audit objectives have been accomplished within audit scope in accordance with audit plan?**

Yes

Auditing Organization	Auditee (Organization)
Bureau of Indian Standards	M/S GUJARAT POLLUTION CONTROL BOARD-RO,VAPI DIST VALSAD-GUJARAT-396195





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- 1.10 Any areas not covered, although within the audit scope.-NONE
- 1.11 Any unresolved diverging opinions between audit team and auditee.  
*None* ✓
- 1.12 **Audit Findings** [including positive (noteworthy features) and opportunities for improvement].  
During the course of audit comprising of 5.0 Mandays for QMS, EMS& OHSMS, implementation, maintenance & continual improvements were noted by the audit team. The audit was carried out through site visit, interaction with auditees, and management as well as through evaluation of documented information. Audit was carried out on sampling basis. Implementation of EMS, QMS, OHSMS was found to be complying with the requirements and in place. Questions related to activities were also asked and it was found that same have been answered /covered wherever appropriate. It is found in general that the management system for EMS, QMS, OHSMS are well implemented and meet the requirements of IS/ISO14001:2015; IS/ISO 9001:2015;IS/ISO 45001:2018
- 1.13 Whether any uncertainty and/or any obstacle encountered that could decrease reliability of audit conclusions)?  
*None* ✓
- 1.14 Agreed follow-up action plans for verification of pending non-conformances, if any. NONE
- 1.15 Recommendations for follow-up audit (Refer - Also propose auditor(s),mandays required):  
*Not applicable*
- 1.16 Any disputes referred and complaints made to BIS against the licensee or appeal made by licensee to BIS. Verification of corrective actions taken by the licensee for its own processes with reference to complaint, dispute and appeal. -NIL
- 1.17 Verification of actions taken by the firm for changes in their structure/extension of scope/multiple locations (documents attached at Annex. ):NA
- 1.18 For Energy Management Systems (EnMS), scope and boundary of EnMS, evidence related to Energy performance (including Energy planning, energy review, operational controls, design, monitoring measurement and analysis, energy performance improvement etc. also, during Surveillance audit, implementation of actions for energy performance improvement to be demonstrated )-NA
- 1.19 For audit of Integrated Management System, level of integration\*: Complete.  
\*Level of integration is explained in MSC-G6.2-02 ✓
- 1.20 Audit conclusions and recommendations of audit team  
Audit team recommended for CERTIFICATION OF QMS, EMS & OHSMS License as per IS/ISO9001:2015; IS/ISO14001:2015 & IS/ISO 45001:2018 as per the Scope and Site declared by GPVB RO VAPI.

**2. AUDIT PLAN DATA**

**2.1 Composition of Audit Team**

Sl. No.	Name	Status in Team
01.	Sh N.D. Deshmukh	TEAM LEADER & EXPERT AUDITOR & EXPERT
02	Sh Mahesh D. Chilakwad	

**2.2 Audit Plan communication date to the Auditee: 17/11/2024**

**2.3 Change of Audit Plan, if any, and reasons: Nil**

**2.4 Audit preparation details, reference to checklist and sectoral guidelines, if any (record briefing of team)**

Auditing Organization	Auditee (Organization)
<b>Bureau of Indian Standards</b>	M/S GUJARAT POLLUTION CONTROL BOARD- RO,VAPI DIST VALSAD-GUJARAT-396195

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members by the expert about the technical aspects and applicable regulatory requirements. Also record identification of requirements to be audited by expert in Audit Plan Matrix by the expert):

The EMS, QMS, OHSMS documents were studied by the auditors. The applicable statutory and other legal requirements were discussed with MR & in the team. The audit Schedule was finalized with the help of auditors & Expert and MR. Audit check list was prepared by the auditors and audit plan matrix was finalised.

**2.5 Audit Plan Matrix** (Attach MSC-F6.4-09, duly filled-in with processes/departments specified, with identification of requirements to be audited with an expert) **Enclosed**

**3. Observation Sheet, Opportunity for improvement, Assessment of regulatory requirements and Expert's Report** (Attach MSC-F6.4-22, MSC-F6.2-10, and others as applicable) **Enclosed**

**4. Use of Standard Mark and Accreditation Mark** (Refer MSC-G-6.10-01) – Satisfactory/Not satisfactory (Details to be given if not satisfactory) **NA**

**5. AUDIT FEE & OTHER CHARGES** (Give details of audit, local travel & stay charges realized to be realized) **Audit charges fees under preparation and will be sent to BIS Mumbai soon**

**6. ANNEXURES**

		Page No
a)	Audit Plan	Enclosed
b)	Audit Matrix ( MSC-F6.4-09)	Enclosed
c)	Confidentiality report	Enclosed
d)	Letter for Scope of Certification, if applicable	Enclosed
e)	Report of action taken on previous audit findings, if any	NA
f)	Audit observations ( MSC-F6.4-22)	Enclosed
g)	Report of Expert, if applicable included Audit observation sheets	Enclosed
h)	Non-conformity Reports ( MSC-F6.4-14)	Nil
i)	Opportunity for Improvement (MSC-F6.2-10)	Nil
j)	Audit Report submitted to auditee ( MSC-F6.4-20)	Enclosed
k)	Audit Log Sheet ( MSC-F7.1-04)	Enclosed
l)	Performance evaluation reports, if applicable MSC-F7.4-01	Enclosed
m)	Participants of Opening and Closing meeting & Witness audit report	Enclosed

Name of Team Leader : N.D. Deshmukh  
Name of Lead Auditor, if any : -  
Design. & Deptt. /RO/BO : External Auditor

Date of Report : 28/11/2024 Signature of Team Leader

**Review of Audit Report**

Auditing Organization	Auditee (Organization)
Bureau of Indian Standards	M/S GUJARAT POLLUTION CONTROL BOARD-RO,VAPI DIST VALSAD-GUJARAT-396195

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**Propose Reviewer #:** It is proposed to get this report reviewed by \_\_\_\_\_, who is a qualified auditor for the Management System audited in this report.  
# Only in cases the report is not being reviewed by MSCO (R).

MSCO ( )

Approval by DDG ( )

Concerned Officer through Controlling Officer

Review by MSCO (R)/Any Other Officer:

Sl. No.	Subject/Content	Observation/Comment (If required attach separate sheets)
1	Whether all entries filled in the audit report form and all annexures attached	
2	Whether technical area and CPA code correctly indicated	
3	Audit scope adequately verified/covered during the audit (include comments on the evidences verified by the auditor(s) as indicated in the Observation sheets)	
4	Comment on the NCs/opportunity for improvements raised, if any	
5	Justification for Exclusion (if any) of particular clause(s) of the Management System Standard	
6	Reliability of Internal Audit	
7	Effectiveness of Management Review	
8	Was the audit plan communicated in advance and the date of audit plan agreement by Auditee.	
9	Comment on the quality of Observation sheets filled by the Auditor (s)	
10	Any major changes observed during the audit which were not informed prior to conduct of audit and its effect on the certification	
11	Audit fees received or not	
12	Audit conclusion and recommendations of the audit team consistent with audit findings	
13	Timely submission of report	
14	Any other aspect not covered above	
15	Conclusions of the review of audit report	
16	Performance valuation of auditors on their reporting filled up or not?	

Date:

Signature  
Name  
Designation

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Auditing Organization	Auditee (Organization)
Bureau of Indian Standards	M/S GUJARAT POLLUTION CONTROL BOARD- RO,VAPI DIST VALSAD-GUJARAT-396195

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**भारतीय मानक ब्यूरो**  
**BUREAU OF INDIAN STANDARDS**  
**MANAGEMENT SYSTEMS CERTIFICATION**

FORMS

TITLE: Audit Plan

DOC: MSC-F6.4-13

ISSUE: 06

DATE: Feb 2021

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Prepared By:

Approved By: DDG(MSCD)

202476726, 76728 & 76729

1. Ref: Application No: QEOAPP/~~2024~~2024, 2024 Validity NA
2. Name of the Applicant: M/s Gujarat pollution control board, RO, VAPI, C-5/124, NHNO08, GIDC- VAPI DIST VALSAD-GUJARAT-396195 (NOW NH48)
3. Technical Area: General Public Administration services
5. CPA Code(s): 84.11&IAF36
6. Objective of the Audit :  For Certification/ Re-certification/ Surveillance/ Special audit

Stage 1 Objectives:	X	Stage 2 objectives:
a) Review the client's management system documented information; b) evaluate the client's site-specific conditions and to undertake discussions with the client's personnel to determine the preparedness for stage 2; c) review the client's status and understanding regarding requirements of the standard, in particular with respect to the identification of key performance or significant aspects, processes, objectives and operation of the management system; d) obtain necessary information regarding the scope of the management system, including:— the client's site(s);— processes and equipment used;— levels of controls established (particularly in case of multisite clients);— applicable statutory and regulatory requirements; e) review the allocation of resources for stage 2 and agree the details of stage 2 with the client; f) provide a focus for planning stage 2 by gaining a sufficient understanding of the client's management system and site operations in the context of the management system standard or other normative document; g) evaluate if the internal audits and management reviews are being planned and performed, and that the level of implementation of the management system substantiates that the client is ready for stage 2.	a)	b) information and evidence about conformity to all requirements of the applicable management system standard or other normative documents; c) performance monitoring, measuring, reporting and reviewing against key performance objectives and targets (consistent with the expectations in the applicable management system standard or other normative document); d) the client's management system ability and its performance regarding meeting of applicable statutory, regulatory and contractual requirements; e) operational control of the client's processes; f) internal auditing and management review; g) management responsibility for the client's policies

7. Scope of the Audit :AS PER MSCOW LETTER OF INTIMATION FOR STAGE2CERTIFICATION AUDIT DATED 01oct2024.

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TITLE: Audit Plan

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Prepared By:

Approved By: DDG(MSCD)

8. Audit Criteria/Reference Documents

- IS/ISO9001-2015,IS/ISO14001-2015,IS/ISO45001-2018
- Policy, documents and statutory/regulatory requirements and records given below:
  - IMS APEX MANUALGPCB/IMS/AM/VAP/01 ISSUE NO 01 DT 1/1/2024 ,procedure ,SOP . Office Orders notification ,CPCB rules etc

9. Audit Team (Roles & Responsibilities of auditing personnel are given in MSC-G6.3-02). All auditors and experts have signed the confidentiality statement.

S. No	Name	Status
1	Sh N D DESHMUKH	TEAM LEADER&EXPERT
2	Sh MAHESH CHILKWAD	AUDITOR&EXPERT

10. Audit Methodology

- Physical observations including site observations,
- Interviews and discussions
- Document reviews,
- Direct measurements, if needed

11. Working and Reporting Language of Audit

English in general; some interviews may be carried out in Hindi/local language.

12. The audit will be carried out at a place convenient to auditee and the auditor mostly at the office of the auditee. If the audit requires visiting various parts of the site, the auditee is requested to extend all the required assistance. The audit plan given below provides a broad guideline; changes in the plan be effected by mutual agreement between the auditor(s) and the auditee. A brief audit report would be submitted by the Team Leader to auditee. The audit report will cover NCs raised, closed, pending, observations on conformity of the organization's management system with certification requirements and its effectiveness and conclusion/recommendation of the audit. Any audit follow-up actions will be discussed with the auditee during closing meeting. Guides/observers/consultants/persons other than auditee should not influence or interfere with the conduct of the audit.

13 Audit Schedule (include meetings with the auditee's management and audit team meetings): To be attached

A typical audit schedule is given below for guidance.

DATE 26,27&28 NOV 2024 AUDIT DAY - 2.5 MANDAYS (5.0)

Process/Department/Activity	Time	Auditor	Auditee
Opening Meeting	ENCLOSED		
Plant/Office Visit			
Process X, Y, etc			

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BUREAU OF INDIAN STANDARDS  
MANAGEMENT SYSTEMS CERTIFICATION

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TITLE: Audit Plan

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Prepared By:

Approved By: DDG(MSCD)

14 Audit Plan Matrix is enclosed for the reference of audit team members.

NOTES:

(For Team leader/Lead auditor)

- 1) An auditor day is typically a full normal working day of 8 hours out of which 7 hours should be spent on actual audit
- 2) Frequent auditors' meetings may be required & accordingly Team Leader may organize these meetings.
- 3) Team Leader to observe the performance of auditors/auditor-in-training/sub-contractors/experts spending half an hour for each of the team member during the audit. Similarly, lead auditor should observe the performance of the team leader (under training) spending half an hour during the audit. Accordingly, the audit plan should be prepared. The team leader/lead auditor shall mention the above in the audit plan preferably only in the copy of the audit plan to be submitted along with the audit report to BIS.
- 4) The tentative audit plan shall be communicated to auditee in advance with audit objectives, audit criteria, audit plan and audit team composition and the plan shall be agreed to before the audit. If any change in auditor takes place subsequently, it shall be informed to the auditee prior to audit dates. The nomenclature of departments/functions reported for, in the audit matrix shall be same as that given in the audit plan. Justification need to be given if for any change in nomenclature by clubbing/splitting of functions/processes/departments.
- 5) In the case of multi shift operations, EMS audit may be planned in other shifts too to verify controls. In the case of QMS, all processes for products/service realizations to be covered even when it is operated in shifts. In case only one shift is audited, which covers all processes their controls in other shifts and justification for not auditing other shifts to be suitably reported.
- 6) The audit plan shall include organization specific processes and products to be assessed.
- 7) The audit plan for OHSMS shall include activities, products and services within the organization's control or influence that can impact the organization's OH&SMS performance. Temporary sites, for example, construction sites, shall be covered by the OH&SMS of the organization that has control of these sites, irrespective of where they are located.

Signature of Team Leader  
Name: Sh N D Deshmukh

Date: 17/11/2024

26.11.2024

Signature of NODAL OFFICER&MR  
Name: JAY PATEL

AEE

Date: 17/11/2024

Regional Office  
Gujarat Pollution Control Board  
C5/124, NH No.8, Nr. Pritam Hotel,  
G.I.D.C., VAPI- 396 195.

(New NH 48)

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**Certification Audit Schedule**

(Audit schedule has been prepared taking into account all 3 applications  
i.e. for QMS, EMS & OHSMS)

Our Ref: QMS,EMS&OHSC/WR/A- 2024076726, 2024076728 & 2024076729

Auditee: Gujarat Pollution Control Board – Vapi Regional Office, Plot No C-5/124, NH  
No 08, GIDC, Vapi; Dist: Valsad, Gujarat 396195

Audit Standard:iS/ISO9001-2015.IS/ISO14001-2015&IS/ISO45001-2018

Auditing Body: Bureau of Indian Standards

Audit Dates: 26,27&28NOV2024

Audit Team:

- 1 SH N D  
DESHMUKH-  
TEAM LEADER  
(NDD)
- 2)SH MAHESH  
CHILAKWAD(MDC)

(A)

DATE 26/11/2024  
DAY 1

Time	Activity/Branch	Auditor	Auditee
1000 - 1030h	Opening meeting	NDD&MDC	As per enclosed list
1030-1100h	Quick visit of all branches including lab	---do---	
1100 - 1300h	MR (Q, E, O)	NDD	SH J S PATEL AEE
--do--	Admin branch (accounts, office related purchases, stores, legal compliances, security & safety) – Accounts, security, safety for EMS, OHSMS & other branches for all 3 systems	MDC	SH A B PATEL JO
1300 - 1400h	Lunch break		
1400 - 1730h	MR contd	NDD	SH J S PATEL
--do--	Admin branch (accounts, office related purchases, stores, legal compliances, security & safety) – Accounts, security, safety for EMS, OHSMS & others for all 3 systems - contd	NDD	SH A B PATEL

*[Handwritten signature]*  
12/9/24

*[Handwritten signature]*  
Regional Office  
Gujarat Pollution Control Board  
C-124, NH No.8, Nr. Pritam Hotel,  
G.I.D.C., VAPI- 396 195.

1730 - 1800h	Interaction with auditee regarding day's audit finding	NDD&MDC	ALL CONCERNED
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DATE 27/11/2024 Day 2:

Time	Activity/Branch	Auditor	Auditee
1000 - 1300h	Technical Branch (scrutiny of applications, visit to industries, monitoring the activities of industries by visits as per CPCB guidelines) – Q, E, O	NDD	SMT M B DESA
---do---	Scientific branch (lab activities – receiving of samples, testing of samples, visit and monitoring activities of industries, purchases related to lab, its stores, QC, Calib. Training records) - Q, E, O	MDC	SH C C PATEL
1300 – 1400h	Lunch break		
1400 - 1730h	Technical Branch (scrutiny of applications, visit to industries, monitoring the activities of industries by visits as per CPCB guidelines) – contd for Q, E, O	NDD	SMT M B DESA
--do--	Scientific branch (lab activities – receiving of samples, testing of samples, visit and monitoring activities of industries, purchases related to lab, its stores, QC, Training records) –contd for Q, E, O	MDC	SH C C PATEL
1730 - 1800h	Interaction with auditee regarding day's audit finding	NDD&MDC	ALL CONCERNED

Day 3: 28/11/2024 FN

Time	Activity/Branch	Auditor	Auditee
1000 – 1130h	Completion of pending audits	NDD&MDC	ALL CONCERNED
1130 - 1230h	Regional Officer i.e. Top Management alongwith MR	NDD&MDC	SH A G PATEL-RO
1230 - 1330h	Audit report preparation, closure of NC if any, interaction with auditee	NDD&MDC	ALL CONCERNED
1330- 1400h	Closing meeting	NDD&MDC	As per enclosed list

  
 Sh N D DESHMUKH  
 TEAM LEADER BIS  
 DATE 17/11/2024

26.11.24

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 SH JAYESH PATEL  
 AEE&MR, GPCB RO VAPI  
 DATE 17/11/2024

Regional Office  
 Gujarat Pollution Control Board  
 C/5/124, NH No.8, Nr. Pritam Hotel,  
 D.C., VAPI- 396 195.  
 (New NH 48)

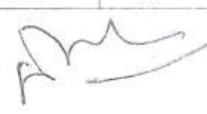


**AUDIT PLAN MATRIX FOR OHSMS**

Clause	AUDIT PLAN MATRIX		FUNCTION/PROCESS/ DEPARTMENT(S)							
	IS/ISO 45001: 2018 Occupational Health and Safety Management System Requirements	Sub Clause	A	B	C	D				
<b>4</b>	<b>Context of the Organization</b>									
	Understanding the organization and its context	4.1	X✓	✓	✓	✓				
	Understanding the needs and expectations of interested parties	4.2	X✓	✓	✓	✓				
	Determining the scope of OHSMS	4.3	X✓							
	OHSMS	4.4	X✓	X✓	X✓	X✓	X	X	X	X
<b>5</b>	<b>Leadership –</b>									
	Leadership and commitment	5.1	X✓							
	OHSMS Policy	5.2	X✓	X✓	X✓	X✓	X	X	X	X
	Organizational roles responsibility & Authority	5.3	X✓	X	X	X	X	X	X	X
	Consultation & Participation	5.4	X✓	X	X	X	X	X	X	X
<b>6</b>	<b>Planning</b>									
	Actions to address risks and opportunities	6.1	X✓	X✓	X✓	X✓	X	X	X	X
	General	6.1.1	X✓	X✓	X✓	X✓	X	X	X	X
	Hazard identification, assessment of risk & opportunity	6.1.2	X✓	X✓	X✓	X✓	X	X	X	X
	Determination of legal requirements & other requirements	6.1.3	X✓	X✓	X✓	X✓	X	X	X	X
	Planning action	6.1.4	X✓	X✓	X✓	X✓	X	X	X	X
	OHS objectives and planning to achieve them	6.2	X	X✓	X✓	X✓	X	X	X	X
<b>7</b>	<b>Support</b>									
	Resources	7.1	X✓	X✓	X✓	X✓	X	X	X	X
	Competence	7.2	X	X✓	X✓	X✓	X	X	X	X
	Awareness	7.3	X	X✓	X✓	X✓	X	X	X	X
	Communication	7.4	X✓	X✓	X✓	X✓	X	X	X	X
	Documented information-									
	General	7.5.1	X✓							
	Creating and updating	7.5.2	X✓							
	Control of documented information	7.5.3	X✓	X✓	X✓	X✓	X	X	X	X
<b>8</b>	<b>Operation</b>	8								
	Operational planning and control	8.1	✓	X✓	X✓	X✓	X	X	X	X
	General	8.1.1	✓	X✓	X	X	X	X	X	X
	Eliminating Hazards & reducing OH&S risks	8.1.2	✓	X✓	X	X	X	X	X	X
	Management of change	8.1.3	X✓	✓						
	Procurement	8.1.4	✓	✓		✓				
	Emergency Preparedness & Response	8.2	X✓	X✓	X✓	X✓	X	X	X	X
<b>9</b>	<b>Performance evaluation</b>									
	Monitoring, measurement, analysis and evaluation-General	9.1.1	X✓	✓		X		X	X	X
	Evaluation of Compliance	9.1.2	X✓	X✓	X	X	X	X	X	X
	Internal audit	9.2	X✓	X✓	X✓	X✓	X	X	X	X
	Management review	9.3	X✓							
<b>10</b>	<b>Improvement</b>	10	X							
	General	10.1	X✓	X✓	X✓	X✓	X	X	X	X
	Nonconformity and corrective action	10.2	X✓	X✓	X✓	X✓	X	X	X	X
	Continual improvement	10.3	X	X✓	X	X✓	X	X	X	X

<b>Auditing Organization</b> Bureau of Indian Standards	<b>Auditee (Organization)</b> M/S GUJRAT POLLUTION CONTROL BOARD RO VAPI OFFICE GUJARAT	Page 1 of 1	
Doc : MSC-F6.4-35	Issue No. 01	Date : Dec 2018	Approved by : DDG(MSCD)

A-TOP MANAGEMENT&MR B- TECHNICAL BRANCH  
C- SCINTIFIC BRANCH D – ADMINISTRATION/ACCOUNTS

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Clause	IS/ISO 14001: 2015	AUDIT PLAN MATRIX	Sub Clause					
	EMS REQUIREMENTS				Top Mgmts. & MR	TECH BRANCH	Store & Purchase & Admin Account	SCIENTIFIC BRANCH
4	<u>Context of the Organization</u>	Understanding the organization and its context Understanding the needs and expectations of interested parties Determining the scope of EMS Environmental Management System	4.1 4.2 4.3 4.4	✓✓✓ ✓✓✓ ✓✓✓ ✓✓	✓✓✓ ✓✓✓ ✓✓✓ ✓✓	✓✓✓ ✓✓✓ ✓✓✓ ✓✓	✓✓✓ ✓✓✓ ✓✓✓ ✓✓	
5	<u>Leadership</u>	Leadership and commitment Environmental policy Organizational roles, responsibilities and authorities	5.1 5.2 5.3	✓✓✓ ✓✓✓ ✓✓✓	✓✓✓ ✓✓✓ ✓✓✓	✓✓✓ ✓✓✓ ✓✓✓	✓✓✓ ✓✓✓ ✓✓✓	
6	<u>Planning</u>	Actions to address risks and opportunities -General Environmental Aspects Compliance Obligation Planning action <u>Environmental Objectives &amp; Planning to achieve them</u> Environmental Objectives Planning action to achieve Environmental Objectives	6.1.1 6.1.2 6.1.3 6.1.4 6.2 6.2.1 6.2.2	✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓	✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓	✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓	✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓	
7	<u>Support</u>	Resources Competence Awareness <u>Communication</u> General Internal Communication External Communication <u>Documented Information</u> General Creating and Updating Control of documented information	7.1 7.2 7.3 7.4 7.4.1 7.4.2 7.4.3 7.5 7.5.1 7.5.2 7.5.3	✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓	✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓	✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓	✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓	
8	<u>Operation</u>	Operational planning and control Emergency preparedness and response	8.1 8.2	✓✓✓ ✓✓✓	✓✓✓ ✓✓✓	✓✓✓ ✓✓✓	✓✓✓ ✓✓✓	
9	<u>Performance evaluation</u>	Monitoring, Measurement analysis & evaluation General Evaluation of compliance Analysis and evaluation <u>Internal audit</u> General Internal Audit Programme <u>Management review</u>	9.1 9.1.1 9.1.2 9.2 9.2.1 9.2.2 9.3	✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓	✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓	✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓	✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓	
10	<u>Improvement</u>	General Nonconformity and Corrective action Continual improvement	10 10.1 10.2 10.3	✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓	✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓	✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓	✓✓✓ ✓✓✓ ✓✓✓ ✓✓✓	
	Auditing Organization BIS			Auditee (Organization) M/s GPCB ROVAPI-GUJARAT				

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*[Handwritten signature]*



Clause	IS/ISO 9001: 2015	AUDIT PLAN MATRIX	Sub Clause	FUNCTION/PROCESS/ DEPARTMENT(S)							
				A	B	C	D				
		<b>QMS REQUIREMENTS</b>									
4	<b>Context of the Organization</b>										
	Understanding the organization and its context		4.1	✓✓✓	✓✓	✓✓	✓✓				
	Understanding the needs and expectations of interested parties		4.2	✓✓✓	✓✓	✓✓	✓✓				
	Determining the scope of QMS		4.3	✓✓✓	✓	✓✓	✓✓				
QMS and its processes		4.4	✓✓✓	✓	✓✓	✓✓					
5	<b>Leadership</b> -Leadership and commitment										
	General		5.1.1	✓✓							
Customer focus		5.1.2	✓✓								
<b>Policy</b>											
Establishing quality policy		5.2.1	✓✓	✓✓	✓✓	✓✓					
Communicating quality policy		5.2.2	✓✓	✓✓	✓✓	✓✓					
Organizational roles, responsibilities and authorities		5.3	✓✓	✓✓	✓✓	✓✓					
6	<b>Planning</b>										
	Actions to address risks and opportunities		6.1	✓✓	✓✓	✓✓	✓✓				
	Quality objectives and planning to achieve them		6.2	✓✓	✓✓	✓✓	✓✓				
Planning of changes		6.3	✓✓	✓✓	✓✓	✓✓					
7	<b>Support</b>										
	Resources -General		7.1.1	✓✓	✓✓	✓✓	✓✓				
	People		7.1.2	✓✓	✓✓	✓✓	✓✓				
	Infrastructure		7.1.3	✓✓	✓✓	✓✓	✓✓				
	Environment for the operation of processes		7.1.4	✓✓	✓✓	✓✓	✓✓				
	Monitoring and measuring resources		7.1.5	✓✓	✓✓	✓✓	✓✓				
	Organizational knowledge		7.1.6	✓✓	✓✓	✓✓	✓✓				
	<b>Competence</b>		7.2	✓✓	✓✓	✓✓	✓✓				
	<b>Awareness</b>		7.3	✓✓	✓✓	✓✓	✓✓				
	<b>Communication</b>		7.4	✓✓	✓✓	✓✓	✓✓				
	<b>Documented information</b> -										
	General		7.5.1	✓✓							
	Creating and updating		7.5.2	✓✓							
Control of documented information		7.5.3	✓✓	✓✓	✓✓	✓✓					
8	<b>Operation</b>										
	Operational planning and control		8.1	✓✓	✓✓	✓✓	✓✓				
	<b>Requirements for products and services</b>										
	Customer communication		8.2.1	✓✓	✓✓	✓✓	✓✓				
	Determining requirements of products and services		8.2.2	✓✓	✓✓	✓✓	✓✓				
	Review of requirements for products and services		8.2.3	✓✓	✓✓	✓✓	✓✓				
	Changes to requirements for products and services		8.2.4	✓✓	✓✓	✓✓	✓✓				
	<b>Design and development of products and services</b>										
	General		8.3.1	✓✓	✓✓	✓✓	✓✓				
	Design and development planning		8.3.2	✓✓	✓✓	✓✓	✓✓				
	Design and development inputs		8.3.3	✓✓	✓✓	✓✓	✓✓				
	Design and development controls		8.3.4	✓✓	✓✓	✓✓	✓✓				
	Design and development outputs		8.3.5	✓✓	✓✓	✓✓	✓✓				
	<b>Control of externally provided processes, products and services</b>										
	General		8.4.1	✓✓	✓✓	✓✓	✓✓				
	Type and extent of control		8.4.2	✓✓	✓✓	✓✓	✓✓				
	Information for external providers		8.4.3	✓✓	✓✓	✓✓	✓✓				
<b>Production and service provision</b>											
Control of production and service provision		8.5.1	✓✓	✓✓	✓✓	✓✓					
Identification and traceability		8.5.2	✓✓	✓✓	✓✓	✓✓					
Property belonging to Customer or external providers		8.5.3	✓✓	✓✓	✓✓	✓✓					
Preservation		8.5.4	✓✓	✓✓	✓✓	✓✓					
Post delivery activities		8.5.5	✓✓	✓✓	✓✓	✓✓					
Control of Changes		8.5.6	✓✓	✓✓	✓✓	✓✓					
<b>Release of products and services</b>		8.6	✓✓	✓✓	✓✓	✓✓					
<b>Control of nonconforming outputs</b>		8.7	✓✓	✓✓	✓✓	✓✓					
9	<b>Performance evaluation</b>										
	Monitoring, measurement, analysis and evaluation-General		9.1.1	✓✓	✓✓	✓✓	✓✓				
	Customer satisfaction		9.1.2	✓✓	✓✓	✓✓	✓✓				
	Analysis and evaluation		9.1.3	✓✓	✓✓	✓✓	✓✓				
	<b>Internal audit</b>		9.2	✓✓	✓✓	✓✓	✓✓				
<b>Management review</b>		9.3	✓✓	✓✓	✓✓	✓✓					
10	<b>Improvement</b>										
	general		10	✓✓	✓✓	✓✓	✓✓				
	Nonconformity and corrective action		10.1	✓✓	✓✓	✓✓	✓✓				
	Continual improvement		10.2	✓✓	✓✓	✓✓	✓✓				
		10.3	✓✓	✓✓	✓✓	✓✓					
Auditing Organization BIS			Auditee (Organization) M/S GPCB RO VAPI GUJARAT				Page		of		
DOC. MSG 6.4-29 ISSUE No. 01			DATE: OCT 2015 Page 1 of 1			Approved by: ADG					

A - TM & MR.  
 B - Admin  
 C - Tech. Pr.  
 D - Sci. & I

Approved by: ADG  
 [Signature]

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Regional Office : Vapi  
**GUJARAT POLLUTION CONTROL BOARD**

Plot No. C-5/124, N.H. No. 8, G.I.D.C., Vapi -396 195. Dist. Valsad. (Gujarat)  
Email : ro-gpcb-vapi@gujarat.gov.in • Website : www.gpcb.gov.in  
Tel.: (O) (0260) 2432089

Date: 26/11/2024

To,  
Sh Alok Singh,  
Sc E /Director, MSCO  
BIS, Mumbai.

Subject: Scope of QMS

Sir,  
This has reference to our application number WRO/QM/A-APP 202476726  
for Quality Management System as per IS/ISO 9001:2015.

We want to have following scope in our QMS certification licence:

**Scope of QMS (IS/ISO 9001:2015)**

\* "Enforcement/implementation of various environmental legislations issued by Govt. of India, National Green Tribunal, Ministry of Environment, Forest and Climate Change, orders of Higher Courts, Central Pollution Control Board, Gujarat Pollution Control Board- Head Office to prevent pollution in Vapi Jurisdiction of Gujarat Pollution Control Board, Regional Office-Vapi."

Not applicable requirement / Clause 8.3 - Design and Development of product and services.

\* Read by Anil & scale may be considered

*(Signature)*  
26/11/2024  
N D Desai  
TL

*(Signature)*  
(A. G. PATEL)  
REGIONAL OFFICER  
GPCB-VAPI  
14/32





**Regional Office : Vapi**  
**GUJARAT POLLUTION CONTROL BOARD**

Plot No. C-5/124, N.H. No. 8, G.I.D.C., Vapi -396 195. Dist. Valsad. (Gujarat)  
Email : ro-gpcb-vapi@gujarat.gov.in • Website : www.gpcb.gov.in  
Tel.: (O) (0260) 2432089

Date: 26/11/2024

To,  
Sh Alok Singh,  
Sc E/Director, MSCO  
BIS, Mumbai.

Subject: Scope of EMS

Sir,  
This has reference to our application number WRO/EM/A-APP 202476728 for Environmental Management System as per IS/ISO 14001:2015.

We want to have following scope in our EMS certification license:

**Scope of EMS (IS/ISO 14001-2015).**

\* "To Prevent & Control Pollution in all the activities carried out by Gujarat Pollution Control Board, Regional Office, Vapi as per applicable environment legislations."

\* Ready audit & scope may be covered

*[Signature]*  
26/11/2024  
(V D Sharma)  
TZ

*[Signature]*  
(A. G. Patel)  
REGIONAL OFFICER  
GPCB-VAPI  
15/20



**Regional Office : Vapi**  
**GUJARAT POLLUTION CONTROL BOARD**

Plot No. C-5/124, N.H. No. 8, G.I.D.C., Vapi -396 195. Dist. Valsad. (Gujarat)  
Email : ro-gpcb-vapi@gujarat.gov.in • Website : www.gpcb.gov.in  
Tel.: (O) (0260) 2432089

Date: 26/11/2024

To,  
Sh Alok Singh,  
Sc E/Director, MSCO  
BIS, Mumbai.

Subject: Scope of OHSMS

Sir,  
This has reference to our application number WRO/QM/A-APP 202476729 for Occupational Health and Safety Management System as per IS/ISO 45001:2018.

We want to have following scope in our OHSMS certification license:

**Scope of OHSMS (IS/ISO 45001:2018)**

\* "To provide safe & healthy workplace to employees, visitors & interested parties by preventing work related injuries & ill health in all the activities carried out by Gujarat Pollution Control Board, Regional Office-Vapi engaged in Protection of Environment by Preventing Pollution in the Jurisdiction of Gujarat Pollution Control Board, Regional Office-Vapi."

\* Read by Mr. A. G. Patel  
may be considered

(  
Alok Singh  
26/11/2024  
No. Alok Singh  
TR

*A. G. Patel*  
(A. G. PATEL)  
REGIONAL OFFICER  
GPCB-VAPI

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### CONFIDENTIALITY STATEMENT

(For BIS Auditor/Technical Expert and External Auditor/External Technical Expert)

1. APPLICATION NO. App2024076726, App2024076728, App2024076729
2. Name & Address of Organization: M/S GUJARAT POLLUTION CONTROL BOARD RO VAPI  
DIST VALSAD GUJARAT
3. Type of Audit: TPA (CERTIFICATION QMS & EMS & OHSMS)
4. Date(s): 26,27&28FN NOV2024
5. I accept to work as Auditor-in-training/ Auditor/Team Leader-in Training/**Team Leader/Lead** Auditor/Technical Expert for conducting Management System audit of above mentioned organization.
6. I declare that,
  - i) I have not acted as Consultant and/or undertaken internal audit or any other work for the above Organization within the last two years;
  - ii) I do not have any commercial interest in the above Organization.
  - iii) I do not have any relationship with the above Organization.
  - iv) I am presently working in MSCD activity of BIS/Ex BIS Auditor Organization. My actions will not lead to in any way threats to impartiality of BIS management system certification activity. My actions lead to threat of impartiality to BIS Management System Certification Activity (~~Strike out what is not applicable and fill the needed information~~).
7. I undertake that, I shall treat all the documentation and information provided by the organization audited as strictly confidential.
  - i) I shall neither copy any documentation nor divulge any information to any third party without the written prior consent of the organization assessed or Bureau of Indian Standards except as required by law or in demonstrating conformance with the requirements of national accreditation.
  - ii) I shall not act in any way prejudicial to the reputation or interest of Bureau of Indian Standards or the organization assessed.
  - iii) I shall not accept payment, commission, discount or any other profit from the organization assessed or from their representative or from any other interested person.
  - iv) In the event of any alleged breach of this undertaking, I know that BIS can blacklist me and also terminate the use of my services as auditing personnel after giving 15 days' notice.
  - v) In the event of any enquiry/investigation conducted due to unethical practice and breach of this undertaking, I shall fully cooperate with BIS.
  - vi) I undertake that I shall abide by undertaking given in my application for selection as External auditor/External Technical Expert of Bureau of Indian Standards Management Systems Certification.

Acceptance by MSCO WRO  
MSCO W (R)/DDGW MUMBAI

Signature  
Name : Sh N D DESHMUKH  
Date 26/11/2024

Auditor Registration no 10118546

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**CONFIDENTIALITY STATEMENT**

(For BIS Auditor/Technical Expert and External Auditor/External Technical Expert)

1. Application/Licence-No. WRO/QM/A-APP 202476726; WRO/EM/A-APP202476728; WRO/OH/A-APP202476729
2. Name & Address of Organization: GPCB RO Vapi, Gujarat  
To be audited
3. Type of Audit: Third party (IMS Initial, stage 2)
4. Date(s): 26, 27 & 28 (FN) Nov 2024
5. I accept to work as ~~Auditor-in-training/Auditor/Team Leader-in-Training/Team Leader/Lead Auditor/Technical Expert~~ for conducting Management System audit of above mentioned organization.
6. I declare that, 
  - i) I have not acted as Consultant and/or undertaken internal audit or any other work for the above Organization within the last two years;
  - ii) I do not have any commercial interest in the above Organization.
  - iii) I do not have any relationship with the above Organization.
  - iv) I am presently working in .....Ex BIS/..... Organization. My actions will not lead to in any way threats to impartiality of BIS management system certification activity. My actions lead to threat of impartiality to BIS Management System Certification Activity (~~Strike out what is not applicable and fill the needed information~~).
7. I undertake that, I shall treat all the documentation and information provided by the organization audited as strictly confidential.
  - i) I shall neither copy any documentation nor divulge any information to any third party without the written prior consent of the organization assessed or Bureau of Indian Standards except as required by law or in demonstrating conformance with the requirements of national accreditation.
  - ii) I shall not act in any way prejudicial to the reputation or interest of Bureau of Indian Standards or the organization assessed.
  - iii) I shall not accept payment, commission, discount or any other profit from the organization assessed or from their representative or from any other interested person.
  - iv) In the event of any alleged breach of this undertaking, I know that BIS can blacklist me and also terminate the use of my services as auditing personnel after giving 15 days' notice.
  - v) In the event of any enquiry/investigation conducted due to unethical practice and breach of this undertaking, I shall fully cooperate with BIS.
  - vi) I undertake that I shall abide by undertaking given in my application for selection as External auditor/External Technical Expert of Bureau of Indian Standards Management Systems Certification.

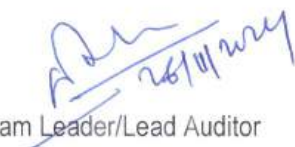
Signature :



Name

Date 26 Nov 2024 :

Acceptance by Team Leader/Lead Auditor  
MSCO(R)/DDGR









# भारतीय मानक ब्यूरो

## BUREAU OF INDIAN STANDARDS

MANAGEMENT SYSTEMS CERTIFICATION

FORMS

TITLE: Audit Observation and Evidence

DOC: MSC-F6.4-45

ISSUE: 01

DATE: April 2019

Page 1 of 4

Prepared By:

Approved By: DDG(MSCD)

Application NO APP2024076726,APP2024076728&2024076729

IS/ISO9001-2015,IS/ISO 14001:2015  
IS/ISO45001-2018

Process:

Management Process(TOP MGT & MR)

Date of Audit: 26,27&28NOV2024

Persons contacted with designation:  
Shri A G PATEL -SEE&RO  
SHRI JAY PATEL-AEE& MR&SMT  
HEENA-APM

Process ---- Observation & Evidence

### \*Process Observation:

#### Context of the organization

The organization determined its external & internal issues that affect its ability to achieve the intended results of its QMS & EMS. For example Internal issues are related to values, culture, knowledge etc  
External issues related to legal, technology up gradation, cultural, social and economic environments. The internal & external issues are monitored and reviewed from time to time.

The organization has determined:

- a) the interested parties that are relevant to the management system;
- b) the requirements of these interested parties.

Internal Interested parties: Management, Employees, HO, Laboratory: External Interested parties: Industries, GIDC Association, SEZ, CPCB, Supplier, Contractors, Service providers, MoEF, NGT etc.

The organization has determined and provided the resources needed for implementation, maintenance and continual improvement and provided the persons necessary for the effective implementation of its IMS and control of its processes. Infra structures a) Buildings and associated utilities; b) Equipments including hardware and software; c) Transportation resources; d) Information and communication technology have been provided

The internal and external communications relevant to the management system have been determined. Internal communication is done through notice board, verbal, telephone, meeting etc by departmental heads. External communication is done by all the departments' heads on behalf of top management. GPCB/IMS/CP/10 Procedure for Internal and External Communication

The organization's management system includes IMS Manual Document No. : GPCB/IMS/AM/VAP/01

Date: 01 Jan, 2024, ISSUE NO 01 Procedures, Work instructions and data sheet and retained documented information.

All documents are approved by Regional Officer. Distribution is controlled by MR. Manual & DP are distributed online and OCPs are maintained in hard copies. Documents of external origin like Factories Act, Indian Standards with latest amendments are maintained. GPCB/IMS/CP/VAP/02 Procedure for Control of Records

GPCB/IMS/CP/VAP/01 Procedure for Control of Documents

#### Performance Evaluation

Monitoring and measurement analysis and evaluation needed to ensure valid results have been established and appropriate documented information is retained as evidence of the results. The org has identified the relevant data eg customer satisfaction based on customer Feedback report.

Internal Audit planning is done and audit carried out as per planning & internal audit schedule. Internal audit carried out once in six months as per schedule. Last IA was carried out on 10/6/2024 for QMS&EMS& OHSMS done No NC observed. GPCB/IMS/CP/03 Procedure for Internal Audit

Management reviews are done ones in six months. Results of internal audits and evaluations of compliance with legal requirements including IMS performance of the organization and the extent to which objectives and targets have been met have been reviewed. Last MRM were done on 18/6/2024

### 2.\*\*Audit Evidences:

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1. IIMS Apex Manual GPCB/IIMS/AIMI/VAP//01 total 01 pages revision 01, revision date 01/01/2024 amendment Nil
2. Context of organization and external issue doc no. GPCB/IMS/CONTX/VAP/RO-01
3. Need and Expectation doc no. GPCB/IMS/NEIP/VAP/RO-06
4. IMS Policy dated 01/01/2018 page no. 25 of Apex Manual Doc no. GPCB/IMS/VAP/RO-03
5. Procedure for risk and opportunity assessment doc. No. GPCB/IMS/CP/16 and identification of aspect and impact identified in procedure no. GPCB/IMS/CP/08
6. Procedure for legal requirement doc. No. GPCB/IMS/CP/12 and legal register doc. No. GPCB/IMS/26/LR/04
7. Internal audit doc. No. GPCB/IMS/CP/03 and last internal audit carried out by RO on 10/6/24 and No NC raised during the internal audit by the team members. Communication letter from Unit Head ISO cell, Gandhinagar Shri R. V. Patel doc. Ref. ABD(City)/ISO/C-2554/18 dated 11.09.2024. Internal Audit plan doc. No. GPCB/IMS/F/VAP/03 for 2024-25 planed in JAN2025.
8. Objectives and target for department page no. 28 of 61 doc. No. GPCB/IMS/OBJ/VAP/R-12
9. Training Records for official/staff on page no. 38/39 and awareness training doc. No. GPCB/IMS/RO-04
10. Mock Drill conducted on 13/6/2024 at 1100AM doc. No. GPCB/IMS/CP/17/F-02 time and 4 kg fire extinguisher ABC typed used to cease the fire. Next refilling date for fire extinguisher displayed and verified from record is 13/6/2024, fire extinguisher displayed in office RO office and one near the visitor entrance and at admin department.
11. Management Review Meeting conducted by RO dated 18/6/2024 meeting no. 01 doc. No. GPCB/IMS/F/VAP/08 dated 01.01.2024 and outcome of Management Review Meeting is approved by RO, VAPI Office.

Monthly Progress Report for OCT2024 Communicated to Head quarter Gandhinagar vide E-mail dated 03/11/2024 and all the activities identified that is application received, CTE, CCA and complaint redressed within time norms defined by GPCB Board guidelines. Equipment used for measurement of ambient air calibrated from M/s. Environment Instruments pvt., Delhi (OEM).

- 13 Total number of man power in RO is 35no. including 20 no. of contract persons and organization chart, role and responsibilities clearly defined in IMS manual dated JAN2024.
- 14 Complaint doc. No. file Tech-5 (5) number of complaints pending from last month is NIL no. of complaint received in OCT2024 is Nil and number of complaints disposal NIL.  
Inward/Outward numbers are generated online and also customer feedback/help desk register is maintained ref. doc. No. GPCB/IMS/RO/05..
- 15 Procedure for Internal External Communication doc. No. GPCB/IMS/CP/10 and improvement and procedure for Corrective Action/PA doc no. 04 and 05 and improvement addressed in QP/4.10
- 16 HIRA identified as fall of acid/chemicals & glass bottle slipping in Laboratory and controlled by OCP/WI/SI Etc
- 17 Night shift at VAPI RO city visited with GPCB AE on 27<sup>TH</sup> NOV 2024 & working found to be satisfactory
- 18 In GPCB VAPI office 4 visitors were interviewed for obtaining the feedback on services provided by this office and both the clients informed that services provided by GPCB VAPI Office is satisfactory.

Audit of all the clauses mentioned in the audit plan matrix have been carried out.  Yes/No

Opportunities for Improvement indicated against Clause No(s) NIL

Non-Conformities Issued against Clause No(s) NA

Name of Applicant / Licensee : Gujarat Pollution Control Board, VAPI Regional office Gujarat

Signature Of Auditor  
N D DESHMUKH

\* Identification of processes may include identification of key performance parameters/ significant aspects; Identification of objectives; Compliance to Legal and statutory requirements, etc. Use separate sheet for separate process. One department may have many processes.

\*\* Evidences clearly state the samples, records of process output verified and witness of activity with verifiable proof

20/20





# भारतीय मानक ब्यूरो

## BUREAU OF INDIAN STANDARDS

MANAGEMENT SYSTEMS CERTIFICATION

FORMS

TITLE: Audit Observation and Evidence

DOC: MSC-F6.4-45

ISSUE: 01

DATE: April 2019

Page 1 of 4

Prepared By:

Approved By: DDG(MSCD)

Application NO APP2024076726,APP2024076728&2024076729

IS/ISO9001-2015,IS/ISO 14001:2015  
IS/ISO45001-2018

Process:  
TECHNICAL BRANCH(Q E O)

Date of Audit: 26,27&28NOV2024

Persons contacted with designation:  
SMT M B DESAI -AEE&DMR  
SHRI JAY PATEL -AEE& MR&SMT  
HEENA-APM

Process ---- Observation & Evidence

**\*Process Observation:**

Context of the organization

The organization determined its external & internal issues that affect its ability to achieve the intended results of its QMS & EMS. For example Internal issues are related to values, culture, knowledge etc

External issues related to legal, technology up gradation, cultural, social and economic environments. The internal & external issues are monitored and reviewed from time to time.

The organization has determined:

- the interested parties that are relevant to the management system;
- the requirements of these interested parties.

Internal Interested parties: Management, Employees, HO, Laboratory: External Interested parties: Industries, GIDC Association, SEZ, CPCB, Supplier, Contractors, Service providers, MoEF, NGT etc.

The organization has determined and provided the resources needed for implementation, maintenance and continual improvement and provided the persons necessary for the effective implementation of its IMS and control of its processes. Infra structures a) Buildings and associated utilities; b) Equipments including hardware and software; c) Transportation resources; d) Information and communication technology have been provided

The internal and external communications relevant to the management system have been determined. Internal communication is done through notice board, verbal, telephone, meeting etc by departmental heads. External communication is done by all the departments' heads on behalf of top management. GPCB/IMS/CP/10 Procedure for Internal and External Communication

The organization's management system includes IMS Manual Document No. : GPCB/IMS/AM/VAP/01

Date: 01 Jan, 2024, ISSUE NO 01 Procedures, Work instructions and data sheet and retained documented information.

All documents are approved by Regional Officer. Distribution is controlled by MR. Manual & DP are distributed online and OCPs are maintained in hard copies. Documents of external origin like Factories Act, Indian Standards with latest amendments are maintained. GPCB/IMS/CP/VAP/02 Procedure for Control of Records

GPCB/IMS/CP/VAP/01 Procedure for Control of Documents

Performance Evaluation

Monitoring and measurement analysis and evaluation needed to ensure valid results have been established and appropriate documented information is retained as evidence of the results. The org has identified the relevant data eg customer satisfaction based on customer Feedback report.

Internal Audit planning is done and audit carried out as per planning & internal audit schedule. Internal audit carried out once in six months as per schedule. Last IA was carried out on 10/6/2024 for QMS&EMS& OHSMS done No NC observed. GPCB/IMS/CP/03 Procedure for Internal Audit

Management reviews are done ones in six months. Results of internal audits and evaluations of compliance with legal requirements including IMS performance of the organization and the extent to which objectives and targets have been met have been reviewed. Last MRM were done on 18/6/2024

2.

21/20



1 One internal audit for QMS, EMS and OHSMS conducted by Navsar RO office on 10th June 2024 and no NCs/OFI raised and pending as on the day of BIS audit .

2 MRM conducted under the chairmanship of RO Sri A.B Patel HOD Regional Officer on 18th June 2024 and about 20 officer/ staff attended the MRM Meeting .

Agenda was also circulated in advance to all concern staff and officers dated 11th June 2024 and minutes of meeting are also put up to RO/Chairman of MRM as chairman of the MRM and approved on 18th June 2024 and MRm output decisions are being noted and implemented by the GPCB VAPI Division.3As per online information of industries under Red,orange,green etc all visits as per CPCB guidelines are conducted and data is available on XGN Portal..

4As per the data/input available on 26 November 2024 and XGN Portal the rating of Regional office Vapi is reported as rank 16 numbers out of 27 RO.and as found evidence on the website online and score industry as 2776 and score point as 205.

5All inspection with RO Vapi are planned in advance are available and including Date of renewal and visit sample drawn during the visit by GPCB Vapi officer to the industry

6As per the information found on CPGRAM Portal and GPCB Vapi monthly report on operational performance dated 26 November 2024 reported as NIL for all the offices and DAGPG and the complaint reported as NId under the CP gram and verified with the complaint register/ CP gram register

7One file of client authorization for Biomedical Waste authorization that is BMW /rule number 10 of EPA1986 M./S Preity dental clinic parodl BMW id-411648,INWARD NO 10088 dated 30thSep 2024 and Inspection Report visit dated 7th October 2024 and outward number 53108 detail 16 th October 2024 from hard copies of inward/outward register maintained by Admin/dept.

8 one file of client belonging to Ewaste rule 2016 under EPA Act 1986 CC&A and a New number 197391 dated 23rd June 2023 M/S Liberty recycling Works AWH/15092 ID 76247 and valid up to 22nd July 2026& report dated 11/6/2024.9ONE MOCKDRILL conducted date of mock drill 13 June 2024 location parking area of Vapi GPCB RO office fire at 11:00 a.m. and reported ceased within 5 minutes and safety officer Shri Vivek office incharge and DEE were present as safety officer and approximately 27 persons present in the office participated and attended the mock drill and the reported mock drill performance of the emergency preparedness as satisfactory and the availability of Fire extinguisher FEX at various location particularly near the entrance of the parking is reported as satisfactory from the conducted on 13th June 2024 .10 Medical checkup of all persons working in RO GPCB office done on 21st February 2024@ and reported as M/S Sahara Sahara clinic lab and reported as satisfactory & Rotary Hospital done up to and the hospital is also under CCA and the validity is up to 12July 2026 .

11One ONSITE Emergency plan EMP prepared numberGPCB/ IMS/BR/ standard /18 and all important phone numbers like Ambulance fire brigade police fire etc at the entrance of the office of GPCB VAPI

12All IMS documentation information prepared document number DP Procedures/WI/SOP and total 13 are identified and as technical branch/Scientific BR admin reported as NIL&Aspect/impactdeptwise.

13Aspect and impact are identified for all departments included in the scope and wide document number and reviewed each year 14/GPCB/IMS/AAI/ 14 dated first January 2024 and the documents are available/kept in the safe custody in the lock and key of the Concern person MR that is Shri JaY Patel MR and ISO coordinator appointed by top management.

Audit of all the clauses mentioned in the audit plan matrix have been carried out. <span style="float: right;">Yes/No</span>	
Opportunities for Improvement indicated against Clause No(s) <u>NIL</u> <input checked="" type="checkbox"/>	Non-Conformities Issued against Clause No(s) <u>NA</u> <input checked="" type="checkbox"/>
Name of Applicant / Licensee : Gujarat Pollution Control Board, VAPI Regional office Gujarat	Signature Of Auditor N D DESHMUKH

22/20





भारतीय मानक ब्यूरो  
BUREAU OF INDIAN STANDARDS

FORMS

MANAGEMENT SYSTEMS CERTIFICATION

TITLE: Audit Observation and Evidence

DOC:MSC-F6.4-45


ISSUE: 01

DATE: April 2019

Page1 of 1

Prepared By:

Approved By :DDG(MSCD)

Application No /Licence-Number: WRO/QM/A – APP 202476726; WRO/EM/A – APP 202476728; WRO/OH/A – APP 202476729		IS/ISO 9001:2015; IS/ISO 14001:2015; IS/ISO 45001:2018	
Process: Admin branch (Accounts, office related purchases, stores, legal compliances, security & safety) Accounts, safety & security for E & O; Others for Q,E,O		Date of Audit: 26 Nov 2024	
		Persons contacted with designation: Mr Ashok Patel, Junior Officer	
<p>1. Process—Observation &amp; Evidence: As mentioned above</p> <p>2. Doc Review: GPCB IMS Apex Manual; Issue no 01; Rev 00 dated 01.01.2024; Doc No: GPCB/IMS/AM/VAP/01. List of control procedures containing CP -01 to CP-37 found established in addition to Quality Manual and procedures for NABL as per ISO/IEC 17025:2017. Formats – F-01 to F-26 for various activities found established.</p> <p>3. A. Legal compliance – GPCB Vapi has 03 TATA SUMO jeeps which are used for executing their duties/activities. The jeep numbers are GJ 18 GB 0029, 0126 &amp; 0460. All 03 jeeps were having RC No as GJ 18 GB 0029, 0126 &amp; 0460 dated 21.12.2017. All the 03 jeeps were insured through New India Assurance Co vide policy numbers 23090431230100000 801, 802 &amp; 803 valid upto 13.12.2024. PUC of all the jeeps was valid upto 04.09.2025.</p> <p>4. B. Stores – The store was common to Lab &amp; office items. Visited the stores. It was observed that all the materials including chemicals, glasswares, stationery etc were properly kept in well identified racks, well lit. Registers were maintained for different materials like chemicals, glasswares, stationery etc (inventory). The registers contained details like dt of receipt, material name, bill, challan no, PO date, quantity received, quantity issued and balance stock. For the purpose of issuing materials, issue slip was issued. Saw the registers as well as issue slips for 15.11.24.</p> <p>5. C. Purchase – Item: A4 Size 75GSM printing papers , qty 100 packs. These papers were purchased through GeM portal. Approval for purchase was taken from RO 20.08.2024 (RO's power upto Rs 1,00,000.000). After entering this data in GeM portal, GeM portal system itself shows lowest supplier's rates alongwith supplier's evaluation rating. Once it is accepted in system, then supplier name appears and generates purchase/contract order. In this case Order no was GEMC 511687786296694 dt 23.08.2024 on Office Solutions, Daman. The invoice recd mentioned spec as JK Copier paper A4 75 gsm. The material was recd on 29.08.24. Same day certificate of quality, good supply as mentioned in GFR 2017 was prepared in a stamp paper and it was stamped at the back of invoice and signed by stoer/admin person &amp; RO.</p> <p>6. Security &amp; safety – 03 security personnel were deployed. All these were contract people and contract was entered into with Gujarat Industrial security force society Ahmedabad by their HO and security personnel were deployed. The security personnel maintained 02 registers – one for entry of visitors and other for receipt of samples. All three security personnel were found trained in operation of fire extinguishers as well as fire alarm installed.</p> <p>7. QMS, EMS &amp; OHS objectives – found established : GPCB/OAP/VAP/12 &amp; 15 (10 nos for QMS, 02 nos for EMS; 15 nos for OHS ANNEX 13. Found achieved. Verified records of the same.</p> <p>8. For QMS, risk register GPCB/IMS/RR/VAP/16 was established covering 15 risks &amp; its action plan.</p> <p>9. For EMS, Aspect-impact record GPCB/IMS/AIR/VAP/14 was established and 14 aspects were found addressed.</p> <p>10. For OHSMS, HIRA was found established GPCB/IMS/HIRA/VAP/13 &amp; covered 15 hazards.</p> <p>11. A list of fire extinguishers was available. There in total 13 nos of diff types and capacities. All were recently filled and has validity in vogue. All 32 people in the office were given training. Saw the training record maintained. Fire mock drill (GPCB/IMS/MDC/VAP/17) was conducted on yearly basis. Last was on 13.06.2024. Time of fire was noted as 1105h, fire alarm was set immediately and the fire was put off and everything was cleared by 1118h. Thus response time was only 13 minutes and head cont was also mentioned (27 people). Fire fighting training was given to 34 people by Pratibha Fire Services on 07.10.2024.</p> <p>12. Emergency preparedness plan found established and displayed at all important locations on ground, first floor (GPCB/IMS/OEP/VAP/18)</p> <p>13. First aid box with scheduled medicine was available alongwith medicine names, their expiry date and names of trained people. Exit signages, important phone numbers found displayed. For the purpose of OHS, they had entered into an agreement with HARIA hospital for medical check up, treatment etc which hardly 15 minutes away from GPCB Office.</p> <p>14. Safety committee found established consisting of equal representation of managerial (officers) and non managerial (staff). Last safety committee meeting was held on 28.08.2024 which discussed 5 safety related points. Action taken on it was reflected in subsequent meeting.</p> <p>15. IMS policy found displayed at main entrance and awareness was there among people.</p>			
Audit of all the clauses mentioned in the audit plan have been carried out.			Yes/No
Opportunities for improvement indicated against Clause No(s): NIL		Non-Conformities Issued against Clause No(s): NIL	
Name of Applicant/Licensee: GPCB RO Vapi		 Signature Of Auditor	

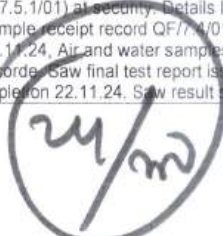


\*Identification of processes may include identification of key performance parameters /significant aspects; Identification of objectives; Compliance to Legal and statutory requirements, etc. Use separate sheet for separate process. One department may have many processes.


\*\*Evidences clearly state the samples, records of process output verified and witness of activity with verifiable proof.

 <b>भारतीय मानक ब्यूरो</b> <b>BUREAU OF INDIAN STANDARDS</b> <b>MANAGEMENT SYSTEMS CERTIFICATION</b>		FORMS
TITLE: Audit Observation and Evidence		
DOC:MSC-F6.4-45	ISSUE: 01	DATE: April 2019
Prepared By:		Approved By :DDG(MSCD)
Page 1 of 1		

Application No /Licence Number: WRO/QM/A – APP 202476726; WRO/EM/A – APP 202476728; WRO/OH/A – APP 202476729	IS/ISO 9001:2015; IS/ISO 14001:2015; IS/ISO 45001:2018
Process: Scientific Branch (lab activities – receiving of water, waste water, hazardous waste, testing of the same, purchase of lab related materials, its store, calibration of instruments, training records and visits & monitoring activities of industries alongwith tech branch)	Date of Audit: 27 Nov 2024 Persons contacted with designation: Mr C C Patel; Mr T N Rana; Mr L V Brambhath
<ol style="list-style-type: none"> <li>Process—Observation &amp; Evidence: As mentioned above</li> <li>Doc Review: GPCB IMS Apex Manual; Issue no 01; Rev 00 dated 01.01.2024; Doc No: GPCB/IMS/AM/VAP/01. List of control procedures containing CP -01 to CP-37 found established in addition to Quality Manual and procedures for NABL as per ISO/IEC 17025:2017. Formats – F-01 to F-26 for various activities found established.</li> <li>A. General – The lab has NABL accreditation vide TC no 13527 &amp; covers 58 parameters. NABL accreditation is valid upto 09.04.2026. For this lab has established Quality Manual Issue no 02 ; Rev 00 dt 02.09.2024 (QM/01).</li> <li>Purchases – As per Quality Manual of Lab, cl 6.6 is for purchase and the lab has established procedure for the same vide ref QP/09/6.6. The lab has prepared a list of items/materials to be purchased and it is prepared in July every year giving requirements projection for subsequent financial year. RO has power of Rs 1,00,000.00. Evidence seen – 1. Purchase item verification record – QF/6.6.6/02 seen which is prepared after receipt of item &amp; its verification. Saw the record dated 15.12.2023. 2. Record of critical consumables QF/6.6.2/02. Saw record for Aug 2024. Performance assessment of vendors – QF/6.6.6/03. This form is used for non GeM purchases.</li> <li>Demand is received in system XPN. Demand for Boric acide AR grade (1 unit of 500g) and sodium acetate (1 unit of 500g) dated 23.11.23. This item was not available on GeM and hence non availability certificate was downloaded from system. Then this requirement was communicated to 03 suppliers on letterhead as per GFR 2017 dt 12.12.23. (Bhakti Enterprises Vapi, Dynamic Chemicals Vapi &amp; Jyotsna Traders Sarigam). Quotations from these 03 suppliers were received on 28.12.23 &amp; 29.12.23) Technical specification and quantity was properly mentioned. Comparative statement was found prepared and the purchase committee constituted recommended the supplier M/s Bhakti Enterprises being lowest and also meeting tech requirement. PO was raised on 24.01.2024 vide no GPCB/VAPI/LAB-37/7899. Above 02 items alongwith 25 others was received on 14.03.24. Quality certificate was affixed using rubber stamp as mentioned in GFR 2017 and signed by SO &amp; RO. After acceptance of the items, it was entered in stock register R/VAP/STORE/03 (For NABL RECORD NUMBER WAS qf/4 13/33). Vendor evaluation sheet QF/6.6/02 &amp; Vendor registration QF/6.6/01 were used. Saw these for Qsure Techno Trade Narol who supplied chemical. For evaluation, quality, delivery, response, service parameters were used. In this case evaluation was 98%. Vendor list was established QF/6.6/03).</li> <li>Purchase through GeM portal – Calcium chloride (1 unit of 500g). Demand was dated 25.10.23 and RO approval for purchase was on 26.10.23. GeM order no 511687717772961 dt 08.12.23. Supplier was Office solution, Daman, Received on 15.12.23. Quality certificate was prepared on 15.12.23. Then entry was made in stock register. The materials were issued against issue slip.</li> <li>B. Stores – The store was common to Lab &amp; office items. Visited the stores. It was observed that all the materials including chemicals, glasswares, stationery etc were properly kept in well identified racks, well lit. Registers were maintained for different materials like chemicals, glasswares, stationery etc (inventory). The registers contained details like dt of receipt, material name, bill, challan no, PO date, quantity received, quantity issued and balance stock. For the purpose of issuing materials, issue slip was issued. Saw the registers as well as issue slips for 15.11.24.</li> <li>C. Calibration – Calib plan QF/6.4/02 was established. Total 61 instruments were listed and all were calibrated from outside lab having NABL accreditation. Example seen – Electronic balance Mettler Toledo make ML 20 model, 0 to 220g capacity, 0.0001g resolution. Lab ID was GPCB/VAPI/INST-117 (2). It was calibrated by Fine tune calibrator &amp; instrumentation Silvassa NABL accredited CC-2699 vide cert no F-24000023711; Hof air oven Melfa make (Fortech) 0-250C, PT 100, Resolution 1C, Lab ID GPCB/VAPI/INST-103(1) . It was calibrated by above agency vide cert no F-24000023722 dt 25.10.24. Acceptance criteria was mentioned as +/-2.5C; QF/6.4/05 (100.5 to 105.5C). Procedure for calib QP/07/6.4 Issue 2 dt 06.09.24 found established.</li> <li>D. Training record – Saw training records of Mr C C Patel who underwent training of LQMS during 04-05 July 2020. Tejal Rana who underwent 02 days training on ambient air monitoring conducted by RO Gpcb Baroda during 16-17 Oct 2020. In-house training on ambient air monitoring was conducted by Aditya Environ during 28.03.23 for 03 hrs which was attended by 11 people. Evaluation of effectiveness was found done using QF/6.2/01.</li> <li>Visit and monitoring industrial activities – Saw record in software for Aug 24. In these vists, Scientific officers draw samples for testing (water, waste water &amp; hazardous waste). Monitoring data contains name of the industry visited, ID, Category, Address, Insp ID Type, Insp date, visiting team.</li> <li>E. Lab activity – Test item entry register QF-15 (QF/7.5.1/01) at security. Details like sl no, sample record, barcode, name of person, sample no, sign. Saw record at sl no 399 to 423. Sample receipt record QF/7.4/01. Saw record of sample collected on 14.11.24, sample team was KRM &amp; DVC, Sample submission date 16.11.24. Air and water samples were collected. Inward nos 65900 &amp; 65901. Saw raw data register where actual results of testing were recorded. Saw final test report issued in the case of Vardhan Inds Sarigam, Sample tested was stack prcess. Sample ID 460897; Analysis completion 22.11.24. Saw result signed by lab head as is 11255 Pt 6.</li> </ol>	M





<p>12. QMS, EMS &amp; OHS objectives – found established. GPCB/OAP/VAP/12 &amp; 15 (10 nos for QMS, 02 nos for EMS, 15 nos for OHS ANNEX 13. Found achieved. Verified records of the same.</p> <p>13. For QMS, risk register GPCB/IMS/RR/VAP/16 was established covering 15 risks &amp; its action plan.</p> <p>14. For EMS, Aspect-impact record GPCB/IMS/AIR/VAP/14 was established and 14 aspects were found addressed.</p> <p>15. For OHSMS, HIRA was found established GPCB/IMS/HIRA/VAP/13 &amp; covered 15 hazards.</p> <p>16. A list of fire extinguishers was available. There in total 13 nos of diff types and capacities. All were recently filled and has validity in vogue. All 32 people in the office were given training. Saw the training record maintained. Fire mock drill (GPCB/IMS/MDC/VAP/17) was conducted on yearly basis. Last was on 13.06.2024. Time of fire was noted as 1105h, fire alarm was set immediately and the fire was put off and everything was cleared by 1118h. Thus response time was only 13 minutes and head cont was also mentioned (27 people). Fire fighting training was given to 34 people by Pratibha Fire Services on 07.10.2024.</p> <p>17. Emergency preparedness plan found established and displayed at all important locations on ground, first floor (GPCB/IMS/OEP/VAP/18)</p> <p>18. First aid box with scheduled medicine was available alongwith medicine names, their expiry date and names of trained people. Exit signages, important phone numbers found displayed. For the purpose of OHS, they had entered into an agreement with HARIA hospital for medical check up, treatment etc which hardly 15 minutes away from GPCB Office.</p> <p>19. Safety committee found established consisting of equal representation of managerial (officers) and non managerial (staff). Last safety committee meeting was held on 28.08.2024 which discussed 5 safety related points. Action taken on it was reflected in subsequent meeting.</p>		
<p>Audit of all the clauses mentioned in the audit plan matrix have been carried out.</p>		<p>Yes/No</p>
<p>Opportunities for Improvement indicated against Clause No(s): NIL</p>	<p>Non-Conformities Issued against Clause No(s): NIL</p>	
<p>Name of Applicant/Licensee: GPCB RO Vapi</p>	<p> Signature Of Auditor</p>	
<p><i>*Identification of processes may include identification of key performance parameters /significant aspects; Identification of objectives; Compliance to Legal and statutory requirements, etc. Use separate sheet for separate process. One department may have many processes.</i></p> <p><i>**Evidences clearly state the samples ,records of process output verified and witness of activity with verifiable proof.</i></p>		





# भारतीय मानक ब्यूरो BUREAU OF INDIAN STANDARDS

FORMS

## MANAGEMENT SYSTEMS CERTIFICATION

TITLE: Brief Audit Report (Initial/Renewal/Surveillance/Special Audit)

SC: MSC-F6.4-44

ISSUE: 01

DATE: April 2019

Page 1 of 1

Prepared By:

Approved By: DDG(MSCD)

1	Reference	Application No.QMS,EMS&OHSMS App2024076726,,App2024076728,App2024076729
2	Name of the Organization	M/S M/S GUJARAT POLLUTION CONTROL BOARD,RO VAPI
3	Address	C-5/124 GIDC- NH NO8 VAPI DIST VALSAD ,GUJARAT- 392195 (New NH 48)
4	Type of audit	TPA CERTIFICATION Audit of QMS &EMS &OHSMS
5	IS/ISO	IS/ISO9001:2015; IS/ISO14001:2015;IS/ISO45001:2018
6	Date(s) of audit	26,27&28FN NOVEMBER 2024
7	No. of NCs raised	Major : Nil Minor : Nil No. of NCs pending : Nil (Pl see Appendix-I):
8	Concerns raised	Nil
9	Observation (report of conformity of the organization's management system with certification/registration requirements and effectiveness of the management system)	Based on the Audit carried out as per audit plan & schedule with respect to the requirements of the IS/ISO 9001:2015; IS/ISO 14001:2015 & IS/ISO 45001:2018, it is found that the organization's management System is in conformity with the requirements of the above standards and found to have been effectively implemented to achieve the policy and objectives.
10	Conclusion/recommendation of the audit	Audit Team recommends for CERTIFICATION of QMS IS/ISO 9001:2015 ; EMS IS/ISO 14001:2015 & OHSMS IS/ISO 45001:2018 for the scope and site declared by the GPCB RO VAPI.

(To be submitted to MR/CEO)

You are requested to give your comment, if any, on the above report and the findings of the audit within 7 days to MSCO(E).

Root Cause Analysis to be carried out and corrective actions taken shall be informed, to MSCO (C) BIS N DELHI within 30 days.

Please also give your comments on the performance of the auditor(s).

Signature(s)

Shri N D Deshmukh Team Leader

Date: 28/11/2024

TO- SH JAY PATEL, MR -GPCB RO VAPI GUJARAT-392195

Regional Office  
Gujarat Pollution Control Board  
C5/124, NH No.8, Nr. Pritam Hotel,  
G.I.D.C., VAPI- 396 195.

Received



1991DOC: MSC-F7.1-04  
 ISSUE: 04  
 DATE: OCT 2016  
 PAGE: 1 OF 1  
 APPROVED BY: DDG

**AUDIT LOG SHEET OF PERSONNEL FOR AUDITING**  
 (BIS AUDITOR/EXPERT AND EXTERNAL AUDITOR/EXPERT)

Name & address of/Licensee M/s Gujarat Pollution Control Board, RO VAPI, C5/124 NHNO8, GIDC-VPI DIST VALSAD GUJARAT-392195

Tele: SH JAY PATEL -AEE Officer & MR; Mobile no 9099011681 IS/ISO 9001:2015; IS/ISO 14001:2015; IS/ISO 45001:2018

Email : ro-gpcb-vapi@gujarat.gov.in

Type of Audit: TPA CERTIFICATION OF QMS, EMS & OHSMS; STAGE 2 as per IS/ISO 9001:2015; IS/ISO 14001:2015; IS/ISO 45001:2018 Please use BLOCK LETTERS

S.No	Employee No/ Auditor Reg No	Names of Auditors/ Expert/Auditor in training	Role of auditor	Date(s) of Audit	Audit Duration (in days) (see Note 1)		Verification by Auditee (Signature, name, position within organization)	O
					Off Site	Off Site		
1	10118546	Sh N D DESHMUKH	TEAM LEADER & EXPERT	26,27&28 (FN) NOVEMBER 2024	2.5	1.0	 SH-JAY PATEL AEE Officer & MR, GPCB RO VAPI GUJARAT-392195	
2	982	Sh MAHESH D CHILAKWAD	AUDITOR & EXPERT		2.5	1.0		

2/3

**Audit carried out on behalf of : Bureau of Indian Standards; New Delhi**

Note: 1. Duration - Total time (to nearest half day) On-Site: Time spent on actual auditing activities including Opening & Closing meetings. Off-Site: Time spent on planning/preparation, document review and report writing. It may be calculated on the basis that overall, for each On-Site day's work around half-day Off-Site time may be required.  
 Completed log sheet should be sent to MSCO(R) who would forward the original to Head (MSCD)/PTO and retain a copy.

MSCO (R)  
 Head (MSCD) / PTO

**Regional Office**  
**Gujarat Pollution Control Board**  
 C5/124, NH No.8, Nr. Pritam Hotel,  
 G.I.D.C., VAPI- 396 195.



भारतीय मानक ब्यूरो  
BUREAU OF INDIAN STANDARDS

MANAGEMENT SYSTEMS CERTIFICATION

FORM

**TITLE: Evaluation Report from Team Leader about performance of  
BIS Auditor/Expert and External Auditor/Expert**

DOC: MSC-F7.4-01

ISSUE: 04

DATE:

October 2018

PAGE: 1 of 1

Prepared By:

Approved By: DDG(MSCD)

1. Name of the Auditor Sh MAHESH CHILAKWAD Registration no 982

2. Role in the Team : Auditor &Expert

3. Name & Address of the Organization audited.M/ M/S GUJARAT  
POLLUTION CONTROL BOARD, RO VAPI GUJARAT

4. APPLICATION NO.App2024076726App2024076728,App2024076729

5. Date of Audit 26,27&28FN NOV2024/ISO 9001/14001/45001

6. Type of Audit Initial (Certification) Audit QMS-,EMS/OHSAS

7. Auditing ability

9

(Based on witness evaluation by Team Leader on a) Auditing Techniques, b) Communication and c) Findings of auditor d) time management e) Team involvement )

8. Audit reporting ability

9

(Based on the evidence collected and reported by auditor on verification of a) Procedure, b) Statutory compliance, c) Significant Processes/objectives, d) Aspects/ Impact /Risk, e) Operational Programmes, f) Key performance indicators and g) Technical areas etc.)

9) Knowledge of legal requirements in the area

9

Based on team discussions and reports -Applicable to Expert /Auditor-

Expert only) 10) Knowledge of Food Safety requirements, (For FSMS audit only)

9

(PRPs, HACCP, Hazard analysis relevant to the food chain category) 11)

Application of knowledge

9

[ Analysis and decision making ]

Signature:

*[Handwritten Signature]*

✓ Place ~~MARUCH~~ Vapi

Any other remarks:

Date

NO 28/11/2024

MSCO Ratings assigned by MSCO

MSCD

Note : Each aspect to be evaluated on a scale of 10. Needs Improvement

≤5>5TO9- >9

*[Large Handwritten Signature]*



ATTENDANCE SHEET FOR OPENING MEETING

1) DATE 26/11/2024 IMS STAGE 2 AUDIT 2) VENUE ;GPCB VAPI CONFERENCE HALL 396195

SR NO	NAME	DESIGNATION	DEPT	SIGNATURE
1	Sh N D DESHMUKH	TEAM LEADER&EXPERT	BIS MUMBAI	
2	SH MAHESH CHILAKWAD	AUDITOR&EXPERT	BIS MUMBAI	
3	A.G.Patel	REGIONAL OFFICER	GPCB VAPI	
4	J.S.Patel	MR & AEE		
5	C.C.Patel	SO & Lab Head		
6	Deval V. Tondel	D.E.E.	GPCB-Vapi	D.V.Tondel
7	Vivek Tovivedi	DEE	"	
8	Keval Mehta	AEE	"	
9	K.B.Kumar	AEE	"	
10	M.B. Desai	AEE	"	
11	T.N. Revne	S.O.	"	
12	A.B. Patel	JO	"	
13	L.V. Brahmabhatt	SO	"	
14	K.R. Patel	APE	"	
15	G.V. Chandhar	SO	"	
16	H.D. Doliya	APE	"	
17	K.T. Gangoda	APS	"	
18	Krutika D Lad	APS	"	
19	Jitisha M. Patel	DEO	"	

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Regional Office  
Gujarat Pollution Control Board  
Britam Hotel.

ATTENDANCE SHEET FOR CLOSING MEETING

1) DATE 28/11/2024 IMS STAGE 2 AUDIT 2) VENUE ;GPCB VAPI CONFERENCE HALL 396195

SR NO	NAME	DESIGNATION	DEPT	SIGNATURE
1	Sh N D DESHMUKH	TEAM LEADER&EXPERT	BIS MUMBAI	
2	SH MAHESH CHILAKWAD	AUDITOR&EXPERT	BIS MUMBAI	
3	A.O. Patel	REGIONAL OFFICER	GPCB VAPI	
4	C.C. Patel	Lab head	GPCB Vapi	
5	Keval Metha	AEE	GPCB Vapi	
6	Devul V. Tandel	DTE	GPCB Vapi	D.V.Tandel
7	Mamali B. Desai	AEE	GPCB RO Vapi	
8	L.V. B'hatt	SO	GPCB, RO, Vapi	
9	T. N. Purna	S.O	GPCB Vapi	
10	D.V. Chaudhari	SO	GPCB RO Vapi	
11	Krutika D Lad	APS	GPCB - Vapi	
12	Krunal T. Gangodra	APS	GPCB - Vapi	
13	Kishan R. Patel	APE	GPCB RO Vapi	
14	Heena P. Dodiya	APE	GPCB RO Vapi	

28/11/2024  
No. 28/11/2024

30/30

28/11/2024

Regional Office  
Gujarat Pollution Control Board  
C5/124, NH No.8, Nr. Pritam Hotel,  
G.I.D.C., VAPI- 396 195.

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