

# SF02 NON-CONFORMITY REPORT (FSC)

Parts with \* shall be completed by the Client, otherwise it is completed by BVC auditor.

Non-conformities shall be addressed through the client's corrective action process, in accordance with the corrective action requirements of the audit standard. You will find below Bureau Veritas Certification requirements for:

- Expected timelines to address the non-conformity (a)
- Response content (b)

## **Expected timelines to address the Non-conformity (a)**

Corrections and Corrective actions (if possible) to address identified major non-conformities shall be carried out immediately. Correction, Root Cause Analysis (RCA) and Corrective action (CA) plan together with evidences of implementation shall be submitted within **defined timeframe**.

Review of non-conformities is done through desktop review. However, depending on severity of the findings, our auditor may perform a follow up visit to confirm the actions taken, evaluate their effectiveness, and determine whether certification can be recommended or continued.

Minor nonconformity shall be corrected within the maximum period of one (1) year (under exceptional and justified circumstances the timeline may be extended to two (2) years)

Major nonconformity shall be corrected by organization within seventy-five (75) days in order to be closed within ninety (90) days by Bureau Veritas Certification (under exceptional and justified circumstances within six (6) months).

The granting of certification will occur only after the closure of major non-conformities

Any response to the non-conformities which were raised may be either in hard copy or electronically using this template and forwarded to the Bureau Veritas Certification office.

## **Expected response content (b)**

Client response to non-conformity shall be reviewed by the lead auditor in three parts; correction, RCA and CA. In reviewing the three parts, the auditor looks for a plan and then evidence that plan is being implemented.

## **Correction**

1. The extent of the non-conformity (NCR) has been determined (NCR has been corrected & the client has examined the system to see if there are other examples that need to be corrected). Ensure that correction answers the question "Is this isolated case or not?" in other words "Is there a risk that this can reoccur at the other site / department?"
2. If correction cannot be immediate; a plan to correct the NCR may be appropriate (responsible & date).
3. Evidence that the correction was implemented or evidence that the plan is being implemented.

## **Root Cause Analysis**

1. The RCA is not simply repeating the finding, neither is the direct cause of the issue.
2. Well thought out analysis to determine the true root cause: e.g. someone did not follow a process would be direct cause; determining why someone did not follow a process would lead to the true root cause.
3. The root cause statement must focus on a single issue without any obvious "why" questions remaining. If a "why" question can reasonably be asked about the root cause analysis, this indicates that the analysis did not go far enough.
4. Ensure that the root cause answers the question, "What in the system failed such that the problem occurred?"
5. Blaming the employee will not be accepted as the only root cause
6. Address problems with the process as well as what detection system failed

## **Corrective Action**

1. The CA or CA plan addresses the root cause(s) determined in RCA. If you have not defined true root cause you cannot prevent the problem from its reoccurrence
2. In order to accept the plan it shall include;
  - actions to address the root cause(s)
  - identification of responsible parties for the actions and
  - a schedule (dates) for implementation.
  - always include a "change" to your system. Training and/or publishing a newsletter are generally not changes to your system
3. In order to accept the evidence of implementation:
  - a. Enough evidence is provided to show the plan is being implemented as outlined in the response (and on schedule).
  - b. Note: Evidence in full is not required to close the NCR; some evidence may be reviewed during future audit when verifying CA.

## **NCR Numbering system**

NCRs are numbered as xxx/AA, where xxx represents Auditor's initials in 3 capital letters and AA represents NCR number.



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## SF02 NON-CONFORMITY REPORT Wood Schemes

Date	Client Name and Site:			SF02#:
21 October 2020	SIAM FIBREBOARD CO., LTD.			ARC01-10-2020
Non-conformity Observed During:		Second Surveillance Audit		
Process:		Access to relevant national.		
Standard / Reference Document:		RF03 FSC™ FM BV referential Thailand for FSC FM & NTFP - version 2.0		
Clause:		1.1.2		
<b>REQUIREMENT OF AUDITED STANDARD:</b>				
Forest manager(s) shall have adequate knowledge of and access to relevant national and local legislation and regulations (e.g. list of relevant legislation, records of relevant legislation and/or access to relevant websites). Relevant national laws and regulations.				
<b>STATEMENT OF NON-CONFORMITY:</b>				
Process to update the relevant national and local legislation and regulation is not effective.				
<b>OBJECTIVE EVIDENCE FOR RAISING NON-CONFORMITY AND JUSTIFICATION OF THE GRADE</b>				
Name list Organizational regulations and laws is not up-to-dated. Such as the announcement of the Ministry of Agriculture and Cooperatives of the year 2019 is not up-to-dated on the list of law and regulation, including 1. Determination of criteria, methods and conditions for production, import, export, possession. Which harmful substances related to glyphosate, Chlorpyrifos and paraquat 2. Restrictions on use Hazardous Substance Label and Container Designation on Glyphosate, Chlorpyrifos, Paraquat Which from random interviews with members Visit a rubber plantation Found that the operation was in accordance with the rules Notification of the Ministry of Agriculture and Cooperatives So a Minor NCR was raised against with P&C clause 1.1.2				
ประกาศกระทรวงเกษตรและสหกรณ์ ของปี 2562 ไม่เป็นปัจจุบันในรายการกฎหมาย ได้แก่ 1. การกำหนดหลักเกณฑ์ วิธีการ และเงื่อนไขในการผลิต, การนำเข้า, การส่งออก, การมีไว้ในครอบครอง ซึ่งวัตถุอันตรายที่เกี่ยวกับไกลโฟเซต, คลอร์ไพริฟอส และพาราควอต 2. การจำกัดการใช้ การกำหนดฉลากและภาชนะบรรจุวัตถุอันตรายเกี่ยวกับไกลโฟเซต, คลอร์ไพริฟอส, พาราควอต ซึ่งจากการสนทนาสัมภาษณ์สมาชิก เยี่ยมชมสวนยางพารา พบว่าดำเนินการเป็นไปตามกฎระเบียบ ประกาศกระทรวงเกษตรและสหกรณ์ ดังนั้นจึงออกประเด็นเป็นความไม่สอดคล้องระดับไมเนอร์กับข้อกำหนด 1.1.2				
Grade	Lead Auditor	Auditor raising NCR	Client Representative	
Minor NC	MR.KOMKRIT VATTANASIRISOMBUT.	MR.ARTIT C.	K.THIPSUANG JANWADEE	
To be Completed Before:	21 October 2021			
<b>ROOT CAUSE ANALYSIS AND CORRECTIVE ACTION *</b>				
Implementation of CA		Date of Completion*		
		Client Representative*	K.THIPSUANG JANWADEE	
<b>CLEARANCE REPORT</b>				
Validation of Corrective Action plan				
Corrective Action Accepted				
Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
Auditor:				Date:
Verification of implementation				
Auditor:				Date:



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## SF02 NON-CONFORMITY REPORT Wood Schemes

Date	Client Name and Site:	SF02#:
21 October 2020	SIAM FIBREBOARD CO., LTD.	KVA01-10-2020

Non-conformity Observed During:	Second Surveillance Audit
Process:	Conservation/representative area
Standard / Reference Document:	INT-STD-01-001_09 // RF03 FSC™ FM BV referential Thailand for FSC FM & NTFP
Clause:	Criterion 6.4.1

### REQUIREMENT OF AUDITED STANDARD:

6.4.1 Forest manager(s) shall have identified significant representative ecosystem samples at landscape level whenever representative natural ecosystems are present, such as public benefit forests, protected forests, etc.

### STATEMENT OF NON-CONFORMITY:

System verified total area each member group is not effective.

### OBJECTIVE EVIDENCE FOR RAISING NON-CONFORMITY AND JUSTIFICATION OF THE GRADE

Set aside area requirement outside the management unit is only for FMUs less than 50 ha  
 - At that time the audit, BV auditor verified information and observed onsite found that the group member number GM0236 total area more than 50 ha but no min. 10% Conservation/representative area established on plantation and no action plan. (INT-STD-01-001\_09)

However representative and conservation area GE management support at Ton Nga Chang Wildlife Sanctuary, Songkhla province total area 18, 19543 ha (113,721.38 rai) this issues is not a fundamental failure or total breakdown of a system So a Minor NCR was raised against with P&C clause 6.4.1

Note: for this group member (GM0236) they add plantation in year 2020 it make the area more over 50 ha.

Grade	Lead Auditor	Auditor raising NCR	Client Representative
Minor NC	MR.KOMKRIT VATTANASIRISOMBUT.	MR.KOMKRIT VATTANASIRISOMBUT.	K.THIPSUANG JANWADEE
To be Completed Before:	21 October 2021		

### ROOT CAUSE ANALYSIS AND CORRECTIVE ACTION \*

Implementation of CA	Date of Completion*	
	Client Representative*	K.THIPSUANG JANWADEE

### CLEARANCE REPORT

### Validation of Corrective Action plan

Corrective Action Accepted	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Auditor:		Date:	
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### Verification of implementation

Auditor:		Date:	
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## SF02 NON-CONFORMITY REPORT Wood Schemes

Date	Client Name and Site:			SF02#:
21 October 2020	SIAM FIBREBOARD CO., LTD.			KVA01-10-2020
Non-conformity Observed During:	Second Surveillance Audit			
Process:	Review of management plan			
Standard / Reference Document:	RF03 FSC™ FM BV referential Thailand for FSC FM & NTFP - version 2.0			
Clause:	7.2.2			
<b>REQUIREMENT OF AUDITED STANDARD:</b>				
7.2.2 Forest manager(s) shall ensure that the management documents or procedures are reviewed periodically in compliance with relevant legal requirements for the review of management plans.				
<b>STATEMENT OF NON-CONFORMITY:</b>				
Process reviewed of management plan is not effective.				
<b>OBJECTIVE EVIDENCE FOR RAISING NON-CONFORMITY AND JUSTIFICATION OF THE GRADE</b>				
At that time the audit, auditor found that they added new group member amount 63 members (added area 337.51 ha). On year 2019 the harvesting total 23 Group member with 24 compartment area 577.13 rai (92.34 ha). For rubber re-planting total 20 group member; area 547.125 rai (87.54 ha). It is 94.81 percent for replanting.				
But the harvesting plan for 5 year and following rotation (25 -30 year) is not up-to-date. This issues is not a fundamental failure or total breakdown of a system So a Minor NCR was raised against with P&C clause 7.2.2.				
Grade	Lead Auditor	Auditor raising NCR	Client Representative	
Minor NC	MR.KOMKRIT VATTANASIRISOMBUT.	MR.KOMKRIT VATTANASIRISOMBUT.	K.THIPSUANG JANWADEE	
To be Completed Before:	21 October 2021			
<b>ROOT CAUSE ANALYSIS AND CORRECTIVE ACTION *</b>				
Implementation of CA	Date of Completion*			
	Client Representative*		K.THIPSUANG JANWADEE	
<b>CLEARANCE REPORT</b>				
Validation of Corrective Action plan				
Corrective Action Accepted	Yes		No	
Auditor:				Date:
Verification of implementation				
Auditor:				Date:



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## SF02 NON-CONFORMITY REPORT Wood Schemes

Date	Client Name and Site:			SF02#:
21 October 2020	SIAM FIBREBOARD CO., LTD.			KVA01-10- 2020
Non-conformity Observed During:	Second Surveillance Audit			
Process:				
Standard / Reference Document:	RF03 FSC™ FM BV referential Thailand for FSC FM & NTFP - version 2.0			
Clause:				
REQUIREMENT OF AUDITED STANDARD:				
STATEMENT OF NON-CONFORMITY:				
OBJECTIVE EVIDENCE FOR RAISING NON-CONFORMITY AND JUSTIFICATION OF THE GRADE				
Set aside area requirement outside the management unit is only for FMUs less than 50 ha - At that time the audit, BV auditor verified information and observed onsite found that the group member number GM0236 total area more than 50 ha but no min. 10% Conservation/representative area established on plantation and no action plan.  However representative and conservation area GE management support at Ton Nga Chang Wildlife Sanctuary, Songkhla province total area 18, 19543 ha (113,721.38 rai) So this issues did not impact significant system, Minor NCR was raised.				
INT-STD-01-001_09				
Grade	Lead Auditor	Auditor raising NCR	Client Representative	
Minor NC	MR.KOMKRIT VATTANASIRISOMBUT.	MR.KOMKRIT VATTANASIRISOMBUT.	K.THIPSUANG JANWADEE	
To be Completed Before:	21 October 2021			
ROOT CAUSE ANALYSIS AND CORRECTIVE ACTION *				
Implementation of CA	Date of Completion*			
	Client Representative*		K.THIPSUANG JANWADEE	
CLEARANCE REPORT				
Validation of Corrective Action plan				
Corrective Action Accepted	Yes	No		
Auditor:				Date:
Verification of implementation				
Auditor:				Date: