

MANAGEMENT SYSTEM AUDIT REPORT			
CONFIDENTIAL			
Organization Name:		Coastal Container	
Date(s) of Audit:		October 27-28, 2020	
Organization Representative(s):		Pat Mitchell	
Representative(s) Email:		pat.mitchell@coastal-container.com	
Standard(s):		ISO9001:2015	
Type of Audit: (Check all that Apply; after each checked box indicate with standard applies)			
<input type="checkbox"/>	Pre-Assessment	<input type="checkbox"/>	Stage 2
<input type="checkbox"/>	Transfer	<input checked="" type="checkbox"/>	Surveillance
<input type="checkbox"/>	Re-Certification	<input type="checkbox"/>	Upgrade
Organization Address(es): (Must include all sites audited)			Total Employees
Street Address	City	State	Zip
1201 Industrial Dr., Holland, MI. 49423			(by Site):
900 Brooks Ave., Holland, MI. 49423			87
			9
Scope of Registration: (What should be on Certificate – scope can be different for each standard)			
QMS:	Manufacturing and Distribution of Packaging Materials		
EMS:	N/A		
OH&S:	N/A		
If there is more than one location and the scope is different or a sub-scope of the main scope, please specify below:			
N/A			
Permissible Exclusions (ISO 9001 (only)):			
8.3 Design and development of products and services			
Please provide summary of review of the client website for any language that may be misleading as it relates to the client scope of operations.			
There is a ISO9001 logo on their website.			
The scope(s) is (are) appropriate to the organization and its operations			
<input checked="" type="checkbox"/>	YES	<input type="checkbox"/>	NO
Summary of evidence/comments: include any proposed scope changes and changes to the ASR audit program that are necessary:			
There are no proposed changes or changes to the scope or ASR audit program.			
Audit Recommendation			
<input checked="" type="checkbox"/>	Recommendation to Register or Maintain Registration		
<input type="checkbox"/>	Recommendation NOT to Register or Maintain Registration		
Follow Up Required?			
<input type="checkbox"/>	YES	<input checked="" type="checkbox"/>	NO
Have all documented non-conformances from the previous audit been verified?			
<input checked="" type="checkbox"/>	YES	<input type="checkbox"/>	NO
<input type="checkbox"/>	N/A		
Comments:			
Lead Auditor (printed name):		Date:	
Amy Wheatley		October 28, 2020	

AUDIT SUMMARY
Minor non-conformances (state fully; reference clause/requirement; at which site found):
ISO 9001:
None
ISO 14001:
N/A
ISO 45001:
N/A
Major non-conformances (state fully; reference clause/requirement; at which site found):
ISO 9001:
None
ISO 14001:
N/A
ISO 45001:
N/A
Opportunities for improvement (from form F-3001): If OFI's issued, provide evidence of conformance
ISO 9001:
None
ISO 14001:
N/A
ISO 45001:
N/A
AUDIT PLAN DATA
Composition of audit team:
Amy Wheatley
Reference checklists used:
CH-4400

Shifts Audited				
Location (identify below)	Shift Information	Date Audited (if all shifts are not audited please note your justification of why not audited.)	Time audited	
#1 – 1201 Industrial Dr., Holland, MI. 49423	1 st : 6:00am – 5:00pm	October 27, 2020 October 28, 2020	8:00 am – 11:30 am 8:00 am – 4:30 pm	
	2 nd :			
	3 rd :			
#2 – 900 Brooks Ave., Holland, MI. 49423	1 st : 6:00am – 2:00pm	October 27, 2020	12:00 am – 4:30 pm	
	2 nd :			
	3 rd :			
#3	1 st :			
	2 nd :			
	3 rd :			
1) Was the audit completed as scheduled and were the audit objectives fulfilled?				
<input checked="" type="checkbox"/>	YES	<input type="checkbox"/>	NO Provide evidence below:	
The audit was completed as scheduled and the objectives were fulfilled.				
2) Significant Changes to the management system:				
List significant issues with or changes to the management system and any impacts to the ASR audit program for this organization: There is a new quality manager and they are now making honeycomb packaging in a separate building which was added to the ASR audit program.				
3) Effectiveness of the management system:				
The management system continues to conform and is effective.	<input checked="" type="checkbox"/>	YES	<input type="checkbox"/>	NO
The management system is capable of meeting applicable requirements and expected outcomes	<input checked="" type="checkbox"/>	YES	<input type="checkbox"/>	NO
Evidence: Comment on the use of performance data and objectives (Such as customer report cards - customer evaluations, on-time delivery, waste generated, raw materials/energy used, safety incidents, near miss accidents, etc.): Ontime delivery goal – 100% actual 99.9% Quality – NCRs cut the previous year in half - goal = 36 2019 80 2020 = 77 % of good orders shipped – goal = 100% Sept. = 99.54% Oct. 99.73 Customer scorecards – [Name removed] 97% [Name removed] 81% The SWOT is where the quality objectives are documented and maintained. Comment on the evidence from this audit and from the organization’s internal audit, corrective action and management review activities with respect to meeting requirements and expected outcomes: Internal audit is done at least once a year but the new quality manager has added walk through audits and layered audits will begin before the end of the year.				

4) ISO 9001, ISO 14001 & ISO 45001: Comment on the integration of the QMS, EMS and/or OH&S with the organization's strategic direction:
To protect our customer's product and reputation from dock to destination Triple the company by 2025 Shareholders, owners, customers, employees, suppliers and community are all part of the business.
5) ISO 14001: Comment on the effectiveness of the management of the environmental aspects and use of life cycle perspective:
N/A
6) ISO 45001: Comment on the identification of needs & expectations of workers and their consultation and participation in the OH&S:
N/A
7) ISO 45001: Comment on the effectiveness of the management of the hazards and risks and the use of the hierarchy of controls:
N/A
8) ISO 45001: Comment on the capability of the OH&S MS to meet its compliance obligations (for example principle compliance obligations; the mechanisms to comply and the effectiveness of the compliance evaluation mechanism). (List the date of the last compliance evaluation and discuss the results and effectiveness)
N/A
9) Re-Certification ISO 9001 Audit: Comment on the performance of the quality management system over the period of certification (in your comments cite the actual data reviewed):
N/A
What does the data from ASR's or previous registrar's audits for the past 3 years indicate about the organization's management system performance?
N/A
What does the data from the organization's internal audits for the past 3 years indicate about the organization's management system performance?
N/A
What does the data from customer complaints and monitoring of customer satisfaction indicate about the organization's QMS performance in the eyes of the customer over the past 3 years?
N/A
What does the internal data from monitoring goals/objectives and internal processes indicate about the organization's quality system performance over the past 3 years?
N/A
10) Re-Certification ISO 14001 Audit: Comment on the performance of the environmental quality management system over the period of certification (in your comments cite the actual data reviewed):
N/A
What does the data from ASR's audits or previous registrar's audits for the past 3 years indicate about the organization's environmental management system performance?
N/A

What does the organizational monitoring of performance; such as waste generated and/or consumption of raw materials, or energy indicate about the organization's EMS performance over the last 3 years?
N/A
What does the organizational monitoring of the product performance of fate of the product in the environment indicate about the organization's EMS performance over the last 3 years?
N/A
Evaluate the organization's compliance with regulations over the past three years: List the date of the last compliance evaluation and discuss the results and effectiveness)
N/A
11) Re-Certification ISO 45001 Audit: Comment on the performance of the occupational health and safety management system over the period of certification (in your comments cite the actual data reviewed):
N/A
What does the data from ASR's audits or pervious registrar's audits for the past 3 years indicate about the organization's occupational health and safety management system performance?
N/A
What does the organizational monitoring of performance – such as lost time, accidents, employee exposure and/or near misses indicate about the organization's OH&S performance over the last 3 years?
N/A
What does the organizational monitoring of the product safety performance indicate about the organization's OH&S performance over the last 3 years?
N/A
Evaluate the organization's compliance with regulations over the past 3 years (Discuss the results and effectiveness):
N/A
12) Comments after follow-up audit:
None

Note to Customer: This audit was based on sampling all available information. Please contact ASR if you have any questions or comments about this report.

Required for all audits:		Auditor Verification: (Initials Required)
1.	Review use of Registration Certificate Logo (OP-2040)	AW
2.	Review of change of policies and procedures for any revisions that may affect requirements of the standards	AW
Required at least annually		
3.	Continuing operational control	AW
4.	Audit customer complaints, corrective and preventive action	AW
5.	Audit Internal Audits	AW
6.	Review progress towards continuous improvement objectives/targets	AW
7.	Audit management review	AW
8.	For a list of interviewed auditees please refer to the M-5000 and appropriate audit checklist	AW