



AUDIT REPORT

Management Service

Organization name	Polomolok Water District
Standard(s)	ISO 9001:2015
Order No.	724615039
Audit start date	2022-10-11
Audit end date	2022-10-11
Audit type	3. Surveillance Audit
Certification type	Single
Client number	373606-01
Organization's audit representative	ENGR. ANDRESITO J. DEGILLA
Certificate No.	TU V10 0 05 4131
Result	<input type="checkbox"/> Certificate release recommended <input checked="" type="checkbox"/> Maintenance of certificate recommended <input type="checkbox"/> Non-Conformities were identified and closed by re-audit on site <input type="checkbox"/> Non-Conformities were identified and closed by resubmitted documentation <input type="checkbox"/> Suspension of certificate recommended <input type="checkbox"/> Withdrawal of certificate recommended <input type="checkbox"/> Certification process terminated

Enclosed documents: · Action list
Audit plan



Management Service

Audit Team	
Function	Name
Lead Auditor	Reyshelle Alonso
Auditor	Pamela Maye Gunay

Changes since last audit:

- No changes since last audit
- Significant change of scope
- Increase/decrease in number of employees
- Management System / documented information
- deviations from the audit plan
- significant issues impacting the audit program
- audit objectives or audit criteria
- Others

Auditor to enter comments below for any changes identified above:

The audit was conducted on site

Date of next regularly scheduled audit	2023-08-11
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Audit conclusion

During the audit it was checked how the documented management system was established, implemented and improved at the different areas of the organization.

The audit covered relevant processes / areas of the organization in order to obtain an overall picture of the degree of management system implementation. Although performed to reasonable depth, not every detail of the complete Management System could be checked.

The processes and their associated areas of the organization were checked in accordance with the pre-agreed audit plan, audit program and process analysis.

Verification of previous audit nonconformities

The audit team evaluated the corrective action taken for the nonconformities/ areas of concern from the previous audit.

In the case of RA / Re-Certification audits, the audit team considered the audit reports for the last two audits in the audit planning / performance of the audits and in particular checked the nonconformities / areas of concerns.

The corrective actions were found to be:

Effectively Implemented?	Yes
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Comments:

actions to address previous audit findings were verified effective

Did the organization use the CB certification mark? (Controlling the use of certification documents, statements and marks)	Used; acceptable
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Comments:

used and acceptable



Audit team conclusion

Service

Is a re-audit needed?	<input type="radio"/> Yes	<input checked="" type="radio"/> No
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Comments:

Not applicable

Type and number of audit findings

	Major nonconformities	Minor nonconformities	Opportunities for improvement	Positive aspects
Total number	0	3	4	0

Standard elements with findings are listed in the action list (NC Management).
 The audit findings are based on the audit evidence collected during the audit and available to the certification body.

Audit summary

Refer to level of maturity of the MS, commitment of top management, guaranteeing the continuous compliance with the legal and other requirements , application of performance indicators, continual improvement, meeting of objectives and targets, competence of personnel, effectiveness of internal audits and management reviews, environmental performance, etc.



Polomolok Water District implements a quality management system in accordance with the requirements of ISO 9001:2015. The organization engages in Providing Water Services from the Production, Treatment, and Distribution of Potable Water. The Top Management provides the resources needed to run the QMS, such as manpower resources, infrastructures such as decent buildings and associated utilities, information technology-related equipment, and transportation resources. The Top Management takes accountability for the effectiveness of the Quality Management System. Leadership and commitment were demonstrated as they chaired their Management Review, and engaged, directed, and supported employees to contribute to the effectiveness of QMS.

Improvement noted includes Water supply improvement along National Highway Phase 2 Project Implementation completed.

The context of the Organization was analyzed and determined. Internal and external issues, as well as Interested parties, have been identified by the organization.

The organization complies with all the legal and regulatory requirements related to its operations. Please see Annex 2 for the list.

Quality Objectives / KPIs to measure the effectiveness of the QMS are determined. These are done through Office Performance Commitment and Review (OPCR). These are further assessed according to Q1 (Quantity or efficiency), Q2 (Quality or effectiveness) & T3 (timeliness). KPIs will then be graded on a rating of 1-5, following the criteria for rating. Minor nonconformity was raised for the handling of nonconformities for the unmet target.

Internal audits are planned to be conducted every 12 months. An internal audit was conducted last May 18-19, 2022. The audit plan presented covered all the processes within the scope of the QMS. The audit yielded a total of 4 NCs, 14 MiNC, and 24 OFIs by 13 Internal auditors.
This year May 18-19, 2022

The management review was planned and was conducted last June 21, 2022. It was chaired by Top Management, QMR, Process Owners, and Document controllers. All management review inputs were discussed. Agreed outputs from the meeting were duly documented.

Auditor's name

Reyshelle Alonso

date

Auditor's signature

Reyshelle Alonso

2022-10-24