



# AUDIT REPORT:

## PT. Pupuk Sriwidjaja Palembang

**VISIT TYPE:** Surveillance Audit  
**CONTRACT NUMBER:** ID/JKT 0127

**BE THE BENCHMARK**



Job n°	ID/JKT 0127	Report date	21 <sup>st</sup> September 2023	Visit Type	Surveillance		
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## MANAGEMENT SYSTEM CERTIFICATION AUDIT CLIENT REPORT

### EXECUTIVE SUMMARY

The Surveillance Audit has been carried out in six mandays scheme with auditor composition (ARF as Team Leader and FGK as Member), the audit result concludes that the EMS has been established, maintained, and implemented as required by ISO 14001:2015 Standard

<b>SGS DELIVERING OFFICE</b>	SGS United Kingdom, Ltd
<b>ORGANIZATION NAME</b>	PT. Pupuk Sriwidjaja Palembang
<b>HEAD OFFICE</b>	Jl. Mayor Zen, Palembang, Sumatera Selatan, 30118, Indonesia
<b>REPRESENTATIVE</b>	Mr. Andri Azmi (per 29 <sup>th</sup> April 2021)

### AUDIT CRITERIA

STANDARD(S)	ACCREDITATION	ACCREDITED SGS OFFICE	NO. OF EFFECTIVE PERSONNEL
ISO 14001:2015	UKAS	SGS United Kingdom, Ltd	1,101 Employees

### CERTIFICATION SCOPE

Manufacturing of Ammonia, Urea and NPK, and Supporting Site Services and Facilities

### SITES IN CERTIFICATION SCOPE

SITE NAME AND ADDRESS	SCOPE (PER SERVICE)
Jl. Mayor Zen, Palembang, Sumatera Selatan, 30118, Indonesia	Manufacturing of Ammonia, Urea and NPK, and Supporting Site Services and Facilities :

### AUDIT TEAM COMPOSITION AND AUDIT INFORMATION

<b>AUDIT TEAM LEADER</b>	Ade Raja Faisal		
<b>AUDIT TEAM MEMBER</b>	Fedy Gusti Kostiano		
<b>ANY OTHER ACCOMPANYING PERSON (NAMES &amp; ROLES)</b>	-		
<b>AUDIT DATE(S)</b>	18 <sup>th</sup> -21 <sup>st</sup> September 2023		
<b>FOR INTEGRATED AUDITS, CONFIRM THE CURRENT LEVEL OF THE CLIENT'S IMS INTEGRATION</b>	<input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Basic	<input type="checkbox"/> High

## 1. AUDIT OBJECTIVES

The objectives of this audit/visit are, for the scope of certification

- Determination of the conformity of the client's management system, or parts of it, with audit criteria
- Determination of the ability of the management system to ensure the client meets applicable statutory, regulatory and contractual requirements (NOTE A management system certification audit is not a legal compliance audit.)
- Determination of the effectiveness of the management system to ensure the client can reasonably expect to achieving its specified objectives
- As applicable, identification of areas for potential improvement of the management system

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## CONSIDERATIONS

The scope of the audit, dates and places where audit activities were conducted are identified in the audit plan (any changes are identified in the audit report)

This audit report contains a summary of the capability of the management system to meet applicable requirements and expected outcomes

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Audits use a sampling process, based on the information available at the time of the audit. The audit methods shall include, but are not limited to, interviews, observation of activities and review of documentation and records

## 2. SUMMARY AND CONCLUSIONS

### CONCLUSIONS

The audit team recommends that, based on the results of this audit, the management system certification be

<input type="checkbox"/> Granted	<input checked="" type="checkbox"/> Continued	<input type="checkbox"/> Renewed
<input type="checkbox"/> Modified	<input type="checkbox"/> Withheld	<input type="checkbox"/> Suspended

Continued certification is conditional to satisfactory processing of non-conformities

### AUDIT SUMMARY

The management system documentation demonstrated conformity with the requirements of the audit standard and provided sufficient structure to support implementation and maintenance of the management system.  Yes  No

The organization has demonstrated effective implementation and maintenance / improvement of its management system and is capable of achieving its policy objectives, as well as the intended results of the respective management system(s).  Yes  No

The organization has demonstrated effective implementation and monitoring of its management system's ability regarding meeting of applicable statutory, regulatory and contractual requirements.  Yes  No

The organization has demonstrated the establishment and tracking of appropriate key performance objectives and targets and monitored progress towards their achievement.  Yes  No

The internal audit program has been fully implemented and demonstrates effectiveness as a tool for maintaining and improving the management system.  Yes  No

The management review process demonstrated capability to ensure the continuing suitability, adequacy and effectiveness of the management system.  Yes  No

Throughout the audit process, the management system demonstrated overall conformance with the requirements of the audit standard.  Yes  No

Number of non-conformities identified: Nil Major One Minor

Corrective actions regarding previously identified non-conformities are effective  Yes  No

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Previous surveillance audit reports and additional information in SGS databases have been reviewed, and the performance of the management system over the certification cycle is considered adequate for re-certification purposes	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Certification scope is appropriate	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
Has this scope been amended as a result of this audit?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
Audit objectives have been fulfilled	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
Audit plan was followed	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
Audit programme is adequate	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
Any issues resolved	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No

### 3. PREVIOUS FINDINGS

The results of the last audit of this system have been reviewed, in particular to assure appropriate correction and corrective action has been implemented when non-conformities (or Stage 1 findings) were identified. When the management system has not adequately addressed non-conformity (or Stage 1 finding) identified during previous audit activities, the specific issue has been raised in the non-conformity section of this report.

### 4. NON-CONFORMITIES

<b>NON-CONFORMITY</b>	N° 1	of 1	<input type="checkbox"/> Major	<input checked="" type="checkbox"/> Minor
<b>PROCESS</b>	Pusri IV & Pusri IIB			
<b>DOCUMENT REF.:</b>	Operational Control Procedure (per 2023)	<b>CLAUSE</b>	8.1	
<b>DESCRIPTION</b>	<p><b>Pusri IV</b> Gas of H<sub>2</sub> generated (about 70 % composition) by Compressor Discharge LP103J injected (with operational pressure to supply this gas composition (H<sub>2</sub> &amp; CH<sub>4</sub>) between 30-40 bar, actual pressure is 33 bar) to vessel tank (101D) by piping (diameter 1.5-inch and 5 mm piping thickness). Leak test of this piping has been inspected (both explosion checking and gas detector) as per documented information of <i>Form Pengecekan Eksplosive Ammoniac P-IV</i> (per 30<sup>th</sup> July 2023), however, it was found that the periodical inspection status of the H<sub>2</sub> gas leak inspection status for the pipeline of gas supply of H<sub>2</sub> (from Compressor Discharge LP103J to vessel tank (101D) was unclear (both explosion checking and installed gas detector). Considering this there is aspect of significant explosion potency on this pipeline while H<sub>2</sub> leak occurred (if any)</p> <p><b>Pusri IIB</b> There is refrigerant system (chiller) installed at Pusri IIB Plant (This plant operated for last five years ago), however found unclearly status periodical preventive maintenance inspection. In addition the PIC who has roles, responsibilities, and authorities to service this facility has not been certified by BNSP as Refrigeration Technician</p>			

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<b>FOR MAJOR NON-CONFORMITIES</b>	
Corrective action (including a cause analysis) to take place immediately. The client must notify SGS of the proposed actions within 30 days of this visit. SGS will perform an appropriate follow up within 90 days confirming that actions have been effective. The certification decision shall be made based on the outcome of the follow up.	
Follow up visit by SGS to confirm the actions taken (within 90 days) (or)	<input type="checkbox"/>
Actions with supporting evidence sent to the SGS auditor for close-out (within 90 days)	<input type="checkbox"/>
<b>FOR MINOR NON-CONFORMITIES</b>	
Corrective Actions to address identified minor non-conformities including a cause analysis shall be documented on an action plan. Effectiveness of actions taken to be followed up at next scheduled visit (all audits).	
Action plan reviewed by the auditor and found to be satisfactory (audit pack requires certificate decision)	<input checked="" type="checkbox"/>
Action plan to be sent to SGS within 90 days for review (audit pack requires certificate decision)	<input type="checkbox"/>
Action plan does not need to be sent to SGS (audit pack does not require certificate decision / client proposed actions already reviewed)	<input type="checkbox"/>

Non-conformities detailed here shall be addressed through the organization's corrective action process, in accordance with the relevant corrective action requirements of the audit standard and shall include actions to analyse the cause of the non-conformity and prevent recurrence, and complete records maintained.

Deadlines indicated may need to be reduced when there is a more restrictive requirement, e.g. certificate expiry.

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5. OBSERVATIONS AND IMPROVEMENT OPPORTUNITIES

**K3LH**

1. Consideration could be taken to review applicability of several regulations:
  - Peraturan Presiden RI 98/2021 “Penyelenggaraan Nilai Ekonomi Karbon Untuk Pencapaian Target Kontribusi Yang ditetapkan Secara Nasional dan Pengendalian Emisi Gas Rumah Kaca Dalam Pembangunan Nasional”
  - Permenlhk No 4/2021, Daftar Usaha Dan/Atau Kegiatan Yang Wajib Memiliki Analisis Mengenai Dampak Lingkungan Hidup, Upaya Pengelolaan Lingkungan Hidup Dan Upaya Pemantauan Lingkungan Hidup Atau Surat Pernyataan Kesanggupan Pengelolaan Dan Pemantauan Lingkungan Hidup
  - PermenLHK 21/2022 “Nilai Ekonomi Karbon”

**Laboratorium Pusat**

2. Could be further to review chemical storage based on its compatibility properties

6. SPECIFIC REQUIREMENTS

Any significant changes?  Yes  No

Add comment (if required)

Certification claims are accurate and in accordance with SGS guidance and the organization is effectively controlling the use of certification documents and marks  N/A  Yes  No

Add comment (if required)

7. ADDITIONAL COMMENTS

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**WHEN YOU NEED TO BE SURE**

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