



*Management System Audit Report*  
**of Power Container Corporation**



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## 1. Audit information

### 1.1. Organization information

<b>Company name:</b>	Power Container Corporate
<b>Client ID:</b>	US-NJ-20012
<b>Main address:</b>	33 Schoolhouse Rd. Somerset, NJ 08873
<b>Address of other sites:</b>	N/A
<b>Phone number:</b>	(732) 560-3655
<b>Website:</b>	www.powercontainer.com
<b>Total number of employees:</b>	310
<b>Total number of employees within the scope:</b>	310
<b>Contact name:</b>	Mr. Muhammad Fahmy
<b>Contact email:</b>	Mfahmy@powercontainer.com
<b>Contact phone:</b>	(551) 689-6631

### 1.2. Audit information

<b>Audit standard(s):</b>	ISO 9001:2015 – ISO 14001:2015 – ISO 45001:2018 – GMP	
<b>Audit type:</b>	<input type="checkbox"/> Initial Audit	<input type="checkbox"/> Surveillance 1
	<input type="checkbox"/> Recertification	<input checked="" type="checkbox"/> Surveillance 2
	<input type="checkbox"/> Other:	
<b>Date(s) of audit(s):</b>	06/04/2025 → 06/05/2025	
<b>Duration:</b>	2 days	
<b>Site(s) audited:</b>	New Jersey Site, Malaysia, France	
<b>Audit team leader:</b>	Ahmed Alro	
<b>Additional team member(s):</b>	Amr Ahmed	
<b>Additional attendees and roles:</b>	N/A	

### 1.3. Audit Scope

<b>Scope of Certification:</b>	<b>MANUFACTURING OF NON-AEROSOL SPRAY PACKAGING BAG-ON-VALVE AIR-PROPELLED OR RUBBER- PROPELLED, AND IT'S ACCESSORIES AND COMPONENTS.</b>
<b>Has scope changed since last audit?</b>	No
<b>The audit is multi-site:</b>	Yes
<b>List of sites in scope:</b>	New Jersey Site, Malaysia, France
<b>All scope exclusions are appropriate and justified:</b>	Yes

## 2. Audit preparation and methodology

### 2.1. Audit objectives

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*The main purpose of this audit is to evaluate the implementation and effectiveness of the Occupational health and safety assessment System (OHSAS) including evaluation of conformity to the requirements of OHSAS 18001:2007.*

*The specific objectives of this audit are to confirm that:*

- ▲ The organization has determined the boundaries and applicability of the MS in scope.*

### 2.2. Audit criteria

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*The audit criteria (the set of requirements) for this audit are all normative clauses of ISO 14001:2015.*

### 2.3. Audit methodology

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*The audit team has conducted a process-based audit focusing on the significant aspects, risks and objectives. The auditors have used audit procedures to collect evidence in sufficient quantity and quality to validate the conformity of the environmental management system of the organization. The use of audit procedures in a systematic way reduces the audit risk and reinforces the objectivity of the audit conclusions.*

*The audit team has used a combination of evidence collection procedures to create their audit test plan. The audit methods used consisted of interviews, observations of activities, review of documentation and records, technical tests and analysis of sampling.*

*The analysis procedure allows the audit team to draw conclusions concerning a whole by examining a part. It allows the auditor to estimate characteristics of a population by directly observing a part of the whole population. The sampling method used during this audit was a random sampling (or interval sampling) technique with a margin error of 3 to 5 %.*

*Technical tests, including testing of the effectiveness of a process or control have not been performed by the auditors themselves. The operations have always been performed by the personnel of the auditee.*

### 2.4. Previous audit results

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*The results of the last audit of this system have been reviewed, in particular to assure appropriate correction and corrective action have been implemented to address any nonconformity identified. This review has concluded that:*

- any nonconformity identified during previous audits has been corrected and the corrective action continues to be effective*
- any nonconformity identified during previous audits hasn't been addressed adequately and the specific issue has been re-defined in the nonconformity section of this report*
- N/A (no previous audits)*

### 2.5. Audit planning

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*The team leader of the audit has established an initial contact with the auditee to make arrangement for this audit, including scheduling the dates. The team leader has validated*



*the feasibility of the audit, the audit objectives, the audit scope, the location and the audit criteria.*

*The audit plan was sent to the auditee and it was confirmed before the opening meeting between the audit team and the auditee.*

*The online audit was started with an opening meeting which has been attended by executive management. The USQC profile, audit purpose, methodology, reporting system, appeal process and confidentiality were briefly presented to the client during the opening meeting.*

## 2.6. USQC complaint and appeal process

*Any client may dispute any decision made by the auditor team and file a complaint against that decision. Such complaints must be in writing and will be subjected to USQC's procedure for handling appeals and disputes. If USQC management fails to resolve the issue internally to the client's satisfaction, the issue will be reviewed by USQC's Advisory Board.*

## **3. Significant audit trails followed**

### **Notes on usage by the auditor:**

*Under the column "Status", please use the following key to record your assessment result for each clause:*

**A** = Acceptable,

**N/A** = Not Applicable (Out of Scope),

**MaNC** = Major Nonconformity

**MiNC** = Minor Nonconformity

**OBS** = Observation

**OFI** = Opportunity for improvement

*\*nonconformities are explained in "Section 4: Audit Findings".*

*Evidence should be provided also for 'Acceptable' clauses.*

*If nonconformity is identified (Minor or Major), please include the number of the nonconformity in the column "No. of NC". Detailed description of the nonconformity should be provided in Annex A – Nonconformity Report.*

If OBS or OFI is identified, please explain in details the finding(s) in section 4.4 and 4.5.

## 4. Audit findings

The audit findings were communicated to the senior management of the organization during the closing meeting. The final conclusion of the audit results and recommendation by the audit team was also communicated to the management during the meeting.

### 4.1. Audit finding definition

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The evaluation of the audit findings is based on the following definitions:

#### Major Nonconformities (MaNC)

The **absence** or **total failure** of a **system** to meet a requirement. It may be either:

- A number of minor nonconformities against one requirement can represent a total failure of the system and thus be considered a major nonconformance; or
- Any nonconformance that would result in the probable shipment of a nonconforming product. A condition that may result in the failure or materially reduce the usability of the products or services for their intended purpose; or
- A nonconformance that judgment and experience indicate is likely either to result in the failure of the quality system or to materially reduce its ability to assure controlled processes and products.

#### Minor Nonconformities (MiNC)

A **nonconformance** that judgment and experience **indicate is not likely to result in the failure** of the quality system or **reduce its ability** to assure controlled processes or products. It may be either:

- A failure in some part of the supplier's documented quality system relative to a requirement; or
- A single observed lapse in following one item of a company's quality system.

#### Observations (OBS)

Any issues which are **likely to become a NC**, if not treated until the next audit are marked as observations (OBS). No response is required.

#### Opportunities for Improvement (OFI)

If **certain aspects** which generally comply with the requirements of the standard should be improved, then they are marked as opportunities for improvement (OFI). These OFIs help to **improve the management system** as a whole or named processes. No response is required.

### 4.2. Major nonconformities (Corrective action Required)

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**No major non-conformities found during the audit.**

## 4.3. Minor nonconformities (Corrective action Required)

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### Finding:

- During the facility walk-through on [06/05/2025], plastic bags (product packaging materials) were observed in direct contact with the production floor in the manufacturing area, creating potential contamination risk to product components.
- No protective barriers or clean surfaces utilized for product component storage.

### Requirement:

- ISO 9001:2015, Clause 8.5.1 requires the organization to implement production and service provision under controlled conditions, including "the prevention of contamination of outputs."

### Impact:

- Direct floor contact of packaging materials creates potential contamination risk and does not ensure adequate protection of product components during manufacturing processes.

## 4.4. Observations

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### 1. Poor Communication

- a) During interviews, inconsistencies were noted in communication and coordination between Power Container Corporate (PCC) and Power Container Malaysia (PCM) operations regarding management system implementation and supplier payment schedule.

### 2. Supplier performance indicator:

- a. While the organization maintains a strong supplier evaluation and audit records and conducts annual supplier reviews, opportunities exist to enhance supplier performance monitoring through the development of specific performance indicators and trending analysis, for example (delivery, quality, responsiveness, etc)

## 4.5. Opportunities for improvement

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### **Recommendation - Knowledge Management Enhancement:**

- Consider implementing ISO 30401:2018 Knowledge Management Systems to support the systematic transfer of manufacturing knowledge, quality procedures, and management system requirements to the France joint venture operations.

### **Rationale:**

- Planned expansion of France operations from current small-scale to full production line
- Need for systematic knowledge transfer of proprietary technology and specialized processes
- Integration requirements between PCC's management systems and the joint venture's AS9100/ISO 13485 operations
- Opportunity to formalize knowledge sharing processes for consistent quality and compliance

### **Potential Benefits:**

- Structured approach to knowledge transfer reducing risk of quality or compliance gaps
- Enhanced control over outsourced manufacturing through systematic knowledge management
- Improved efficiency in scaling operations through organized knowledge transfer processes
- Better integration between management systems across organizational boundaries

## 4.6. Agreed follow-up activities

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***Nonconformities detailed here need to be addressed through the organization's corrective action process, in accordance with the relevant corrective action requirements of the audit standard, including actions to analyze the cause of the nonconformity, prevent recurrence, and complete the maintained records.***

***Corrective actions to address the identified major nonconformities, shall be carried out immediately and USQC shall be notified of the actions taken within 90 days through USQC [Electronic Corrective Action Form](#). To confirm the actions taken, evaluate their effectiveness, and determine whether certification can be granted or continued, a USQC auditor will perform a follow up visit within 90 days.***

***Corrective actions to address the identified minor nonconformities shall be documented on an action plan and be sent for review by the client to the auditor within 90 days. If the actions are deemed to be satisfactory, they will be followed up during the next scheduled visit.***

***Nonconformities shall be addressed through the client's corrective action process, including:***

- ▲ Actions taken to determine the extent of and contain the specific nonconformance.***
- ▲ Root Cause (results of an investigation to determine the most basic cause(s) of the nonconformance.)***
- ▲ Actions taken to correct the nonconformance and, in response to the root cause, to eliminate recurrence of the nonconformance.***
- ▲ Corrective action response shall be submitted to the USQC Lead Auditor.***
- ▲ Client must maintain corrective action records, including objective evidence, for at least three (3) years.***

## 4.7. Uncertainty / obstacles that could affect the reliability of audit conclusions

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N/A

## 4.8. Unresolved diverging opinions between the audit team & auditee

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N/A

## 5. Audit conclusions and audit recommendation

### 5.1. System management conformance and capability

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- *demonstration of effective implementation of EMS*
- *demonstration of established and tracking of proper key performance objectives and targets*
- *Implementation of internal audit program, and supplier audit program.*

### 5.2. Audit conclusions

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Has there been any serious deviation from the audit plan? (If yes, please specify)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Are there any significant issues impacting the audit program? (If yes, please specify)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Are there any significant changes affecting the management system since last audit took place? (If yes, please list the significant changes)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
Are there any unresolved issues affecting the management system since last audit took place? (If yes, please list the unresolved issues)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
The verification of the effectiveness of the corrective action taken regarding previously identified nonconformities has been performed and is satisfactory (please list any comments if needed)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
The management system is designed to achieve the organization's policy objectives	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
The management system is designed to meet statutory, regulatory and contractual requirements	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
The internal audit and management review processes are in place and adequate	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
The audit was successful in meeting the stated objectives	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

### 5.3. Recommendation

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*Lead Auditor Recommendation:*

*Recommendation for certification for the scope" Provide world-class direct investments into the energy space while maintaining a high level of focus on environmental, social performance, and corporate governance" or ISO 14001:2015 Environmental management systems.*