

IND-EXPO CERTIFICATION LIMITED  
 INTEGRATED MANAGEMENT SYSTEMS CERTIFICATION LIMITED  
 APPLICATION REVIEW CHECK LIST

1. Name & address of applicant : Wedgedara Producers (Pvt) Ltd

2. Types of products manufactured/services offered : Manufacturing of Osuvita ,  
 Garsi (Herbal toffee)

3. Management system certification applied for : GMP, HACCP, ISO 22000 : 2018

PLEASE TICK "X" THE APPROPRIATE CAGE.

- |  | Yes                                 | No                                     |
|--|-------------------------------------|--|
| 4. Is it a new application?  | <input checked="" type="checkbox"/> | <input type="checkbox"/>               |
| 5. Has the organization given the contact details?   | <input checked="" type="checkbox"/> | <input type="checkbox"/>               |
| 6. Has the organization identified the applicable legal requirements?                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>               |
| 7. Is it a multisite organization?   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> NA |
| 8. If so, are the site locations given?  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> NA |
| 9. Is the product range of the site for each site given?                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> NA |
| 10. Do the product range of the sites differ from the main site?                           | <input type="checkbox"/>            | <input checked="" type="checkbox"/> NA |
| 11. Are the departments /sections/processes listed?  | <input checked="" type="checkbox"/> | <input type="checkbox"/>               |
| 12. Has the scope been defined?  | <input checked="" type="checkbox"/> | <input type="checkbox"/>               |
| 13. Does the organization outsource any process related to the management to be certified? | <input checked="" type="checkbox"/> | <input type="checkbox"/>               |
| 14. Are there competent auditors available for the specified scope?                        | <input type="checkbox"/>            | <input checked="" type="checkbox"/>    |
|  | <input checked="" type="checkbox"/> | <input type="checkbox"/>               |

14.1 what is the complexity of the category (Low, medium, high, limited or special)

14.2 List of auditor/ audit team as per the required team competency

(ISO 17021-3 for EMS, ISO 17021-10 for OHSAS)

Ms. Buddhika sajeewani

Mr. Tharindu Hettiarachchi

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Reviewed and approved by : Director

Issued by : Management Representative

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yes

no

15. Are the services of a technical expert needed?

15.1 List of technical experts

16. Are there technical experts available for the defined scope?

17. Has the organization obtained the services of a Consultant?

18. Has the CB determined the audit time

19. Is the information provided by the applicant sufficient for conducting  
The audit?

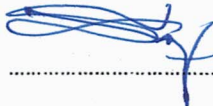
Recommendation of Reviewing officer:

.....  
Signature of Reviewing Officer

.....  
Date

Approval from certification Manager

Approved for stage I audit

  
.....

2020/10/20/

Signature

Date