Final Audit Report

P N I LOGISTICS L.L.C

ISO 9001:2015

QUALITY MANAGEMENT SYSTEM

Report No. S1-2026-000002 | Stage 1 (Initial)



QUALITY REGISTRAR SYSTEMS

U.A.E.

THIRD PARTY MANAGEMENT SYSTEM AUDIT REPORT

OF

P N I LOGISTICS L.L.C

Reviewed &
Approved by Scheme Dept:

Accreditation Body:
■ ASCB ☐ Others

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CONCLUSION & RECOMMENDATION	
☐	The management system complies with the requirements of the reference standard — recommend Issuance / Continuation of Certificate.
☐	Complies with exception of minor NC(s) — recommend Issuance / Continuation of Certificate upon off-site verification of closure of all minor NCs within 60 days from the date of audit.
☐	Evidence of major nonconformity(ies) — not recommended for Issuance / Continuation of Certificate at this time; follow-up audit required within 60 days to verify on-site closure.
☐	Not recommended — organization has not implemented / maintained the system/process at pace; full audit required.

QUALITY REGISTRAR SYSTEM ISO 9001:2015 Quality Management System	Doc. No.: Form 04-2a Issue: 01 Rev: 04 Date: 01-08-2026

ISO 9001:2015 Quality Management System AUDIT REPORT

Stage 1 / Stage 2 / Surveillance / Recertification — Checklist and Report

■ Stage 1 (Initial) ☐ Stage 2 (Initial) ☐ Surveillance ☐ Recertification

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1. ORGANIZATION DETAILS			
Name of Organization	P N I LOGISTICS L.L.C	**Report No.**	S1-2026-000002
Address	P.O. BOX 12345, Dubai, UAE, United Arab Emirates	**Certificate No.**	UAE-AB-FSM-Q69X2
Site Address (if any)		**NACE/EAC Code**	31
No. of Employees	16		
E-mail ID	usha@pnilogistics.com		
Contact Person	USHA		
Telephone / Fax	04256 4547 / 04256 4547		
Multisite	☐ Yes ■ No		
Scope of Audit	Goods Marine Shipment Services ,Sea Shipping Lines Agents, Goods Air Shipment Services, Transport Of Materials Assemble Light Customs Consultant, Customs Clearance Services, General Custom Warehouse ,,goods Loading and offloading Services, Cargo packaging Services , Transport Of Materials Assembly Heavy Truck, Lifting and loading machines and equipment renting		

2. AUDIT TEAM & LOGISTICS	
Lead Auditor	Madara Maduwanthi
Auditor(s)	
Technical Expert	N/A
Audit Man-day(s)	2
Audit Date	28-09-2026

Audit Objective / Purpose	To determine the readiness of the organization's Quality Management System (QMS) for Stage 2 Certification by evaluating documented information, understanding the organization's context, scope, quality policy, legal and other requirements, quality objectives and planning processes, and the establishment of the management system in accordance with ISO 9001:2015.
Audited Criteria	Organization context and interested parties, scope of the QMS, Quality Management System documented information, quality policy, actions to address risks and opportunities, quality objectives and planning to achieve them, legal and other requirements, customer and product/service requirements, operational planning and control, monitoring and measurement processes, competence and awareness, documented procedures and records, and the organization's readiness for Stage 2 Certification Audit in accordance with ISO 9001:2015.

3. CHANGE DETAIL	
Are quoted man-days adequate?	■ Yes ☐ No
Any change in employee details?	☐ None ☐ Yes (specify):
Any change in scope?	■ None ☐ Yes (specify):
Any additional information?	☐ None ☐ Yes (specify):

4. CATEGORIES OF FINDINGS		
Category	**Classification**	**Definition**

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Category 1	**Major Non-Conformity**	A nonconformity which affects the capability of the management system to achieve its intended results, raises significant doubt on the effectiveness of the QMS, could result in harm to the organization's ability to consistently provide conforming products/ services, or reflects the recurrence/persistence of an unresolved Minor Non-Conformity. Corrective action is mandatory.
Category 2	**Minor Non-Conformity**	A nonconformity which does not affect the capability of the management system to achieve its intended results, but reflects a single lapse or partial breakdown in the implementation of a documented process or requirement. Corrective action is mandatory.
Category 3	**Observation**	Requirements and expectations are generally met, with minor inadequacies or omissions noted; in the auditor's opinion, preventive action would improve the effectiveness of the implemented management system. Corrective action is not mandatory.
Category 4	**Satisfactory / Conformity**	The requirement is fully met and effectively implemented.
Category 5	**Positive Point**	A point worth noting as good practice or a particular strength, which the organization is encouraged to continue and build upon.

5. DISCLAIMER

This report has been prepared by Quality Registrar System in respect of the organization's application for assessment. The purpose of this report is to record evidence of the organization's compliance with the audited standard(s). Quality Registrar System does not warrant the suitability of the contents of this report for any particular purpose, and accepts no liability for consequences arising from actions taken by third parties based on this report. The findings recorded are the result of a sample-based audit; the absence of a recorded nonconformity does not imply that no other nonconformities exist. The organization is required to implement corrective action(s) should further nonconformities be identified. This report is confidential, and its distribution is limited to the audit team, the relevant accreditation / competent authority, the organization, and the Quality Registrar System.

6. BRIEF ABOUT THE ORGANIZATION

P N I Logistics provides freight and warehousing services.

7. ATTENDANCE SHEET

Name of Person	Designation	Signature
Usha	Manager	
Rahul	QA	

8. AUDIT BRIEF AND FACTS

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The audit was carried out based on a sampling of available records, processes, and personnel. The auditee(s) were cooperative throughout the audit, and the scope of the audit was discussed and confirmed with the organization at the opening meeting.

Random sampling was used in gathering audit evidence; this implies certain limitations. Inconsistency or unavailability of a specific piece of documented information does not necessarily indicate that other evidence of conformity does not exist. However, where information, records, or documentation required to evidence conformity to a mandatory requirement were unavailable at the time of audit, this has been recorded as a nonconformity to be addressed through corrective action.

Work instructions/guidance provided to employees before commencing work:

Work environment observed (ventilation, noise, lighting, housekeeping, welfare/rest facilities):

Where required documented information, records, or other objective evidence were not available for review during Stage 1, the matter was identified and communicated to the organization for appropriate action and further verification during Stage 2, where applicable.

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9. DOCUMENT REVIEW & READINESS CHECKLIST			
Document Review & Readiness			
Clause	**Requirement**	**Status**	**Objective Evidence / Audit Comments**
4.1/4.2	Are the organization's context and needs/expectations of interested parties (incl. legal & other requirements) documented?	■ C ☐ NC ☐ OFI ☐ NA	Procedure and records reviewed. Conforming.
4.3	Are the scope and boundaries of the QMS clearly defined and available in documented form (QMS manual/scope statement), including the products, services and processes covered?	■ C ☐ NC ☐ OFI ☐ NA	Procedure and records reviewed. Conforming. **Documents reviewed:** • Quality Manual.pdf
5.2	Is the quality policy documented, dated, and signed/approved by top management, and appropriate to the purpose and context of the organization?	☐ C ■ NC ☐ OFI ☐ NA	Quality policy is not signed by top management.
5.3	Are QMS roles, responsibilities, and authorities documented (org chart/ responsibility matrix)?	■ C ☐ NC ☐ OFI ☐ NA	Procedure and records reviewed. Conforming. **Documents reviewed:** • Quality Manual.pdf
6.1/6.2	Are actions to address risks and opportunities, and quality objectives with plans to achieve them, documented?	■ C ☐ NC ☐ OFI ☐ NA	Procedure and records reviewed. Conforming.
6.3	Is the planning for changes to the QMS documented (purpose of the change, potential consequences, resource allocation, responsibilities)?	■ C ☐ NC ☐ OFI ☐ NA	Procedure and records reviewed. Conforming. **Documents reviewed:** • Quality Manual.pdf
7.1	Are resources needed for the QMS determined and documented (people, infrastructure, work environment, monitoring & measuring resources, organizational knowledge)?	■ C ☐ NC ☐ OFI ☐ NA	Procedure and records reviewed. Conforming.
7.2/7.3	Are competence and awareness/training records or plans available?	■ C ☐ NC ☐ OFI ☐ NA	Procedure and records reviewed. Conforming. **Documents reviewed:** • Quality Manual.pdf
7.5	Is the documented information control procedure (creation, approval, retention, version control) available?	■ C ☐ NC ☐ OFI ☐ NA	Procedure and records reviewed. Conforming.
8.2	Is the process for determining and reviewing requirements for products and services (incl. customer communication) documented?	■ C ☐ NC ☐ OFI ☐ NA	Procedure and records reviewed. Conforming. **Documents reviewed:** • Quality Manual.pdf
8.1, 8.3–8.4	Are operational planning and control, design & development (where applicable), and control of externally provided processes/products/services documented?	■ C ☐ NC ☐ OFI ☐ NA	Procedure and records reviewed. Conforming.

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9.2	Is the internal audit programme/ procedure documented, and has at least one internal audit cycle been completed covering the QMS?	■ C ☐ NC ☐ OFI ☐ NA	Procedure and records reviewed. Conforming. **Documents reviewed:** • Quality Manual.pdf
9.3	Is the management review procedure documented, and has at least one management review been conducted?	■ C ☐ NC ☐ OFI ☐ NA	Procedure and records reviewed. Conforming.
10.1	Is the nonconformity and corrective action procedure documented?	■ C ☐ NC ☐ OFI ☐ NA	Procedure and records reviewed. Conforming. **Documents reviewed:** • Quality Manual.pdf
General	Has a discussion been held with client personnel confirming organizational readiness for the Stage 2 (Implementation Verification) audit?	■ C ☐ NC ☐ OFI ☐ NA	Procedure and records reviewed. Conforming.
General	Have the client's site-specific conditions relevant to the QMS been evaluated?	■ C ☐ NC ☐ OFI ☐ NA	Procedure and records reviewed. Conforming. **Documents reviewed:** • Quality Manual.pdf
General	If the client is multi-site, has the level of control/sampling approach been established?	■ C ☐ NC ☐ OFI ☐ NA	Procedure and records reviewed. Conforming.
General	Are resources (time, competence, information) adequate for the Stage 2 audit?	■ C ☐ NC ☐ OFI ☐ NA	Reviewed.

10. SUMMARY OF AUDIT

No.	Clause	Type	Area / Description of Finding
1	5.2	Minor	Quality policy is not signed by top management.

#	Component (Clause)	No. of Major NC	No. of Minor NC	No. of Observations
1	5.2	0	1	0
	Total	**0**	**1**	**0**

11. TEAM LEADER DECLARATION

■	Auditing is based on a sampling process of the available information.
☐	Audit is combined, joint, or integrated (delete as applicable).
■	The effectiveness of corrective actions taken regarding previously identified nonconformities has been verified.
☐	Outcomes are effective and compliant.
☐	The internal audit and management review processes are effective and comply with the requirements.
☐	The scope of certification is appropriate.
☐	The capability of the management system to meet applicable requirements and expected outcomes has been confirmed.

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☐	The audit objectives have been fulfilled and achieved.

12. RECOMMENDATION	
■	Recommended proceeding with Stage 2 (within 60 days from this audit date).
☐	Recommend not proceeding to Stage 2 until audit evidence has been submitted showing that the concerns raised by the auditor(s) have been rectified. A date for Stage 2 will then be agreed.
☐	Recommend not proceeding without a further Stage 1 audit due to the severity of the concerns raised by the audit team.

Proposed date for Stage 2 Audit	20-11-2026

Lead Auditor: Madara Maduwanthi

Signature

Date: 06-10-2026

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