

Approval Sheet

PT. TÜV NORD Indonesia
PEn – TNI – 001 Rev.02

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Revision Sheet

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1	All	Refer to procedure PMLF-TNI-02 and adding the specific requirements based on ISO 50003	08	09 Sep 2015

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**Procedure PEn-TNI-001
Energy Management System Certification**



1. Purpose

Procedure PEn-TNI-01 is additional and specific procedures for Energy Management System (EnMS). Certification processes in general by ISO 17021 refer to procedure PMLF-TNI-02 Management System Certification.

2. Scope

This procedure applies to PT. TÜV NORD Indonesia for system certification services.

3. Definitions

Audit Stage 1:

On-site or off-site assessment of the readiness for certification of a company's energy management system and planning of audit stage 2. This includes the review of energy management system documentation.

An on-site assessment may not be needed as an exception .

Audit Stage 2:

On-site assessment of establishment, implementation and effectiveness of a energy management system with respect to the issue of a certificate.

Completion of audit:

Last day of audit stage 2, typically the day of the final closing meeting.

Surveillance Audit:

Periodical (yearly, optionally half-yearly), post-certification on-site audit of energy management system implementation and effectiveness in representative areas and functions covered by the scope of the energy management system of the organization at defined intervals with respect to the maintenance of a certificate.

Re-Certification Audit:

Review of overall energy management system implementation and effectiveness in the organization with respect to new issue of the certificate.

Extension Audit:

Evaluation of energy management system implementation and effectiveness in additional or changed areas or sites of the scope, or after removal of parts of the scope with respect to changes of the scope of a certificate.

Short-notice Audit:

Audits of certified clients at short notice to investigate complaints, or in response to changes, or as follow up on suspended clients.

Nonconformity:

Non-fulfilment with respect to the certification requirements.

- a) The effectiveness of correction and corrective actions, for all nonconformities that represent
- a failure to fulfil one or more requirements of the energy management system standard, or
 - a situation that raises significant doubt about the ability of the management system to achieve its intended outputs.
- have to be reviewed, accepted and verified prior to the release of the audit file.**
- b) For any other nonconformities the auditor reviews and accepts the client`s planned corrections and corrective actions prior to the release of the audit procedure; the verification is performed in the following scheduled audit (e.g. surveillance).

The verification may be satisfied by presenting personalized evidence or on a follow-up visit.

Follow-up Audit:

On-site assessment of the implementation and effectiveness of corrections and corrective actions for nonconformities issued during the audit.

Evaluation of documentary evidence:

Off-site assessment of the implementation and effectiveness of corrections and corrective actions for nonconformities issued during the audit.

Correction:

Action to eliminate a detected nonconformity.

Corrective Action:

Action to eliminate the cause of a detected nonconformity.

Audit day:

An audit day basically comprises 8 hours (net). Where it seems useful, a 10 hours audit day might be accepted by the appointed person.

Appointed Person:

Competence Personnel who are appointed to perform certain, defined tasks on behalf of Head of Certification Body

4. Responsibilities

4.1 Head of Certification Body / Certification Manager

With respect to the scope of this procedure, the Head of the Certification Body/Certification Manager is ultimately responsible for :

- select and appoint auditors, senior auditors and appointed persons,
- review and approval of certification files and by involving competent auditors if necessary. These auditors shall not have been part of the certification process activities,
- awarding the certificate.

The Head of the Certification is authorized to delegate responsibilities to Deputy for areas covered by a particular management system standard whenever applicable.

Certain tasks from the certification process can be performed in the offices.

4.2 QM Manager / Management Representative

The QM manager is the Management Representative of PT. TÜV NORD Indonesia

4.3 Auditors

Auditors are responsible for the proper conduct of the certification process in line with this procedure and other relevant KAN regulations.

Within the context of the competent certification decision, lead auditors permanently employed at PT. TÜV NORD Indonesia who are not involved in the audit procedure can be included in the review and release process.

4.3.1 Technical Experts

Technical experts can be employed to complete competence requirements for an audit team. They always act under the direction of an auditor and do not contribute to audit time.

4.4 Sales

- The employees of the Sales department handle cost calculation of orders , the formulation of the offer and conclusion of contract as well as the implementation of the certification procedure in terms of the PT. TÜV NORD Indonesia system.
- They have responsible to follow up and Monitor the Questionnaire , Quotation (offer) and Contract for Certification to Client.
- Sales Department file Original Record of Contract for Certification, Quotation and Questionnaire.

4.5 Administration

The employees of the administration maintain and update the auditors and experts record.

They have responsible to send the Questionnaire and Contract for Certification to Client

They prepare the issue of the certificates and send them to the customers. They file the certification records.

They monitor and organise the performance of the Certification, Surveillance and Re-certification audits on behalf of the certification body management

5. Reference

- a) MM-TNI-001, Manual Mutu
- b) PMLF-TNI-02, Management System Certification
- c) ISO/IEC 17021:2015 - Part 1, Conformity assessment – Requirements for bodies providing audit and certification of management system
- d) ISO 9000 : 2005; Quality Management Systems – Fundamentals and Vocabulary
- e) ISO 50003:2014, Energy Management Systems – Requirement for Bodies Providing Audit and Certification of Energy Management System
- f) ISO 50001:2011, Energy Management Systems – Requirements with Guidance for Use
- g) ISO 50002:2014, Energy Audit – Requirements with Guidance for Use
- h) ISO 50004:2014, Energy Management Systems – Guidance for The Implementation, Maintenance, and Improvement of an Energy Management System
- i) ISO 50006:2014, Energy Management Systems – Measuring Energy Performance Using Energy Baselines (EnB) and Energy Performance Indicators (EnPI)N- General Principles and Guidance
- j) ISO 50015:2014, Energy Management Systems – Measurement and Verification of Energy Performance of Organizations – General Principles and Guidance

6. Procedure

6.1 Customer Inquiry / Drafting of Offer

Refer to Procedure PMLF-TNI-02 Management System Certification

The process is initiated when an applicant makes an inquiry or an order received through sales activities. The applicant is informed of the basic certification process and fill out questionnaire **FT-TNI-001**. PT. TÜV NORD Indonesia conduct a review of the questionnaire and supplementary information for certification before proceeding with the audit.

Following the review of the questionnaire, PT. TÜV NORD Indonesia shall either accept or decline an application for certification. When the certification body declines an application for certification as a result of the review of application, the reasons for declining an application shall be documented and made clear to the client.

Before audit preparation (6.3), the applicant shall submit compulsory documents and records that are listed in FEn-TNI-002 rev.00 Review of Document.

Based on the customer requirements the audit stage 2 may be performed as a direct follow-up of the audit stage 1. However, it is required to inform the customer that weak points which might erase in the audit stage 1 may lead to nonconformities in the audit stage 2. As a consequence the interruption of the audit is also possible.

It is good practice that the time gap between the two audit stages is not longer than three months.

6.2 Determining Audit Time

In determining the audit time, the following factors shall include:

- a) Energy sources
- b) Significant energy issues
- c) Energy consumption
- d) The number of EnMS effective personnel

The audit time includes the on site time at the organization's location, audit planning, document reviewing and audit reporting. The calculation method of audit duration use form **FEn-TNI-009 EnMS Audit Duration**. It determines the audit duration for initial certification, surveillance and recertification. Total audit stage 1 is about 30% of the total certification audit. The audit duration may be reduced if the organization has integrated the EnMS with another certified management system. The adjustment in time due to another certified management system shall no exceed a 20% reduction.

The audit man days are based on eight hours per day. Adjustment may be required based on local, regional or national legal requirements.

6.3 Audit Preparation

Refer to Procedure PMLF-TNI-02 Management System Certification

A Team and Approval using form **FEn-TNI-015** has to be approved by *Head of Certification Body prior to the audit.*

An audit team is appointed and the customer is informed of the team members once the contract is signed. Clients must be informed in advance that they can object against any member of the audit team with proper justification.

If Head of Certification Body as Lead Auditor or Auditor, Head of Certification Body must appointed competence personnel to approved A Team. The criteria for composing the audit team are:

- a) the audit must be performed with the participation of a PT. TÜV NORD Indonesia nominated lead auditor,
- b) for audits of less than four days on-site, the use of an audit team of at least two auditors is **optional**,
- c) for audits of four days or more on-site, the use of an audit team of at least two auditors is **mandatory** (in respect to single site),
- d) at least one member of the audit team must have the technical competence of the technical area the audit. This is required for audit stage 1 also. In audits of more than one management system by the same team, the competence requirements must be fulfilled for each standard.

6.4 Audit Stage 1

Refer to Procedure PMLF-TNI-02 Management System Certification

The result of document review using form **Review of Document (FEn-TNI-002)** and the report of stage 1 using form **Certification Report Stage 1 (FEn-TNI-011)**

The audit stage 1 shall include:

- a) Confirmation of the scope and boundaries of EnMS Certification
- b) Review of graphical or narrative description of the organization's facilities, equipment, systems and processes for the identified scope and boundaries
- c) Confirmation of the number of EnMS effective personnel, energy source, significant energy uses and annual energy consumption in order to confirm the duration of audit
- d) Review the documented results of the energy planning process

Review of a list of the energy performance improvement opportunities identified as well as the related objectives, targets and action plans.

6.5 Audit planning

Refer to Procedure PMLF-TNI-02 Management System Certification

The Lead Auditor or Auditor is responsible for preparing an audit plan which includes all EnMS requirements to be audited, the names of the relevant units within the customer's organisation and a timescale for the audit. The Lead Auditor will coordinate the audit plan with the audit team and the customer's representative.

An audit programme for the full certification cycle shall be developed to clearly identify the audit activities required to demonstrate that the client's EnMS fulfills the requirements for certification to the selected standard(s) or other normative document(s).

The audit objectives shall be determined by the certification body. The scope, boundaries, and criteria shall be established after discussion with the client. The audit scope shall describe the physical locations, organizational units, activities and processes to be audited. If in initial audit or re-certification process covering different locations (more than one), the scope of an individual audit may not cover the full certification scope, but the totality shall be consistent with the scope in the certification document.

The audit criteria shall be used as a reference against which conformity is determined, and shall include the requirements and documentation of the EnMS developed by the client.

6.6 Audit Stage 2

Refer to Procedure PMLF-TNI-02 Management System Certification

During the audit stage 2, the Audit Team shall gather the necessary audit evidence to determine that the improvement of energy performance has been implemented prior to the certification decision making. Confirmation the improvement of energy performance is required to for granting initial certification.

At the time of audit, energy performance must be checked at least include the following below:

- a) Energy planning (All sections)
- b) Operational control
- c) Monitoring, measurement and analysis

The presence and justification of observers, if needed, during an audit activity shall be agreed to by the certification body and client prior to conduct of the audit. The observers shall not influence or interfere in the audit process or outcome of the audit.

6.7 Audit Findings

The auditors record their findings during the audit either by hand or electronically. The findings are assigned to requirements of the standard and evaluated:

- **Conformity,**

- Opportunity for improvement, and
- **Non conformities**, that represent 1) Failure to fulfill one or more requirements of the management system standard, or 2) A situation that raises significant doubt about the ability of the client's management system to achieve its intended outputs; can be classified as **major nonconformities (hereafter is indicated as Nonconformity A/NC A)**. Other nonconformities can be classified as **minor nonconformities (hereafter is indicated as Nonconformity B/NC B)**.

➤ **Nonconformity A (NC A)**

Nonconformity that affects the capability of the management system to achieve the intended results

Note : Classifying nonconformities as major could be as follows:

- a) audit evidence that energy performance improvement was not achieved;
- b) a significant doubt that effective process control is in place;
- c) a number of NCs B associated with the same requirements or issued could demonstrate a systemic failure and thus constitute a major nonconformity.

➤ **Nonconformity B (NC B)**

All other nonconformity that is not classified as NC A or a failure in a requirement of management system which does not impact the capability to achieve the expected outcome.

Note: Classifying nonconformities as minor could be as follows:

- a) One of the requirements is not fulfilled.*
- b) Inconsistency of procedure implementation.*

The audit report is prepared based on the audit findings. The audit report of stage 2 using form **Audit Report (FEn-TNI-012)**. Nonconformities and opportunities for improvement are documented in the audit report. Nonconformities are written in **Nonconformities Report (FMLF-TNI-002)**. Action plans for nonconformities are prepared up by the customer.

The corrections and corrective actions which are proposed by the client are verified by means of follow-up-audit or submission of documentation within a maximum of 90 days, or by verification of a proposed action plan during the next audit. The lead auditor decides which of these measures are appropriate.

6.8 Certificate Issue and Surveillance

6.8.1 Certificate Issue

Refer to Procedure PMLF-TNI-02 Management System Certification

A review of the certification file could be by veto person to assist Head of Certification Body make a certification decision. Veto person is auditor/technical expert or competence personnel but different personnels from those who carried out the audits.

If Head of Certification Body as Lead Auditor or Auditor, Head of Certification Body must appointed competence personnel to make the certification decision.

Head of Certification shall ensure at least one Person as veto person has the technical competence of the technical area of the audit. If veto person haven't the technical competence of the technical area of the audit, the veto person could be made by 3 (three) auditors that none of them carried out the audit .

If the review is positive, the Head of Certification Body Release the Certification File.

6.8.2 Certificates

In general, the validity of the certificate does not exceed three years from the issue date. Expiry of validity depends on the date of certificate decision.

6.8.3 Surveillance Audit

Refer to Procedure PMLF-TNI-02 Management System Certification

Within the validity of the certificate (3 years) surveillance audits shall be conducted at least once a year.

The criteria for composing the audit team are:

- At least one member of the audit team must have the technical competence of the technical area of the audit . In audits of more than one management system by the same team, the competence requirements must be fulfilled for each standard.
- Or
- One member of Audit Team as Auditor or Lead Auditor Certification Audit (in the same client)
- Or
- At least one of Surveillance within the validity of the certificate (3 years) one member of the audit team must have the technical competence of technical area of the audit

The requirements of the following clauses of ISO 50001 are audited in each surveillance audit:

- 4.3 Energy policy
- 4.4.2 Legal obligations and other requirements
- 4.4.3 Energy review
- **4.4.6 Energy objectives, energy targets and EnMS action plans**
- 4.5.5 Operational control
- **4.6.1 Monitoring, measurement and analysis.**
- 4.6.2 Evaluation of compliance
- 4.6.3 Internal audit of the energy management system

- 4.6.4 Nonconformity, corrective action and preventive action
- 4.7 Review of the energy management system by top management
- *Use of logos and marks (ISO 17021:2011 clause 8.4)*

The other requirements are divided up and allocated in such a way that all elements of ISO 50001 are assessed at least once before the recertification audit. In addition, corrective actions from the previous audit recorded in the audit report must also be verified. During the surveillance audits, the certification body shall review the necessary audit evidence to determine whether or not continual energy performance improvement has been demonstrated.

6.9 Suspend and withdrawn of Certificate

Refer to Procedure PMLF-TNI-02 Management System Certification

6.10 Recertification audit

Refer to Procedure PMLF-TNI-02 Management System Certification

6.11 Extension / Reduction audit

Refer to Procedure PMLF-TNI-02 Management System Certification

An extension / reduction audit can be performed to extend or reduce the scope and boundaries of an existing certificate. The extension / reduction audit may be carried out within the scope of a surveillance audit, re-certification audit or on an independently selected date.

The validity period of the certificate remains unaffected. Exceptions have to be justified in writing.

The lead auditor / audit team will review the EnMS documents concerning the extended / reduced scope & boundaries and audit all requirements which are affected by the extension / reduction.

The further progress with regard to the documentation and release of the audit procedure corresponds to a certification audit.

6.12 Transfer of certificates from other Certification Bodies

Refer to Procedure PMLF-TNI-02 Management System Certification

6.13 Multi-site Sampling

Describe on PEn-TNI-003

Procedure PEn-TNI-001
Energy Management System Certification



7. Applicable Documents	
MM-TNI-001	Lembaga Sertifikasi Manual
FEn-TNI-001	Questionnaire to Assist Preparation for an EnMS Certification
FEn-TNI-002	Review of Document
FEn-TNI-003	Offer (Quotation)
FMLF-TNI-003	Contract for The Certification of Management System
FEn-TNI-009	EnMS Audit Duration
FEn-TNI-015	A Team and Effort Approval
FMLF-TNI-007	Audit Schedule
FEn-TNI-011	Certification Audit Report stage – 1
FEn-TNI-012	Audit Report
FMLF-TNI-011	Release of Audit Documentation
FMLF-TNI-005	Auditor Note
FMLF-TNI-002	Non Conformity Report
	Certificate Draft