**Witness report For HCB Audit Activity (N#)\***

***\*****Kindly fill and complete the table for each witness visit seprately*

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| --- | --- | --- |
| **General** | | |
| **HCB Name/ Location:** | |  |
| **HCB ENAS ID:** | |  |
| **Technical Assessor/ Islamic Expert Names:** | |  |
| **Witness related to assessment type (Initial, surveillance, scope explanation, re-assessment):** | |  |
| **Witnessed HCB Audit Information** | | |
| **Site Identification:** | | **Name :** |
| **Address :** |
| **Main activity :** |
| **Number of Employees :** |
| **Halal Category :** |
| **Audit Date:** | |  |
| **Audit Type ( Initial Certification, Surveillance1 surveillance 2):** | |  |
| **Certification Standard:** | |  |
| **HCB Audit Team composition:** | |  |
| **PLEASE put the findings of the witness audit as follows:** | | | |
| 1. **Description of the witnessed part of the audit:** | | | |
|  | | | |
| 1. **Audit preparation by HCB audit team** | | | |
| **2.1** | **Relevance of documents used for preparation, information on results of previous audits, others** | | |
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| **2.2** | **Auditors preparation: document review, list of questions, checklist** | | |
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| **2.3** | **Ability and competences of the assigned audit team** | | |
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| **3. Opening Meeting:** | | | |
| **3.1** | **Performance at opening meetings in terms of explanation of procedures and documents e.g. non-conformity forms to be used, future arrangements etc.** | | |
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| **4. Conduct of the audit (Considering the type and scope of the evaluation ....)** | | | |
| **4.1** | **Coverage of the requirements/ relevant standards by the audit team:** | | |
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| **4.2** | **Use of the certification body's documents, certification rules, for example, the use of symbols…:** | | |
|  | | |
| **4.3** | **Sampling techniques: Number, Coverage, Importance to client’s business, visits to key locations** | | |
|  | | |
| **4.4** | **Collecting evidence Methods : interviews, observation of activities, investigation of documents and records, relevance of techniques:** | | |
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| **4.5** | **Interviews with concerned staff, adaptation to the situation:** | | |
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| **4.6** | **Non-conformities formulation and raising non-conformities on Fact (and not on Conjecture)** | | |
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| **4.7** | **Audit techniques for the products covered by the certification scope:** | | |
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| **4.8** | **Ability to deal with non-compliant situations i.e. over stressing, causing embarrassment, inadequate explanations or lack of understanding by the client’s representative.** | | |
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| **4.9** | **For monitoring and renewal audit: monitoring plan for the certification cycle, monitoring of plan for this audit, use of previous audit reports, follow-up of previous audit findings:** | | |
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| **5. Closing Meeting** | | | |
| **5.1** | **Exchanges between the auditors, preparation of the closing meeting, agreement on the conclusions, agreement on the roles and tasks for the meeting:** | | |
|  | | |
| **5.2** | **Relevant representation of the company, participating in the closing meeting:** | | |
|  | | |
| **5.3** | **Presentation of the results and conclusions, the agreement of the non-conformity audited, the resolution in case of divergence of opinion:** | | |
|  | | |
| **5.4** | **Explanation of the consequences of the outcome of the certification process, rigorous reporting, explanation of the decision-making process:** | | |
|  | | |
| **6. Conclusions** | | | |
| **6.1** | **Audit Scope confirmation, relevant conclusions** | | |
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| **6.2** | **Do you agree with the general conclusions of the audit team:** | | |
|  | | |
| **6.3** | **Attitudes and skills of auditors** | | |
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| **ENAS Technical Assessor/ Islamic Expert Recommendation** | | **Yes/No/partially** |
| **Has the audit team been effective in this audit** | |  |
| **Is the number of the auditors/ Islamic experts sufficient** | |  |
| **Do the auditor(s)/ Islamic experts have the appropriate skills and knowledge to conduct the audit** | |  |
| **Has the auditor(s) / Islamic Experts conducted the audit suitably according Certification body policies and procedures? If No, Please comment here.** | |  |
| **Any comment to add, please write here** | |  |
| **NCs raised based on this audit:**  *(refer to NC number in ENAS NCR Sheet)* |  | |
| **Names of ENAS Technical Assessor/ Islamic Expert who witnessed this audit:** | | |
| **Date:** | | |
| **Signatures:** | | |