ASC Farm Certification and Accreditation Requirements (CAR)

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**RESPONSIBILITY FOR THESE REQUIREMENTS**

Aquaculture Stewardship Council (ASC) holds responsibility for this document

<table>
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<tr>
<th>Version No</th>
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<td>Document revised to conform to ISO 17-65:2012, ISO 19011:2011, changes to the requirements for social auditors, changes to sections on chain of custody to conform to MSC requirements, preparation of an ASC feed standard, and other changes in response to variance requests by CABs, recommendations for improvements by Stakeholders, and minor editorial changes.</td>
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| 2.1        | 1 August 2017           | N/A            | 1. Adding new requirements for multi-site certification, in particular:  
- 7.1.1.1: Added clarification requirements regarding the list of documents and records  
- 17.1: Added requirements for multi-site unit of certification to replace current provisions 17.1.5 and 17.1.7  
- Annex A: Added new definitions related to Multi-site certification (denoted with *)  
- Annex B: Added Table D – Requirements for internal auditors; added new requirements for Lead auditors in Table B – B18 and B21  
- Annex E: New annex containing requirements for CABs to audit multi-site Client s. |
| 2.2        | 9 April 2019            | N/A            | 1. Release  
- Adding new type of Unit of Certification which is Group to become 17.1.4  
2. Effective date from which groups can be audited against requirements specified in this document. |
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Section 14: Requirements for the Social Audit Methodology (presented in April 2019 public consultation). |
2. CAR revision new or updated requirements:

Part A: Section 2 b, f, g; 4.1.3; 4.1.5; 4.7.2; 5.3.1.4; 5.3.1.9; 5.3.2; 7.1.1.1; 7.1.4; 7.1.4.1; 8.1 and 8.2

Part B: 3.1; 4.1; 4.2; Section 5; 6.1-6.5; 7.2.1; 7.3; 7.5.4; 7.5.5; 7.5.7; 7.5.9; 7.5.12; 7.5.13; 8.2-8.5; 9.5; 10.1; 10.2; 11.2; 12.1; 13.5-13.7; Section 15; Section 16; 17.6; 18.2; 18.3; 18.3.5; 18.3.6; 18.3.8-18.3.11; 18.4-18.6; Section 19; 20.2; 20.3; 21.2.1; 21.3; 22.1.13; 24.1.7; 24.2.1; 24.2.3; 24.3.2; 24.4.1; Section 25; 26.1; 26.2; 26.3.2; 27.2; 28.1 c; 28.3.1.1; 28.1.2; 28.3.1.4; 28.3.1.5; 29.1 d; 30.2; 30.3; 30.6.1 c; 30.7-30.10;

Annex A: ASC Vocabulary is in the ASC website

Annex B: introductory sentence related to ISO:19011:2018; Table A item 5,

Annex C: Working days changed to Calendar days; C3.1; C.; C12

Annex E: E2.1 a,b; E3.7

Annex F: F4.7.2 m; F4.7.4
ABOUT THE AQUACULTURE STEWARDSHIP COUNCIL (ASC)

The Aquaculture Stewardship Council (ASC) is an independent, not-for-profit organization that operates a voluntary, independent third-party certification and labelling programme based on scientifically robust Standards.

The Standards define criteria that help to transform the aquaculture\(^1\) sector\(^2\) towards environmental sustainability and social responsibility, as per the ASC Mission.

**ASC Vision**

A world where aquaculture plays a major role in supplying food and social benefits for mankind whilst minimising negative impacts on the environment.

**ASC Mission**

To transform aquaculture towards environmental sustainability and social responsibility using efficient market mechanisms that create value across the chain.

**ASC Theory of Change**

A Theory of Change (ToC) is an articulation, description and mapping out of the building blocks required to achieve the organisation’s vision.

ASC has defined a ToC which explains how the ASC certification and labelling programme promotes and rewards responsible fish farming practices through incentivising the choices people make when buying seafood.

ASC’s Theory of Change can be found on the [ASC website](https://www.asc.org).
THE ASC DOCUMENT AND CERTIFICATION SYSTEM

ASC is a code compliant member of the ISEAL Alliance and implements a voluntary, independent third-party certification system consisting of three independent actors:

I. Scheme Owner i.e. Aquaculture Stewardship Council
II. Accreditation Body i.e. Assurance Services International (ASI)
III. Conformity Assessment Body (CAB) i.e. accredited CAB

Scheme Owner

ASC, as scheme owner:

- sets and maintains Standards according to the ASC Standard Setting Procedure. The Standards are normative documents.

- sets and maintains the Certification and Accreditation Requirements (CAR). The CAR describes the accreditation requirements, assessment requirements and certification requirements. The CAR is a normative document.

- sets and maintains the Certification Requirements for the Unit of Certification (RUoC). The RUoC describes the certification requirements, that apply to the entity seeking certification, in addition to the standard requirements. The RUoC is a normative document.

- Sets and maintains the Audit Manual which provides guidance to the auditor and Unit of Certification (UoC) on how to interpret and best implement the indicators within the relevant Standard. The Audit Manual is a non-normative document.

These above listed documents are publicly available on the ASC-website.

Accreditation Body

Accreditation is the formal recognition by an independent body, generally known as an Accreditation Body (AB), that a Conformity Assessment Body (CAB) operates according to international standards.

Assessment findings of accreditation audits and an overview of current accredited CABs is publicly available via the ASI-website (www.asi-assurance.org).

Conformity Assessment Body

3 Third-party Certification System: see Definition List.
The UoC contracts the Conformity Assessment Body (CAB) who employs auditor(s) that conduct a conformity assessment (hereafter ‘audit’) of the UoC against the relevant ASC Standard. The management requirements for CABs as well as auditor competency requirements are described in the CAR and assured through accreditation.

ASC Audit and Certification Process

An ASC audit follows strict process requirements. These requirements are detailed in the CAR. Only accredited CABs are allowed to audit and certify a UoC against ASC Standards. As scheme owner, ASC itself is not, and cannot be, involved in the actual audit or certification decision of a Unit of Certification (UoC). Granted certificates are the property of the CAB.

Audit findings of all ASC audits, including granted certificates, are made publicly available on the ASC-website. These include audit findings that result in a negative certification decision.

ASC Logo use

ASC-certified entities shall only use the ASC Logo and trademarks if authorised through a signed Logo Licence Agreement.

Unauthorised logo display or use of trademarks is prohibited and will be treated as a trademark infringement.

MSC Chain of Custody (CoC) Certification and the ASC trademarks

The ASC logo and claims have been developed for use by certified and licensed farms, processors, and distributors, so that all parts of the value chain and especially consumers can easily identify ASC certified product(s). The use of the ASC logo claims and trademarks can be applied only to products handled by a certified chain of custody (CoC) that ensures traceability of certified products from production to final point of sale. For the ASC, CoC is certified through application of an MSC chain of custody system. Only products that originate in ASC certified operations and are sold through the MSC certified CoC, are eligible to carry the ASC logo, claims or trademarks.

Companies that are already certified to an MSC Chain of Custody Standard and wish to also handle ASC certified products, may request a scope extension from their CAB to add ASC products into the scope of their existing CoC certificate. Further specific requirements may need to be complied to handle ASC products. Further information can be found on the ASC website.

Just as with the ASC standards, the ASC logo, claims, and trademarks are owned by the ASC, which regulates all aspects of their use.
INTRODUCTION TO THIS DOCUMENT

The purposes of the ASC Certification and Accreditation Requirements [CAR: this document] are:

1. To establish requirements for certification to enable all Conformity Assessment Bodies (CABs) to operate in a consistent and controlled manner.
2. To establish requirements for accreditation of CABs by the ASC appointed accreditation body.
3. To provide the transparency that is required of an international certification scheme for it to have credibility with potential Stakeholders, including governments, international governmental bodies (e.g., regulatory bodies, managers), CABs, suppliers of aquaculture products, non-governmental organisations, and consumers.
4. To provide documentation to assure long-term continuity and consistency of the delivery of ASC certification.

The ASC’s appointed accreditation body will set the scope of accreditation for CABs with reference to the ASC certification requirements described in this document.

The ASC certification and accreditation requirements have been developed to be in full compliance with the FAO Technical Guidelines on Aquaculture Certification.

ASC is a code compliant member of the ISEAL Alliance and its operations are managed to be in conformity with ISEAL codes of good practice. More information is available on the ISEAL website

The ASC’s certification and accreditation requirements are set out in two parts, which apply to all CABs conducting ASC audits:

- Part A – General certification requirements
- Part B – Operational certification requirements

Chain of custody for ASC certified products is assured through MSC CoC certification.

Primary producers that are certified to an ASC standard may sell products within the scope of their certificate as certified, without being certified to the MSC chain of custody system.

The requirements that apply to these sales are described in this document.

This document has been developed to address the specific needs of the certification to ASC Standards. The ASC gratefully acknowledges the support of MSC, FSC (Forest Stewardship Council) and SAAS (Social Accountability Accreditation Services) in lending their experience and permitting elements of their systems to be incorporated into this document.

The CAR is subject to periodic review to incorporate revisions based on developing accreditation and certification practices. As with the ASC standards, the review and revision interval is every three to five years. During this period, the ASC collects and analyses comments submitted by stakeholders.
In the interim, any issues or concerns can be raised by contacting certification@asc-aqua.org.

All planned review and revision of the CAR will be announced to invite public feedback with relevant documents published on the ASC website.

Available Language(s)

The official version of this document is English. The ASC may translate it into additional languages as necessary. In case of any inconsistencies and/or discrepancies between available translation(s) and the English version, the online English version (pdf-format) will prevail.

To request a hard copy of this document, public summaries, and other related materials, please contact the Programme Assurance Team at certification@asc-aqua.org.

NOTE: This document has been developed for technical use by accredited and applicant CABs, therefore casual readers may find that it is not easy to read. For general readers it is recommended that the ASC website be reviewed prior to this document.
PART A - GENERAL REQUIREMENTS

1. Scope

Part A sets out the requirements that all CABs shall implement in their own procedures and management system. Following these requirements allows them to carry out certification services for Clients that wish to make a claim that the aquaculture product(s) they sell are ASC certified.

2. Normative References

The documents listed below are part of the ASC Certification Requirements.

For references that have a specific date or version number, later amendments or revisions do not apply. CABs are encouraged to review the most recent editions and any guidance documents available, to gain further insight.

For references without dates or version numbers, the latest edition of the document referred to applies.

a) ASC Standards: See www.asc-aqua.org
b) ASC Certification Requirements for Unit of Certification (RUoC)
c) ISO 17065 Conformity Assessment – Requirements for bodies certifying products, processes and services
d) ISO 19011 Guidelines for auditing management systems
e) ISO 17021-1 Conformity assessment – Requirements for bodies providing audit and certification of management systems
f) ISO 9001 Auditing Practices Group Guidance on: REMOTE AUDITS
g) IAF MD 4:2018 IAF Mandatory document for the use of Information and Communication Technology (ICT) for auditing/assessment purposes.

3. Terms and Definitions

3.1. All definitions are published in the ASC Vocabulary Portal.

4. General Requirements

4.1. Requirement of Accreditation

4.1.1. A CAB shall have had its application to the ASC appointed accreditation body for accreditation to the scope of the certification it wishes to provide, accepted before starting to sell certification services.

4.1.2. A CAB shall only award certificates once it is accredited and only within the scope of its accreditation.
4.1.3. A CAB shall recognise that Clients with a valid certificate issued by other accredited CABs conform to relevant ASC standards.

4.1.4. A CAB shall authorise the ASC appointed accreditation body to publish the CAB’s company name, full address and contact persons’ details.

4.1.5. A CAB shall authorise the ASC appointed accreditation body to publish accreditation assessment reports on its website.

4.2. **Conformity to ISO 17065, 17021, 19011 and the ASC requirements**

4.2.1. All CABs shall conform to the requirements of ISO 17065 and all other ASC Requirements relevant to the scope of accreditation applied for or held.

4.2.2. CABs shall conform to the ASC requirements in this document in the case of a conflict with any listed ISO standards.

4.2.3. CAB audit personnel should follow guidance provided in ISO 19011.

4.2.4. The CAB shall develop procedures for ASC social audits that are consistent with the latest version of ISO 17021 and ISO 19011, making adaptations taking into account specific requirements of this CAR.

4.2.5. In cases of inconsistency between ISO 17021 and ISO 19011, the former shall prevail.

4.3. **Normative annexes**

4.3.1. CABs shall follow annexes in this document, as applicable.

4.4. **Compliance with legal requirements**

4.4.1. CABs shall comply with the legal requirements in the countries in which they operate.

4.4.2. Key CAB personnel shall demonstrate understanding of applicable legislation and regulations of the country where certification services are being offered.

4.5. **Certification Decision-Making Entity**

4.5.1. The CAB’s decision-making entity shall authorise and justify in writing any changes to the terms of certification.

4.6. **Communication with the ASC**

4.6.1. CABs shall follow the communication requirements in Annex D.

4.7. **The ASC CAB calibration workshops**

4.7.1. CABs shall participate in the annual ASC, CAB and appointed accreditation body tripartite sessions.

4.7.2. CABs should participate in the workshops and calibrations sessions organised by the ASC.
4.8. Use of the ASC and CAB trademarks

4.8.1. All uses of the ASC trademark(s) by a CAB shall be subject to an ASC logo licence agreement.

4.8.2. The CAB shall have documented procedures for the issue and use of any logo or trademark of the CAB (ISO 17065 Use of license, certificates and marks of conformity) for the ASC program, including procedures for pre-publication review and authorisation by the CAB of all uses of the CAB’s logo, claims or trademarks by ASC Certificate Holders.

5. Structural Requirements

5.1. Mechanism for safeguarding impartiality

5.1.1. The CAB shall have a documented structure which safeguards impartiality within the CAB and its operations.

5.1.2. The structure shall be described in the documents that establish the CABs legal status, or by some other means that prevents change which could compromise the function of the structure to safeguard impartiality.

5.1.3. This may be through vesting authority to the impartiality structure for approval of policies, and some significant procedures such as the rules of procedure for the operation of the impartiality structure itself.

5.1.4. The impartiality structure may be an impartiality committee or equivalent structure.

5.1.5. The structure may be independent of management or combined with management function.

5.1.6. The CAB shall be responsible for:

5.1.6.1. The adequacy of the process for identifying and involving the relevant Stakeholders.

5.1.6.2. The impartiality structure itself to demonstrate the adequacy of their participation.

5.1.6.3. Providing all the information required for the impartiality structure to perform their job, including, but not limited to, the reasons for:

a) all significant decisions and actions

b) the selection of persons responsible for particular activities in respect to certification.

5.1.7. The impartiality structure shall involve all parties concerned with the development of principles and policies for the functioning of the CABs certification system. This may include the CAB itself, regulatory authorities,
NGOs, consultants, academics, feed producers, primary producers, processors, wholesalers, retailers, food service providers, restaurants and consumers.

5.1.7.1. This should be a high-level committee with the responsibility for ensuring impartiality and not predominantly a technical or sector-based group.

5.1.7.2. The membership shall not only be selected to reflect the technical expertise of the CAB.

   a) When necessary, it can be supported by technical experts as required
   b) No single interest shall predominate.

5.1.8. Documentation for the mechanism for safeguarding impartiality shall include:

5.1.8.1. Rules of procedure that establish the duties and rights of members (e.g., rule for attendance, quorum and voting).

   a) Members shall sign declarations of confidentiality
   b) Members shall sign annual declarations of the absence of conflicts of interest.

5.1.8.2. The principle that impartiality shall be established at three levels within the CAB:

   a) Strategies and policies
   b) Decisions on certification
   c) Auditing.

5.1.9. The impartiality structure shall conduct annual reviews that include:

5.1.9.1. The current and intended activities of the CAB.

5.1.9.2. The competence of key CAB personnel.

5.1.9.3. The potential impartiality risks associated to the CAB’s operation.

5.1.10. The function of the structure shall ensure that:

5.1.10.1. Commercial and other considerations do not prevent the objective provision of certification services.

5.1.10.2. The period of time specified by the CAB for which personnel shall not be used to review or make a certification decision for a product for which they have provided consultancy time shall be no less than 2 years.

5.1.10.3. No audit or certification services shall be provided to Clients if any of the products or services provided by the CAB or the CAB’s personnel are still in use by the Client.
5.2. Confidentiality

5.2.1. The CAB shall document arrangements to safeguard confidentiality (ISO 17065 4.5).

5.3. Complaints and Appeals

5.3.1. The CAB shall have a documented procedure for handling complaints and appeals that includes:

5.3.1.1. A requirement that all formal and informal complaints, appeals, concerns or objections related to the activities of the CAB, a Certificate Holder or an applicant, shall be kept on file and logged (ISO 17065 section 7.13.1).

5.3.1.2. A description of involvement of the ASC appointed accreditation body and the ASC in case of appeals.

5.3.1.3. Reference to the ASC appointed accreditation body’s dispute mechanism, including incidents, complaints and appeals handling processes.

5.3.1.4. CABs shall report all logged issues using FORM 4 submitted annually no less than forty-two (42) days prior to the annual surveillance by the ASC appointed accreditation body’s visit. Copies shall be sent to the ASC and the ASC appointed accreditation body.

5.3.1.5. In case of suspension or withdrawal of the ASC accreditation of the CAB, all logged issues shall be sent to the ASC appointed accreditation body and ASC as part of the suspension or withdrawal process, using FORM 4 no later than the final date of accreditation.

5.3.1.6. Determining whether the complaint or appeal relates to certification activities for which the CAB is responsible.

5.3.1.7. The appointment of an independent member of the CAB management who shall:

   a) Report to top management
   b) Be responsible for ensuring that procedures (ISO 17065 complaints and appeals) are followed.

5.3.1.8. A procedure for reviewing all complaints and escalate them to the responsible CAB personnel as appropriate.

5.3.1.9. Encouragement for the complainants to submit copies of their complaints directly to the ASC at:

   a) Email: complaints@asc-aqua.org
b) Mailing Address:

Aquaculture Stewardship Council,
Daalseplein 101,
3511 SX Utrecht,
The Netherlands

5.3.2. The CAB shall ensure that their complaints and appeals procedure is publicly available (e.g. on CAB website).

6. MANAGEMENT SYSTEM REQUIREMENTS FOR CABs

6.1. Internal Audits
6.1.1. Internal audits shall be performed at least once every twelve (12) months or completed within a twelve (12) month time frame for segmented (or rolling) internal audits.

6.1.2. Internal audits shall cover all ASC Requirements in a planned and systematic manner.

7. RESOURCE REQUIREMENTS

7.1. CAB Personnel
7.1.1. All personnel involved in delivering conformity assessment services shall be knowledgeable about the aims and objectives of the ASC.

7.1.1.1. This shall include knowledge of international agreements, conventions and treaties relevant to the ASC certification scope as appropriate to the role and responsibilities of each individual.

7.1.2. The CAB shall register all auditors working with the ASC scheme with the ASC and the appointed accreditation body.

7.1.3. The CAB shall ensure that all CAB personnel shall not participate in ASC conformity assessment services until they have the required experience, completed the required training and demonstrated the required competencies for their role as described in Annex B.

7.1.4. The CAB shall not assign the same lead auditor to audit a UoC for more than 3 consecutive calendar years.

7.1.4.1. If the CAB has only one lead auditor in a given region and is not able to assign a different lead auditor, the CAB shall submit a variance request, on a case-by-case basis, explaining how to avoid the potential conflict of interest due to the familiarity with the Client and its UoC.
7.1.5. The CAB shall have a written procedure to confirm annually that every auditor is qualified and competent as described in Annex B and registered with the ASC as required. This procedure shall include:

   a) Regular performance evaluation of CAB personnel involved in the ASC conformity assessment activities
   b) Annual calibration sessions on auditing against the ASC standards and requirements to ensure consistent practice among auditors and other CAB personnel
   c) Record keeping of all training and calibration sessions including a record of the individuals that participated.

7.1.6. Audit teams shall include an ASC lead auditor.

7.1.7. Audit teams shall include member(s) that collectively have the following experience, expertise; language skills and cultural knowledge required to conduct an effective audit.

7.1.7.1. Relevant knowledge of national and local laws that apply to the operation of the UoC being audited, that includes but is not limited to:

   a) Environmental laws.
   b) Occupational health and safety laws
   c) Labour laws (both national and regional)
   d) Laws governing ownership and use of land and water
   e) Licenses and permits
   f) Knowledge of Client’s operations regarding the wages and working time applicable to different types of UoC in different aquaculture systems
   g) Cultural knowledge of the region/location where the UoC is located and of existing differences in the kinds of employees employed (such as full-time, temporary, contracted and migrant workers)
   h) Applicable languages and dialects, both written and spoken, by the majority of employees in the UoC
   i) Local building codes and bylaws.

7.1.7.2. Environmental and social science and technology, environmental management methods and aspects of operations, that includes but is not limited to:

   a) Knowledge and experience related to the ASC Standard being audited.
   b) Environmental issues in the area of the operation
   c) The management of natural resources
   d) Environmental protection
   e) Environmental monitoring tools and technologies (i.e. GIS technologies)
f) The interaction of the activities, products, services, and operations with the environment

g) Sector specific terminology

h) Environmental aspects and impacts

i) Methods for evaluating the significance of environmental aspects

j) Aspects of operational processes, products and services

k) Monitoring and measurement techniques

l) Technologies and methods for the prevention of pollution

m) Social aspects of applicant operations and their surrounding communities.

7.1.7.3. The CAB shall use technical experts independent of the Client to support the audit team. The area of expertise and affiliations of the technical expert shall be recorded in the audit report.

7.1.7.4. When translation services are needed to conduct the audit, the CAB shall select interpreters that are independent of the Client.

7.1.7.5. The CAB shall have procedures to determine if potential interpreters are competent and skilled in interpretation from the national or local language into the operating language of the audit team. This shall include as a minimum:

a) Language certificate of the operating language of the audit team if it is not native to the interpreter.
   
i. The certificate shall be at least of level B2 according to the Common European Framework of Reference for Languages (CEFRL).
   
ii. The CAB may be exempted of this requirement when the operating language of the audit team is English and if/when interpreters come from countries/regions ranked high or very high by the EF English Proficiency Index (EPI).

b) Good understanding and experience of the interpreters, with the subjects being interpreted.

c) Detailed CVs of interpreters shall be kept on file by CABs.
8. **CONDITIONS FOR SUSPENSIONS AND WITHDRAWALS**

8.1. If the CAB accreditation is suspended or withdrawn by the ASC appointed accreditation body, the CAB shall inform ASC and all the Clients affected by the scope of the suspension within five (5) days of the date of notification, regardless of the decision of the CAB to appeal the decision.

8.2. The CAB shall allow ASC to publish on its website the suspended or withdrawn status within five (5) days from notification.
PART B - OPERATIONAL CERTIFICATION REQUIREMENTS

1. **SCOPE**

1.1. Part B sets out requirements for CABs to use when auditing Clients and their UoCs against ASC Requirements, from the application phase until the certification decision throughout the certificate lifetime. It also covers additional procedures such as transfer of certificates.

2. **NORMATIVE REFERENCES**

2.1. The documents in Part A also apply to Part B

3. **TERMS AND DEFINITIONS**

3.1. All definitions are published in the ASC Vocabulary Portal.

4. **INFORMATION FOR APPLICANTS**

4.1. The CAB’s application form shall, as a minimum, request the following information from the applicant:

   a) Applicant legal entity name

   b) Contact information

   c) Site(s) address(es) and geographical coordinates (WGS 84 i.e 52.082478, 5.117676)

   d) Satellite images with site(s) polygons. Polygons may be derived from the ASC Online Farm Mapping Tool

   e) Species and applicable version of the ASC standard

   f) Activities included in the scope of the applicant’s UoC such as stocking, nursing, husbandry, harvest, transport, processing or packing

   g) Production of non-certified products according to the conditions specified in clause 6.5 in this document and the production units (ponds, cages, tanks, lines, etc.) or batches non eligible to sold as certified, if is already defined by the time of application

   h) Declaration of open court cases related to environmental or social compliance violations or any fraudulent allegations in connection with the applicant’s UoC and the ASC requirements

   i) Declaration of any charge for or admission to cases in (h) within the last 36 months
j) Declaration where in the last 12 months the UoC has had a withdrawal of their ASC certificate, or an ASC failed initial audit where certification has not been awarded

k) Declaration of any open cases or successful prosecution in the last 24 months related to:
   i. Carrying out fraudulent activities confirmed by the statutory authority
   ii. Use or involvement of Child labour, slavery, human trafficking or forced labour

l) For multi-sites and groups, organisational structure and relationships between the applicant, internal management system, group management body and sites or group members.

4.2. The CAB shall send to applicants the documents or the respective ASC website links for:
   a) The most recent version of the applicable ASC standard(s)
   b) The most recent version of the Certification Requirements for the Unit of Certification (RUoC)
   c) Links to the ASC Variance Request & Interpretation Platform to access relevant Q&A or Variance Requests
   d) Information about the use of the ASC logo and the Logo License Agreement
   e) A brief explanation of the certification process and related timelines.

4.3. The CAB shall maintain a record identifying the document(s), including the version(s), sent to each applicant and Certificate Holder.

4.4. In cases where documents are translated for the convenience of the Client, the original version will prevail, where any differences exist between original documents and translated versions.

5. **APPLICATION REVIEW**

5.1. The CAB shall conduct an application review once a complete application form has been submitted by the client.

5.2. The CAB shall not accept the application if a certificate was withdrawn in the last 12 months with any CAB.

5.3. The CAB shall not accept the application if an audit was failed in the last 12 months with another CAB.

5.4. The CAB shall not accept the application from applicants that have been successfully prosecuted in the last 36 months for any of the following situations:
   a) Carrying out fraudulent activities confirmed by the statutory authority.
b) Use or involvement of Child labour, slavery, human trafficking or forced labour.

6. **Scope of Certification**

6.1. The CAB shall define the scope of certification taking into account:

a) Applicable certification type (i.e., Single site, Multi-site or Group).

b) Applicable ASC standard

c) Applicable species

d) Sites including production sites, storage, processing and packing facilities if located in the UoC

e) Activities undertaken at the UoC or subcontractors before the product changes ownership or is handled by any further certified chain of custody Certificate Holders. This includes but is not limited to: harvest, slaughtering, product storage, transport, processing and packing, if undertaken in the UoC.

6.2. If processing and/or packing activities are within the scope of certification, the CAB shall require a separate chain of custody certification, unless:

a) Ownership does not change, and

b) Only ASC certified products from the UoC are handled, and

c) The transportation only occurs within the premises of the UoC, and

d) Processing and/or packing facilities are at the same premises where other activities of the UoC occur.

6.3. The CAB shall issue only one valid certificate for a UoC per ASC standard.

6.3.1. The CAB may combine audits for more than one ASC standard for the same UoC.

6.4. The CAB shall define the certification type as:

6.4.1. Single site certification having all of the following elements:

a) The UoC consists of one site which has clearly defined limits and may include multiple pens, cages, ponds, tanks, raceway systems or beds. The site is either owned or contracted by the Client

b) The Client is capable of signing a binding contract that is legally enforceable

c) The Client is the owner of the certified product at all production stages or has a contract farming agreement with the owner of aquaculture species during production at the site. In cases where the product is produced by a contract farmer, ownership of the product shall be transferred to the Client before the product can be sold as ASC certified

d) The Client is the only entity authorised to sell ASC certified products.
6.4.2. Multi-site certification having all the following elements:

a) The UoC consists of more than one site, each of which has clearly defined limits and may include multiple pens, cages, ponds, tanks, raceway systems or beds

b) The Client has an identified central function in charge of assuring the compliance against the ASC requirements of all sites within the UoC, sites and are either owned or contracted by the Client

c) The Client is the owner of the certified product at all production stages or has a contract farming agreement with the owner of the aquaculture species during production at the site. In cases where the product is produced by a contract farmer, ownership of the product shall be transferred to the Client before the product can be sold as ASC certified

d) The Client is the only entity authorised to sell ASC certified products from all sites.

6.4.2.2. There are two types of Multi-site certification:

a) A multi-site without internal management system (option 1): The CAB shall audit all the sites in all the audits against the relevant ASC standard and evaluate the applicable requirements in Annex E of this document and the ASC RUoC

b) A multi-site with internal management system (option 2): The CAB shall audit all the sites against the relevant ASC standard in the initial audit and in subsequent audits a sample of sites will be selected by the CAB according to the requirements in Annex E of this document and the ASC RUoC.

6.4.3. A group certification having all of the following elements:

a) The UoC consists of more than one site, each of which has clearly defined limits and may include multiple pens, cages, ponds, tanks, raceway systems or beds

b) The Client, in this case the Group Management Body (GMB), is in charge of assuring the compliance against the ASC requirements of all sites within the UoC

c) The client, in this case the Group Management Body (GMB), representing all Group Members is capable of signing a binding contract farming agreement that is legally enforceable with the Group Members

d) The GMB shall be a legal entity or a statutory body within a larger legal entity, or another form of legally recognised (registered with a government office) organisation

e) Group Members operate either single or multiple sites that can be classified as small-scale producers
f) The Client is the only entity authorised to sell ASC certified products. If the owner of the site sells product directly to another third party, the product cannot be sold as ASC certified.

g) A sample of sites (sites classified as small-scale producers) under the UoC will be selected for audit by the CAB against the relevant ASC Farm Standard. The sample selection shall be made in accordance with the applicable requirements in Annex F and the ASC RUoC. In every routine CAB audit, the CAB audits the Client’s IMS (Internal Management System) against the applicable requirements in Annex F and the ASC RUoC. Sites under the UoC that are classified as a medium or large-scale producers will be audited against the relevant ASC Standard in every routine CAB audit.

6.5. A site within the UoC can produce certified and non-certified product in cases where specific and identifiable batch(es) or production unit(s) do not comply with any ASC Farm Standard indicators related to:

a) Exceeding antibiotic treatments permitted by the ASC standard, authorised by the producing and importing countries as the only resources to safeguard animal health.

b) The use of critically important antibiotics, when permitted by the relevant ASC Standard.

c) The use of compliant ASC feed is not possible because of commercial limitations.

d) The use of ASC compliant seedlings suppliers is not possible because of commercial limitations.

6.5.1. The site shall be permitted to produce certified and non-certified product if the entire site conforms to:

a) All other applicable requirements in the relevant ASC Farm Standard; and

b) The traceability requirements in Section 19 of this document.

6.5.2. Batch(es) or production unit(s) that fulfil the conditions in clause 6.5 and 6.5.1 shall be considered as a Certificate Scope Exclusion and the details of these specific and identifiable batch(es) or production unit(s) shall be described in the audit reports and the certificate.

6.5.3. Production of certified and non-certified products in a site is not allowed in group certification.

7. **Contract**

7.1. The CAB shall have a written contract with the Client representing the UoC seeking certification.

7.2. Prior to signing a contract, the CAB shall verify:

7.2.1. That the applicant UoC is not already certified.
a) If the applicant UoC is currently certified the CAB shall follow the certificate transfer requirements in Section 28.

7.3. The contract shall be signed by the CAB and Client prior to the announcement of the audit.

7.4. The contract shall include a copy of the CAB complaints procedure that includes information on when and how the ASC appointed accreditation body and the ASC may be engaged, in case the complaint process escalates beyond the CAB authority.

7.5. The contract shall specify:

7.5.1. The certification timeline, including reporting timeline as specified in the Annex C, that the CAB will meet.

7.5.2. That ASC retains the right to change the ASC Requirements and certification is conditional on conforming to new or revised ASC Requirements within the timeframes established by the ASC.

7.5.3. That the ASC shall have full access to all audit products including audit evidence, audit findings and audit reports, including confidential annexes.

7.5.4. That the Client shall submit to the ASC, accurate production and sale data using the form and manner specified by the ASC.

7.5.5. That the Client shall allow the ASC to process and publish, excluding confidential annexes, data and information collected from the certification process for the purpose of transparency, as an integral part of the ASC certification programme.

7.5.6. That ASC and the ASC appointed accreditation body shall have the right to observe audits conducted by the CAB.

7.5.7. That ASC, ASC designated agents and ASC appointed accreditation body shall have the right to visit the Client’s site(s) and any associated facilities within the scope of certification. This includes visits without prior notice for the purpose of verification of the integrity of ASC certification.

7.5.8. That the ASC appointed accreditation body shall have the right to conduct audits of the Certificate Holder, including unannounced audits, for the purpose of monitoring CAB conformity.

7.5.9. That ASC, ASC designated agents, ASC appointed accreditation body and the CAB shall have the right to collect seafood product samples or other supporting samples (e.g., water, feed, soil, sediment, sludge) to evaluate the Client’s compliance and or for product verification from the supply chain.

7.5.9.1. This sampling may be conducted unannounced during ASC audits or at any other time.
7.5.9.2. Costs incurred in testing shall be covered by the Client, for samples taken and decided by the CAB during ASC audits.

7.5.10. That the CAB shall have access to all audit products of the latest third-party social audit, if any. This includes, but is not limited to, audit reports, non-conformity reports, evidence of closure of non-conformities, and relevant confidential information.

7.5.11. That the Client has the right to raise their concerns or object to any of the proposed audit team members.

7.5.12. That the Client has the responsibility to inform the CAB, within fourteen (14) days of any changes made to the UoC, that may require oversight from the CAB. This can include, but is not limited to:

   a) Changes in species farmed
   b) Expansions or reduction of the production area
   c) Relocation of production areas
   d) Changes in the number of sites
   e) Changes that may impact the start of the chain of custody
   f) OIE notifiable disease outbreaks.

7.5.13. That the Client has the responsibility to inform the CAB within fourteen (14) days of the occurrence of any of the following situation(s):

   a) Fatal workplace accidents
   b) Legal compliance violations confirmed by the statutory authority on issues related to the scope of ASC standard and requirements
   c) Administration of veterinary treatments to some or all production units (ponds, cages, pens, tanks, etc.) or sites (multi-site and group certification) that affects the compliance against the applicable ASC standard
   d) Escapes or massive mortality events that affect the compliance against the applicable ASC standard
   e) Vulnerable, Endangered or Critically endangered species or marine mammal mortalities.

8. **AUDIT TIMING**

8.1. The CAB shall not conduct an on-site audit until the Client has submitted all required information and documentation, and that the CAB has completed the Desk Review (See 13.3).

8.2. The CAB shall conduct an initial on-site audit only when the site(s) has completed one of the following periods, whichever is less:

   a) Been in operation no less than twelve (12) months, or
b) Completed one harvest cycle, with similar operational conditions or
c) Reached 75% of the peak biomass for long cycle species.

8.2.2. For any of applicable periods above, the farm shall have at least 6 months of
data/records related to standard compliance for the current production cycle.

8.3. The CAB shall schedule audits only when the facilities are in normal production
or the species in the scope of the UoC is present on site and:
a) Fifty percent (50%) of the production units are under operation for single
site UoCs
b) As described in Annex E and F for Multi-site and Group UoCs.

8.4. The CAB may conduct surveillance and re-certification audits on single site
UoCs without product on-site only if:
a) The site grows a long cycle species, and
b) The site is fallowing, and
c) The previous audit was conducted with product on-site.

8.5. The CAB shall witness harvesting activities of the principal product to be
audited as follows:
a) During initial and re-certification audits for single site UoCs operating short
cycle or continuous harvest sites, or
b) At least once during the certification cycle for long cycle site UoC; or

8.5.2. If harvest is witnessed during the audit, the CAB shall:
a) Witness the harvest intended for sale (no trial or mock harvests), and
b) Witness loading activities including the ones conducted by subcontractors
under the control of the UoC.

8.5.3. The CAB shall record in the audit report if harvesting activities were evaluated
during the audit.

8.5.4. If other species are included in the scope of the certificate (e.g. L. vannamei
and P. monodon) but not harvested at the same time, the CAB shall collect
evidence of conformance for all species to be added to the certificate, in
conformance with traceability requirements in section 19.
8.6. If product handling or processing are included in the activities of the UoC, the audit shall occur at the time that the handling or processing facilities are operating.

9. **Audit Announcement**

9.1. The CAB shall upload the Audit Announcement for initial, surveillance and re-certification audits to the ASC database for planned audit dates no less than forty-two (42) days prior to the audit. This includes scope extension audits adding a site to a multi-site certification

9.1.1. For unannounced audits, the Audit Announcement may be uploaded to the ASC database less than forty-two (42) days prior to the audit.

9.1.2. The ASC shall not publish Audit Announcements prior to an unannounced audit.

9.1.3. The CAB shall upload one Audit Announcement to the ASC Database for each UoC.

9.2. The CAB shall upload updates to the Audit Announcement within seven (7) days of any changes to the information.

9.2.1. If the changes are to occur before a planned audit, the changes shall be no less than fourteen (14) days before the audit is scheduled to begin.

9.2.2. All changes will be clearly identified on the revised Audit Announcement.

9.3. The ASC should publish a public notice of the planned audit within five (5) days of receipt of the Audit Announcement.

9.4. The notice shall be in the local language(s) and English.

9.5. Before announcing a new audit for the same UoC, the CAB shall have submitted all required documentation related to the previous audit within the prescribed timelines in Annex C.

10. **Stakeholder Engagement**

10.1. The CAB shall maintain an up-to-date list of all relevant Stakeholders to be contacted for their input per country and in relation to species.

10.1.1. The CAB shall perform its own research of relevant Stakeholders per country and species and additionally may make use the Stakeholder list provided by the Client.

10.2. The CAB shall notify Stakeholders that are relevant for the scope and objectives of the audit and invite their participation.

10.2.1. Prior to an unannounced audit, the CAB may choose to notify none, some, or all potential Stakeholders.
10.2.2. Independent initial Stakeholder consultation shall be performed at the initial planning stage, between Desk Review and on-site audit.

10.2.3. This Stakeholder consultation may be carried out remotely.

10.2.4. In cases where the identified Stakeholders are single entities or persons, the CAB shall maintain records of contact details and date of consultation with the Stakeholders.

10.3. The CAB shall keep a list of all Stakeholders that indicate to the CAB, an interest in making a submission to the audit team.

10.4. The CAB shall acknowledge receipt of all written submissions.

10.4.1. Verbal submissions and how they have been addressed shall be clearly explained in the audit reports.

10.5. Prior to the publication of the draft audit report, the CAB shall respond in writing to each Stakeholder to explain how their comments were addressed by the audit team.

10.6. The CAB shall have a mechanism that allows comments to be submitted at any time during the validity of the certificate, and that specifies how those comments are to be taken into consideration for the next audit.

10.6.1. The CAB shall make sure that the mechanism is known to the public.

10.6.2. The CAB shall retain all records related to Stakeholder consultation of each audit while contracted to the Client and for 3 years, as a minimum, after the CAB stops providing certification services to the Client.

11. **Audit Preparation and Planning**

11.1. The CAB shall have completed a Desk Review before conducting each audit.

11.2. As a minimum, the CAB shall obtain and review the following:

   a) Required information, documents and records submitted by the Client as specified in the Desk Review Template (Annex G).

   b) Impact assessments as required by the applicable ASC standard.

   c) Applicant site(s) intersection with Protected Areas.

   d) Potential Wetland and Mangrove conversion of site(s) within the scope of applicant’s UoC.

   e) Potential connection to sensitive ecosystems (i.e., seagrass meadows, wetlands, tubeworm mounds, bivalve beds).

   f) Status of introduction of non-native species in the country where the UoC is located.

   g) Other information as deemed necessary for an effective Desk Review that may include preliminary study.
11.3. The CAB shall review and take into consideration all of the obtained information for Social Audit Risk Assessment and audit planning.

11.3.1. Auditors shall review a map/layout/drawing of the facility to be audited and all areas that form part of the audit scope, to determine distance and travel time between different locations under the scope.

11.4. The CAB shall conduct a Social Audit Risk Assessment for each audit using the tool provided in Annex H when developing the audit plan and assigning an audit team.

11.5. The CAB shall ensure that before the end of the audit planning phase, the applicant receives the following written information:

11.5.1. Expected scope of audit, that includes as a minimum:

a) List of premises (e.g. warehouses, employees’ living quarters, pumping stations, etc.) to be audited

b) Processes, functional departments

c) Shift(s) at the sites, if applicable.

11.5.2. Provisional Audit Plan that includes:

a) The date(s) and site(s) where the on-site and/or off-site audit activities will be conducted, including visits to storage and processing facilities.

b) Approximate time (in man-hours) for each audit activity segregated in desk review, off-site activities and on-site activities.

c) Expected number of management and worker interviews.

11.5.3. Names and affiliations of proposed audit team members

11.5.4. Sufficient information about the audit process so that the applicant can make appropriate preparations for the audit. This shall include:

a) A summary list of the objective evidence, including actual performance data that may be required by the audit team

b) An explanation of the requirement(s) for and process of Stakeholder consultation.

11.6. The CAB shall have a documented procedure for dealing with an applicant’s concern about a member of the audit team proposed to carry out the audit; this procedure shall include the following elements:

a) Consider the merits of each concern raised by an applicant

b) Take appropriate action(s), which may include leaving the audit team unchanged if warranted

c) Maintain records of the justification for its action(s).
12. **Audit Duration**

12.1. The CAB shall determine the minimum planned duration of the audit and record this determination in the audit announcement considering the following factors:
   a) Number of sites
   b) Production area or number of production units (e.g., ponds, cages, tanks, lines)
   c) Number of employees
   d) Use of interpreters and technical experts
   e) Desk Review time is accounted for in the total audit duration
   f) The time spent for the activities during the on-site audit
   g) The time spent for other activities as deemed necessary.

12.2. The CAB shall record the actual time spent for off-site and on-site audit activities in the audit report.

12.2.1. The CAB shall provide justification in the audit report if the audit took more or less time than was determined in the audit announcement.

13. **Audit Methodology**

13.1. ASC auditors should use the ASC Audit Manual for the standard(s) for which the Client is being audited.

13.2. ASC reserves the right to request the CABs to use ASC’s own audit tools and methodology for the ASC aquaculture audits covering areas not specified in this document.

13.3. The CAB shall conduct a Desk Review (Annex G) based on information and documents provided by the Client to inform the applicable risk assessments and audit planning prior to the on-site audit.

13.4. The CAB shall consider outcomes of the Desk Review and Social Audit Risk Assessment to determine audit effort for each type of UoC. This includes (but is not limited to):

13.4.1. Number of employee interviews, and types (individually or in group).
   a) The number of interviews with management and staff functions shall be in addition to the number of worker interviews calculated in the Social Audit Risk Assessment Calculator (Annex H).

13.4.1.2. Visit to relevant local Stakeholders to corroborate evidence, if necessary.

13.4.1.3. Visit to employees’ living quarters if provided to employees.
13.5. The CAB shall verify the accuracy of the sites’ polygons prepared by the Client in the ASC Online Farm Mapping Tool.

13.6. The lead auditor shall cease the audit process in cases when it is confirmed that:
   a) The Client suggested bribes to any member of the audit team.
   b) The Client presented forged documents as audit evidence.
   c) The Client threatened any member of the audit team.

13.6.1. In any of these cases the CAB shall classify the audit as failed for initial audits or withdraw the certificate.

13.7. The CAB shall follow Annexes E and F requirements to audit Multi-site and Group UoCs

14. **Audit Methodology of Social Requirements**


14.2. In addition to 14.1, the following shall be implemented by the audit team:

14.3. Opening meeting:
   a) The auditors shall invite senior management of the UoC and key relevant personnel, including workers and/or trade union representatives to attend the opening meeting
   b) Attendance shall be documented for all those present at the opening meeting
   c) The auditors shall state that:
      i. Employee interviews shall be conducted in a private place, individually and/or in groups
      ii. The place shall be determined by the auditor(s) during the course of the audit
      iii. Interviewed employees shall not be discriminated against or be put in an unfavourable position for taking part in interviews irrespective of the nature of their job
      iv. The auditor may consider additional employee interviews, if necessary, after review of records
      v. To provide additional confidence and a method of communication, employees shall be provided with contact information of the CAB and the ASC, and this contact information shall not be taken back from employees by the Client after the audit
vi. Management and supervisory and clerical staff shall not attend workers’ interviews.

d) The auditor shall inform the Client that audit evidence collected during the audit will relate solely to requirements of the applicable ASC Requirements. Audit evidence can consist of documents, records, pictures, and other multimedia.

e) The auditors shall confirm if there are any changes to information previously provided that may affect the scope of the audit and reconfirm all documents that will be verified during the audit.

f) The auditors shall determine if there are sub-contracted employees at the site(s) within the scope of the audit or certification, and if so, the number of such employees and the work being performed on the day of the audit.

14.4. Walkthrough and visit to working areas and facilities included in the UoC.

a) Auditors shall review travel arrangements and make necessary adjustments to the audit plan on the basis of availability of transport to ensure full audit coverage within the assigned audit time.

b) The visit and walkthrough shall include all work areas irrespective of the presence of employees in the area on the day of the audit, living quarters, on-site hospital/clinic, kitchens, dining areas (if provided), the perimeters of production and processing units, common toilets, common areas like on-site grocery stores, prayer halls and any other areas as appropriate.

c) During the visit and walkthrough, auditors shall:

i. Identify potential employees that they will speak to later

ii. Identify all hazards and potentially dangerous areas of work

iii. If possible, collect information (e.g., pictures of notices) to later corroborate information provided prior and/or during the audit

iv. Distribute the CAB, ASI and ASC contact information to employees that they speak to so that employees may communicate with those organisations at any time.

d) The visit and walkthrough shall be implemented for every on-site audit.

14.5. Document and records review

a) When drawing samples for records review, the auditor shall consider:

i. Different types of employees (full time, contractual, seasonal, migrants)

ii. Different types of payment methods (hourly rate, piece rate, monthly rate) as appropriate.

b) Auditing of personal records (e.g., time sheet and pay records) shall be based on risk and the sampling plan as outlined in the Social Audit Risk Assessment Annex H.
c) For each interviewed employees, his/her personal records and related documents shall be reviewed.

d) Personal information and records shall only be reviewed on-site, unless allowed by legislation of countries of parties involved – the Client and the CAB

e) Other documents as deemed necessary at auditor’s discretion.

14.6. Conducting interviews

a) The CAB shall have and implement procedures for deciding how much time to allocate for interviews, depending on types of UoC, issues being audited, types of interviews (group/individual) and place(s) where the interviews are to take place.

i. It is a common practice to allocate 15 minutes for individual interviews and 30 minutes for group interviews.

b) Auditors shall interview as a minimum the following functions:

   i. Senior management of the UoC
   
   ii. Worker and/or trade union representative(s)
   
   iii. Workers:

      A. Number of worker interviews is calculated using the Social Audit Risk Assessment calculator (Annex H)

      B. Auditors shall stratify worker interviews based on their tasks and background (gender, type of work – permanent/temporary, type of labour – migrant, and the likes)

      C. Number of worker interviews, justification for stratification shall be documented in the audit report.

iv. Other relevant personnel playing a role in implementing social requirements in the ASC standard (e.g., in the area of health & safety human resources, finance, etc.).

c) Auditors shall develop a list of relevant topics for interviewing each function based on results of Desk Review

d) Auditors shall use professional judgement, common sense knowledge and experience to take the decision, which may be taken on the spot, regarding approach to conducting interviews (individual or group.

e) Auditors shall use appropriate skills to ensure confidentiality while speaking to employees during the visit and walkthrough and at workplaces

f) The CAB shall maintain records of all interviews during an audit as part of audit evidence

g) All personal employee interviews shall usually take place on-site; however

i. Off-site interviews shall take place if or when there is a perceived threat or pressure to employees by any party for providing information
or there is a lack of a location at the audit site that allows employees to speak confidentially.

h) All employees interviews shall take place in a quiet, private area away from management offices and without the presence of management representatives or those in supervisory roles

i) Casual interviews shall also take place during the physical tour of the workplace, during meal and rest breaks

j) Interviews may be conducted in the presence of a trade union member, with the permission of the employee, and if the CAB auditor feels employee/s is/are comfortable with this arrangement.

14.7. Closing meeting

a) A pre-closing meeting with the management may be held for the purpose of:

i. Discussing audit findings and clarifying any divergent views or opinions

ii. Reviewing any information the UoC may provide to demonstrate conformance with the ASC Standard

iii. Avoiding differences of opinion that may lead to the UoC contesting audit findings at the closing meeting

iv. Saving time at the closing meeting where only key findings, opportunities for improvement, best practices and other matters are discussed.

b) The closing meeting shall be attended by senior management of the UoC and personnel responsible for time and pay records, those responsible for meeting health safety and environment requirements, human resources and administration, those responsible for key functions and workers and/or trade union representatives

i. If senior management is not available for the closing meeting this shall be documented in the audit report

ii. Attendance shall be recorded for all those present at the closing meeting.

c) The result of the audit shall be communicated in a language understood by those present and, if necessary, translated into a language spoken by workers’ representatives / trade union members

d) Depending on the result of the audit and the type of non-conformities raised (if any), auditors shall inform the follow up activities as appropriate

e) Auditors shall remind the Client of timelines they need to meet for providing and implementing root cause analysis and corrective actions

f) A copy of non-conformities that were raised shall be provided to the UoC.
15. **Sampling and Testing**

15.1. **Sampling and testing antibiotics and banned veterinary substances**

15.1.1. The ASC may request CABs to collect seafood or other substances during ASC audits to verify a UoC’s conformance to the applicable ASC standard. In this case the CAB shall:

   a) Use the laboratory assigned by the ASC
   
   b) Charge the cost to ASC if the test results confirm the UoC conformance.

15.1.2. The CAB may decide to collect samples at its discretion based on observations and evidence collected during the audit. In this case the CAB shall:

   a) Use one of the ASC listed laboratories
   
   b) Charge the cost to the Client.

15.1.3. In both cases the laboratories assigned shall be ISO 17025 accredited for the requested tests and use an accredited test method for the test required.

15.2. The CAB shall make all the necessary arrangements with the assigned laboratory to collect and deliver samples according to the ASC sampling procedures.

15.3. The CAB auditor shall decide from which batches, production units or sites the samples will be taken.

15.3.1. Any of the following criteria may be considered to inform this decision:

   a) Random sampling
   
   b) Based on observations and evidence collected
   
   c) Mortality records
   
   d) Production stage
   
   e) Auditor professional experience.

15.4. The CAB auditor shall manage sample conditions as follows:

15.4.1. Only samples from the same production stage of the same site may be composited.

15.4.2. Samples from a maximum of 3 batches or production units of the same site may be composited.

---

4 Requests for samples are based on a risk assessment developed by ASC that reacts to antibiotic alerts for different species and producing countries and linked to production volume. The sample requests to CABs will primarily take place when ASC staff or their agents are not available to collect the samples.

5 The ASC provides a list of ISO 17065 accredited laboratories within ASC producing countries that have relevant scope for the analysis required.

6 ASC provides guidance on the process to take samples with the “ASC Sampling protocol”. This protocol explains to auditors how to collect, pack, label and preserve the sample when is not collected directly by the ASC listed labs.
15.4.3. Traceable seals or tamper proof bags shall be used to maintain the integrity of the samples.

15.4.4. Triplicates of each sample shall be prepared for confirming results if needed and stored by the laboratory.

15.5. Sign off sample forms shall be used confirming the following information:
   a) Sample identification and seal number(s).
   b) Type of sample, production units and approximate weight.
   c) Substances to be tested for
   d) Date and time of collection
   e) Intended date, time and place of dispatch/delivery.

15.6. The CAB shall record in the audit report the following information:
   a) If a sample was taken during the audit
   b) Justification for sampling
   c) Whether sampling was announced or unannounced

15.7. The Client may decide to test the duplicate samples at its own cost, to dispute the test results. In this case the CAB shall:
   a) Request the testing of duplicate samples by the same laboratory for the parameters in the previous test being disputed
   b) If the second test results support the Client’s position, a third test for the same parameters shall be conducted by another ASC listed laboratory in the same country. The Client may select the ASC listed laboratory if there is more than two in the country
   c) Both the CAB and the Client shall accept the results of the third (final) test.

16. **REMOTE AUDITING**


16.1.1. The CAB shall conduct a feasibility and risk analysis as described in this document before carrying out remote audits or remote evidence collection.

16.2. The CAB may collect evidence remotely to:
   a) Complement on-site audits
   b) Witness harvest activities for long cycle species
   c) Interview management staff
   d) Review data, documents and records
e) Conduct site tours
f) Review video recording or photographs (i.e., sampling activities)

16.2.1. Management staff interviews and review of data, documents and records may be performed remotely in any audit as part of the evidence collection.

16.3. The CAB may only conduct remote audits for:
   a) Surveillance audits
   b) Re-certification audits at following sites growing long cycle species
   c) Single or multi-site (option 1) UoCs.

16.3.2. CABs shall not conduct remote audits under any of the following conditions:
   a) The Certificate Holder is suspended
   b) Initial audits
   c) The previous audit was a remote audit
   d) The Certificate Holder received more than 5 major NCs in the previous audit.

16.3.3. In addition to the above, the CAB may conduct remote employee interviews only under all of the following conditions:
   a) The social auditor does not need an interpreter to conduct the interview
   b) The number of workers to interview as an outcome of the “ASC social risk calculator” is less than 12
   c) The country risk is ‘medium’ or ‘low’ according to the ASC Country Social Index
   d) Employees identity and confidentiality can be assured by the social auditor through appropriate ICT
   e) Employees have accepted the CAB’s intention to conduct the remote interview.

16.4. Auditors conducting remote audits or remote evidence collection shall be trained by the CAB on how to collect evidence remotely as described in ISO 19011:2018.

16.5. The CAB shall evaluate Clients’ local legislation and regulations related to confidentiality, security and data protection, which may require additional agreements from both sides because of the use of ICT.

16.5.1. The CAB shall document in the audit report this evaluation and determination on the need of additional agreements.

16.6. The CAB shall test the ICT selected for the remote audits in advance of the audit

16.6.1. The CAB shall record the ICT tests results and determination to continue or not with the remote audit.
16.7. Evidence in the form of video, photograph, or live streaming shall be verified as being relevant to the specific UoC under remote evaluation. (e.g., geotagging)

17. **AUDIT EVIDENCE**

17.1. The CAB shall verify all audit evidence relevant to the audit objectives, scope and criteria, including information relating to interfaces between functions, activities and processes.

17.2. The CAB shall collect audit evidence by appropriate sampling considering:
   a) Size and complexity of the UoC.
   b) Number of batches produced by the UoC annually
   c) Number of Employees
   d) Number of inputs and suppliers used by the UoC.

17.3. Audit evidence may be in the form of pictures, multimedia, notes, and other means.

17.4. The CAB shall record the audit evidence evaluated for each ASC standard indicator and applicable ASC Requirements in the audit report.

17.4.1. In case new evidence emerges after the completion of an audit, the CAB shall clearly describe the circumstances of the new evidence in the audit report.

17.5. The CAB shall retain audit evidence for the entire period that the Client is certified by the CAB and minimum three (3) years after the certification contract is terminated.

17.6. Within seven (7) days of receipt of objective evidence related to the Certificate Holder’s non-conformance from ASC or the ASC appointed accreditation body, the CAB shall determine timelines and actions to be taken based on the provided evidence.

18. **AUDIT FINDINGS**

18.1. Auditors shall evaluate audit evidence to determine whether the UoC is in conformance with each ASC standard indicator and applicable ASC Requirements for UoC.

18.2. The CAB shall grade non-conformities as minor, major or critical according to the definitions in the ASC Vocabulary List and clearly justify the grading in the audit report.

18.3. **Requirements for all non-conformities**

18.3.1. The CAB shall set the non-conformity Detection Date as the date of the closing meeting when the non-conformities are presented to the Client.
a) Changes in grading of non-conformities after the closing meeting shall not alter the Detection Date

b) For non-conformities raised after the closing meeting or between audits, the non-conformity date shall be the reporting date to the CAB. The non-conformity closure timelines shall be calculated from this date.

18.3.2. Critical and major non-conformities shall not be downgraded after the CAB certification decision making entity has confirmed the grade.

18.3.3. If the Client decides to continue with the certification, the CAB shall provide information to the Client highlighting the next steps to close non-conformities.

18.3.3.1. The CAB shall cancel the certificate if a Certificate Holder decides not to close non-conformities and not continue the certification process during the period of validity of a certificate.

18.3.4. For each non-conformity the CAB shall request and confirm with the Client:

   a) a root cause analysis
   b) an action plan with corrections and corrective actions that address the root cause.

18.3.5. The CAB shall review and agree proposed root cause and action plan within fourteen (14) days from reception.

18.3.6. The root cause analysis and action plan shall be included in the draft audit reports for public consultation.

18.3.7. The CAB shall close non-conformities if there is sufficient objective evidence showing:

   a) effective implementation of the corrections
   b) effective implementation of the corrective actions addressing the root cause.

18.3.8. The CAB shall record in the final audit report the evidence evaluated to close or extend a non-conformity.

18.3.9. The CAB shall record in the next audit report the actions taken by the Client and the evidence evaluated to close extended non-conformities.

18.3.10. The CAB may decide to perform an on-site revisit to evaluate the effectiveness of corrections and corrective actions.

   a) Where on-site revisits are required, these shall be scheduled to occur within the timeframe allowed for the closure of non-conformities
   b) Revisits should wherever possible be undertaken by the original auditor/audit team. Where this is not possible, the visit must be undertaken by a qualified auditor with competencies which cover the species produced
at the site and the categories of the outstanding non-conformities (Social and/or Environmental).

18.3.11. The CAB may extend the non-conformity closure timeframe according to the maximum deadlines in 18.4.1, 18.5.2.2 and 18.6.3 d. i if the CAB has received sufficient objective evidence demonstrating that:

a) The time needed to execute the action plan requires a longer deadline due to circumstances related to the species production cycle, or

b) Conformity was not possible due to circumstances beyond the control of the Client.

18.4. **Minor non-conformities**

18.4.1. Minor non-conformities can be extended once for a maximum period of 12 months after the Detection Date.

18.4.2. The CAB shall classify an initial audit as failed if minor non-conformities are not closed or extended within three (3) months from the date of detection.

18.4.3. For minor non-conformities detected during the period of validity of a certificate:

18.4.3.1. The CAB shall upgrade a minor non-conformity to major non-conformity if not closed or extended within three (3) months from the date of detection.

18.4.4. The CAB shall upgrade a minor non-conformity to a major non-conformity where the same minor non-conformity is raised against a particular indicator or requirement in two consecutive audits.

18.5. **Major non-conformities**

18.5.1. The CAB shall classify an initial audit as a failed audit if major non-conformities are not closed within three (3) months from the Detection Date.

18.5.2. For major non-conformities detected during the period of validity of a certificate:

18.5.2.1. The CAB shall suspend the certificate if not closed or extended within three (3) months from the date of detection.

18.5.2.2. Major non-conformities may be extended once for a maximum period of six (6) months after the Detection Date.

18.5.2.3. The CAB shall raise a major non-conformity when the Client does not comply with any contractual requirement specified in section 7.5 of this document.

18.6. **Critical non-conformity**

18.6.1. The CAB shall raise a critical non-conformity when either:

a) Employees’ lives are evidently at risk.

b) A banned substance or veterinary medicine not allowed to be used by the applicable ASC standard was detected in samples taken by the ASC, ASC designated agent, ASC appointed accreditation body or the CAB.
c) Sales of non-ASC products as ASC certified.

18.6.2. The CAB shall require that critical non-conformities raised at initial audits shall be satisfactorily addressed by the Client:

a) Prior to certification being granted
b) Within three (3) months of the Detection Date or a full re-audit shall be required.

18.6.3. In the case of a critical non-conformity raised during the period of validity of a certificate:

a) Auditors shall inform the CAB’s certification decision making entity about the detection of a critical non-conformity within 24 hours of detection
b) The CAB shall suspend the certificate within 24 hours of the critical non-conformity being verified by the CAB’s decision making entity
c) The Certificate Holder shall close the critical non-conformity within a maximum of three (3) months from the Detection Date
d) The CAB shall withdraw the certificate if the critical non-conformity is not closed within the three (3) months period
   i. An extension of fourteen (14) days may be granted to close out the critical non-conformity in exceptional cases
   ii. Extension of time and justification to close critical non-conformities shall be documented in the audit report.

18.6.4. The CAB shall conduct an on-site evaluation to close the critical non-conformity.

18.6.5. The decision, justification and conclusion of this closure shall be made clear in the audit reports.

19. Traceability

19.1. The CAB shall determine the activities covered by the scope of the UoC until the ownership or physical possession of the certified products is transferred. This may include but is not limited to:

a) Stocking
b) Nursing
c) Out-growing
d) Transferring
e) Harvesting
f) Transportation
g) Storage
h) Processing
i) Packing

19.2. The CAB shall determine if procedures for the following elements are effectively implemented:
   a) Traceability systems
   b) Risks assessment of mixing and substitution and mitigation of those risks
   c) Identification and segregation mechanisms at each applicable stage of the production cycle and all following stages until the product ownership is changed
   d) Adequate records allowing products to be traced back from the point of change of product ownership to the stocking day at the UoC
   e) Training and competencies of staff managing the traceability system
   f) Actions when non-conforming product is detected (i.e., ASC and non-ASC products mixed or non-ASC products identified as ASC certified)

19.3. The CAB shall conduct traceability tests as follows:
   a) Using the ASC template
   b) Taking representative sample(s) of batches sold by the UoC including certified and non-certified products, if applicable.

19.4. The CAB shall consider the following when conducting traceability tests:
   a) The flow of certified product within the UoC boundaries from stocking to sale.
   b) Traceability documentation at each stage of production (stocking, nursing, grow-out, transferring between production units, harvesting, transportation, storage), or processing activities under the scope of the UoC.
   c) Production records of certified product and how product can be linked from each document (e.g., through batch codes, lot codes, etc.)
   d) If harvest is evaluated during the audit, the CAB shall select the harvested batch as part of the sample for traceability tests.

19.5. The CAB shall conduct and record an input – output exercise of a representative sample of batches sold by the UoC including certified and non-certified products, if applicable.

19.5.1. The input – output exercise shall consider:
   a) Stocked animals
   b) Mortalities collection, if applicable
   c) Survival rate
   d) Feed conversion ratio
   e) Escapes
   f) Harvested biomass
g) Inputs – outputs and conversion ratios for processing and packing, if applicable.

19.6. The CAB shall document in the Confidential Annex of the audit report the actual production and sold (as certified and non-certified) volumes per harvest or crop of the previous calendar year by the UoC.

19.6.1. The CAB shall determine in the audit report whether or not the traceability system is sufficient to ensure all products identified and sold as certified are eligible to enter further certified chains of custody.

19.7. If the CAB has determined that the traceability systems are sufficient to allow products to enter chain of custody, the CAB shall record:
   a) The intended point of first sale
   b) The point from which chain of custody is required to begin.

20. Audit Reports and Review

20.1. ASC audit reports shall follow the format and requirements of the ASC Audit Report Template.

20.2. Each audit report, draft and final, shall receive a technical review that conforms to the following criteria:

20.2.1. The review shall be conducted by an individual who was not involved in the audit and meets the following criteria:
   a) Is a qualified ASC lead auditor or for any other aquaculture program which include environmental and social criteria, or
   b) Has conducted more than 20 technical reviews for ASC or other aquaculture programs which include environmental and social criteria.

20.2.2. The review shall be conducted before submitting the draft report to ASC for publishing.
   a) The review shall focus on completeness of each section of the report and accuracy of required information
   b) Each non-conformity shall be reviewed for its grading justification based on the presented evidence
   c) The review shall confirm relevance of the root cause analysis, correction, and corrective actions as well as evidence provided to close non-conformities.
20.3. The lead auditor shall address all issues of concern raised by the technical reviewer.

21. Certification Decisions

21.1. The CAB shall make certification decisions based on the evaluation of the audit evidence as to whether or not the applicant is in conformity with the requirements of the applicable ASC Standard(s) and other applicable ASC Requirements.

21.2. The CAB shall make a certification decision within six (6) months from the date of the audit closing meeting. (Non-conformity Detection Date)

21.2.1. The CAB shall conduct a full re-audit if above timeframe is exceeded.

21.2.1.1. The CAB shall inform the Client of the reason(s) for the re-audit.

21.3. The CAB shall not grant a positive certification decision if there is:
   a) An open major or critical non-conformity
   b) Any open and not extended minor non-conformity
   c) An open variance request
   d) Without complete end of production cycle data required by applicable standard for sites running its very first production cycle.

21.4. The CAB shall consider all audit evidence when taking certification decisions.
   a) This shall include audit evidence gathered prior to, during and after an on-site audit.
   b) This shall include audit evidence gathered as the result of information submitted by Stakeholders.

21.5. The CAB shall post all certification decisions, including changes in scope, suspensions, cancellation and withdrawals on the ASC database within fourteen (14) days of the decision.

21.6. The CAB shall retain the right to delay or postpone its decision on certification to take account of new or additional information, which, could affect the outcome of the certification decision.
   a) Additional information includes but not limited to inputs provided by Stakeholders.

21.6.1. Any delays in the proposed timeline for the decision on certification due to the consideration of new or additional information shall be explained in the final report.

21.6.2. Delays of more than fourteen (14) days shall be publicly communicated no later than the planned date of determination, using an ASC provided template.
21.7. The CAB shall issue certificates with a maximum validity period of three (3) years from the certificate issue date.

21.8. Certificates, which are not registered and published on the ASC website, shall not be valid.

22. CONTENT OF CERTIFICATES

22.1. The CAB shall issue a certificate in English, which as well as the requirements in ISO 17065, Clause 7.7 shall contain:

22.1.1. The ASC logo, which shall be no smaller than the logo of the CAB.

22.1.2. The unique ASC Certificate Number generated by the ASC database.

a) An issue number (for re-issued or renewed certificates).

22.1.3. The point at which certified products enter a Chain of Custody.

22.1.4. Certificate Issue Date.

22.1.5. The date of expiry.

22.1.6. The name and address of the CAB.

22.1.7. The legal name and registered address of the Certificate Holder.

22.1.8. The name, coordinates and, where available, physical address of sites included in the Multi-site or Group UoC.

22.1.9. A description of the scope of the certificate, including a general description of the type of products covered by the certificate, a reference to the specific standard(s) against which the Certificate Holder has been evaluated, and confirmation if non-certified products will be produced under the conditions described in clause 6.5 in this document.

22.1.10. A description of the activities and facilities covered in the scope of the UoC.

22.1.11. A reference to the ASC database (https://www.asc-aqua.org/find-a-farm/) of registered certificates for the full list of product groups covered by the certificate.

22.1.12. A clear statement to the effect that the certificate shall remain the property of the issuing CAB, all copies or reproductions of the certificate shall be returned or destroyed if requested by the CAB.

22.1.13. The disclaimer stating: “The validity of this certificate shall be verified on www.asc-aqua.org”

22.1.15. A disclaimer stating: "This certificate itself does not constitute evidence that a particular product supplied by the Certificate Holder is ASC-certified. Products offered, shipped or sold by the Certificate Holder can only be considered covered by the scope of this certificate when the required ASC claim is clearly stated on invoices and shipping documents".

22.2. The CAB may issue certificates in other languages as well as the English version providing, they bear a disclaimer in at least 10-point font that the certificate is an unverified translation of the English certificate, and in case of differences the English version shall take precedence.

23. INFORMATION FOR CERTIFICATE HOLDERS

23.1. The CAB shall inform the Certificate Holder that:

23.1.1. It has the right to claim that, subject to the scope of its certificate, its operation is certified in accordance with the specific ASC standard.

23.1.2. It may claim that its aquaculture products are the result of “Responsible Aquaculture Farming”, or “Responsibly Produced”, or “Responsibly processed”.

23.1.3. It is eligible to apply for an ASC Logo License Agreement.

23.1.4. It shall not make any claim about ASC certification on consumer facing products or public materials without a valid ASC Logo License Agreement. Additional Chain of Custody certification may be required.

24. SURVEILLANCE AUDITS

24.1. The CAB shall carry out surveillance audits to monitor the Certificate Holder’s continued conformance with applicable ASC standards and other certification requirements as, follows:

24.1.1. At least annually with a window of three (3) months before or after the anniversary of the initial certification decision date.

24.1.2. No fewer than two (2) surveillance audits during the three (3) year certification cycle.

24.1.3. Two (2) surveillance audits shall not be carried out with less than six (6) months between them.

24.1.4. For social aspects, the CABs shall follow instructions included in the Social Audit Risk Assessment for surveillance audits (Annex H).

24.1.5. Surveillance reports shall conform to Annex C.

24.1.6. Stakeholder consultation may be undertaken during surveillance audits.
24.1.7. During the three-year term of the certificate, the CAB shall plan and conduct surveillance audits in such a way that all ASC standard indicators are audited at least once during those surveillance audits.

24.2. The CAB shall assess during surveillance audits:

24.2.1. All metric and critical indicators in every audit.

24.2.2. Social indicators as prescribed by the Social Audit Risk Assessment Calculator (Annex H)

24.2.3. Implementation of corrective actions against outstanding non-conformities.

a) The CAB shall verify closure of outstanding non-conformities and record the associated evidence within the report.

24.2.4. The Internal Management System of Multi-site option 2 and Group UoCs and a sample of sites according to Annex E and Annex F.

24.2.5. Legal and regulatory compliance including any changes that have occurred in legislation or regulations since the last audit.

24.2.6. Any complaints or allegations of non-conformity with ASC Requirements.

24.2.7. The UoC’s traceability systems and requirements in section 19.

24.3. The CAB may conduct, additional to the two (2) surveillance audits, follow-up audits of Certificate Holders for one or more of the following reasons:

a) The number and nature of complaints from the ASC, another CAB, a Stakeholder

b) The number and nature of other issues that the CAB determines shall be investigated

c) The reporting of open cases with the statutory authority related to fraudulent activities that may affect the ASC standard requirements.

24.3.2. Follow-up audits shall comply with the reporting requirements of surveillance audits in Annex C.

24.4. The CAB may limit the scope of a follow-up audit to specific topics relative to the reason of the follow-up audit.

24.4.1. The CAB may extend the scope of the follow-up audit or plan a full audit if there are doubts on the continued compliance against the ASC standards.

25. **UNANNOUNCED AUDITS**

25.1. The CAB shall conduct unannounced surveillance audits on at least 10% of its single site Certificate Holders on an annual basis.

25.1.1. This number may include unannounced audits determined by the ASC Social Audit risk assessment.
25.2. The CAB may conduct a regular surveillance audit without prior notice to the Client (unannounced audits).

25.2.1. In this case, the CAB shall upload the audit announcement of the surveillance audit to the ASC Database according to the timelines in section 9.1.1 and 9.1.2.

25.3. In the case of expedited unannounced audits, the CAB shall upload the Audit Announcement to the ASC Database within 24 hours of the CAB decision.

25.4. The CAB shall develop a risk assessment to select the Certificate Holders that will receive an unannounced surveillance audit.

25.4.1. The risk assessment shall include but not be limited to the threats and thresholds detailed in Table 1.

25.4.2. If the majority of Clients are categorised as low risk, the CAB shall complete the minimum number of unannounced audits with low risk UoCs selected randomly, or when there is an opportunity to conduct them in conjunction with other audits.

25.5. The CAB shall notify unannounced audits to Certificate Holders no earlier than two (2) days or 48 hours before the audit.

25.5.1. Exceptions of five (5) days notification can be made for UoCs which require complex logistics to access the site (i.e., rental or arrangement of boats, helicopters, planes).

25.6. The CAB shall plan a second unannounced audit if the Certificate Holder refuses the unannounced audit but has an acceptable justification (e.g., responsible staff is not available, poor weather conditions, etc.).

25.6.1. The CAB shall suspend the certificate if the Certificate Holder rejects for a second time the opportunity to undergo the unannounced audit.

25.6.2. The CAB shall lift the suspension only when an unannounced audit is executed, and any major and critical non-conformities are closed.

<table>
<thead>
<tr>
<th>Threat</th>
<th>Threshold</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Records management weakness</strong></td>
<td>Low Risk: All required records are retained and organised as per legal requirements, applicable ASC standard and own regulations. Medium Risk: Not all required records are found due to missing records, or they are not organised for retrieval. High Risk: Required records are not retained or found.</td>
</tr>
<tr>
<td><strong>2. Subcontractors including subcontracted sites and subcontracted</strong></td>
<td>Either: 1) No subcontracted sites or services are used in the unit of certification; or, Records of the Client monitoring the performance of subcontracted sites. Records of monitoring the performance of subcontracted sites.</td>
</tr>
<tr>
<td>services (related to the operations of the unit of certification)</td>
<td>2) Performance requirements for subcontracted sites and services are defined. The performance of all subcontracted sites and services meet the defined ASC Requirements and are monitored by the Client. All records are retained by the Client.</td>
</tr>
<tr>
<td>---</td>
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</tr>
<tr>
<td>3. Record of NCs raised by the ASC CAB and response</td>
<td>No open NC(s).</td>
</tr>
<tr>
<td>4. Complaints resolution weakness</td>
<td>All complaints regarding the UoC have been responded to and resolved within timelines.</td>
</tr>
<tr>
<td>5. Traceability weakness</td>
<td>All production of the UoC can be sold as ASC certified AND there is no non-conformity raised against the traceability requirements</td>
</tr>
<tr>
<td>6. Country risk assessment score</td>
<td>Operations located in a country that is above 62 on Transparency International’s latest list.</td>
</tr>
</tbody>
</table>
26. **RE-CERTIFICATION AUDITS**

26.1. The CAB shall start the re-certification audit planning with the Certificate Holder at the latest four (4) months before the expiry date of the existing certificate.

26.1.1. In case of potential discontinuation of the re-certification contract due to reasons on the CAB side, the CAB shall inform the Certificate Holder of its intention no later than four (4) months before the expiry date of the existing certificate.

26.2. Exact timing of the audit shall remain the responsibility of the CAB, in consultation with the Certificate Holder.

26.2.1. The CAB shall ensure that the audit and re-certification decision will be completed before the expiry date of the current certificate.

26.3. For re-certification audits the CAB shall:

26.3.1. Take into account the previous surveillance report, progress on non-conformity closure, and inputs from Stakeholders.

26.3.2. Consider any changes to the scope and operations of the UoC.

26.3.3. Follow the instructions included in the Social Audit Risk Assessment for re-certification audit (Annex H).

27. **EXTENSION OF CERTIFICATE VALIDITY**

27.1. The CAB may extend the validity of a certificate once by up to three (3) months in cases where:

27.1.1. The CAB issued the current certificate, and

27.1.2. The Certificate Holder has submitted their application to the CAB for re-certification and the application has been accepted by the CAB before the current certificate expiry date.

27.2. The CAB may extend a certificate only for cases when:

27.2.1. There is no product on-site for the planned re-certification audit, or

27.2.2. There are conditions outside the control of the CAB or the Certificate Holder that prevent the execution of the audit.
27.3. The CAB shall register the extended certificate details in the ASC database before the expiry date of the current certificate.

28. **TRANSFER OF CERTIFICATE**

28.1. For Clients applying for an audit with a new CAB within twelve (12) months from the expiration date of its last certificate, the new CAB shall:
   a) Request that the preceding CAB provides a list of any non-conformities open at the time of certificate expiration
   b) The preceding CAB shall send these non-conformities to the succeeding CAB within fourteen (14) days upon request
   c) If the preceding CAB does not reply in the above required timeframe the succeeding CAB may continue with the audit planning.

28.2. **Principles for a transfer of a valid certificate**

28.2.1. A decision to transfer a certificate shall be voluntary by the Certificate Holder.

28.2.2. ASC certificates shall only be transferred once within the period of validity of a certificate.

28.2.3. The CAB shall conduct a full audit if the certificate has been transferred more than once during the certification cycle.

28.2.4. ASC certificates shall not be transferred in any of the following situations:
   a) The certificate is suspended
   b) Critical and major non-conformities have not been closed
      i. All critical and major non-conformities shall be closed to the satisfaction of the preceding CAB before the certificate may be transferred
   c) The parties involved in the transfer cannot agree on the transfer date
   d) Relevant documentation about the Certificate Holder (all records, audit evidence, including reports and history of non-conformities, confidential annexes) is not being made available to the succeeding CAB by the preceding CAB.

28.3. **Certificate Transfer procedure**

28.3.1. Once the holder of a valid certificate has informed the current CAB that they are applying for a certificate transfer with another CAB, the transfer of the certificate shall be conducted following these steps:

28.3.1.1. The preceding CAB, in consultation with the Certificate Holder, shall transfer all the information related to the Certificate Holder which is not publicly available on the ASC website within fourteen (14) days upon receipt of request from the succeeding CAB:
a) This shall include the status of open non-conformities, all evidence of closure of non-conformities detected in previous audits, and confidential annexes.

28.3.1.2. The succeeding CAB shall conduct a desk review of all the available information and decide either:

a) To carry out a transfer audit within three (3) months after the agreed transfer date according to the requirements for a surveillance audit, or
b) To follow the Certificate Holder’s surveillance audit planning
c) As part of the desk review the justification and rational of this decision shall be recorded.

28.3.1.3. The succeeding CAB shall propose a transfer date to the preceding CAB and the Certificate Holder. On this agreed transfer date all rights and obligations for maintaining the certificate shall pass from the preceding to the succeeding CAB.

a) Both CABs shall keep a record of the agreed date.

28.3.1.4. The succeeding CAB shall issue a new certificate on the agreed transfer date as follows:

a) The expiry date of the succeeding certificate shall remain the same as the expiry date of the preceding certificate
b) The scope of the succeeding certificate shall remain the same as the scope of the preceding certificate.

28.3.1.5. The preceding CAB shall cancel the existing certificate on the agreed transfer date via the ASC Database.

28.3.1.6. All open minor non-conformities and associated actions together with timelines that are applicable to the preceding certificate shall remain applicable to the succeeding certificate.

28.3.1.7. The results of any accreditation body assessment regarding the compliance of the Certificate Holder to certification requirements shall be applicable to the succeeding CAB.

28.3.1.8. The preceding and succeeding CABs shall update the ASC database according to the instructions issued by the ASC.

28.4. Certificate Transfer when the issuing CAB is losing or terminating its accreditation

28.4.1. The procedure in 28.2 and 28.3 above shall be followed with the following changes:

a) Suspended certificates may be transferred
b) Certificates with open major non-conformities may be transferred, and non-conformities shall be closed in accordance with requirements as set out in this document.

29. **Changes in Scope**

29.1. The CAB shall be responsible for determining whether or not a proposed change in scope requires an on-site audit. This includes:
   a) Addition of a new species
   b) Change to impacts on receiving water bodies including the addition of new receiving water bodies
   c) Physical change that impact working and living conditions
   d) Contractual reporting conditions described in clause 7.5.13 and 7.5.14 of this document
   e) Any other change to the certified operation determined by the CAB as requiring an on-site audit.

29.2. All on-site audits for changes of scope shall conform to Part B of this document.

29.3. If the CAB decides that an on-site audit is not required, the CAB shall record the justification for this decision. An updated certificate with the required changes to scope shall be issued by the CAB to the Certificate Holder and submitted to ASC.

29.4. The CAB shall register any changes in scope to an existing certificate in the ASC database within seven (7) days from the decision to change the scope.

30. **Suspension Cancellation or Withdrawal of Certification**

30.1. The CAB may suspend, cancel or withdraw a certificate for a contractual or administrative reason, including breaches to the contract requirements in section 7.

30.2. The CAB shall withdraw a certificate if the Certificate Holder conducts any of the following activities:
   a) Suggests bribing any member of the CAB
   b) Presents forged documents as evidence to the CAB, ASC or appointed accreditation body
   c) Threatens any member of the CAB.

30.3. The CAB shall withdraw a certificate if the Certificate Holder is successfully prosecuted for:
   a) Carrying out fraudulent activities confirmed by the statutory authority
   b) Child labour, slavery, human trafficking or forced labour
30.4. The CAB shall inform the ASC of any suspensions, withdrawals or cancellation of certificates within seven (7) days of the decision via the ASC database.

30.5. Suspended, withdrawn and cancelled certificates and related information will be updated on the ASC website.

30.6. The date of the suspension or withdrawal shall be the date the decision was taken by the CAB, whereas the date of cancellation shall be the date that the Certificate Holder informs the CAB and/or the ASC of its decision on cancellation.

30.6.1. If a certificate is suspended or withdrawn or cancelled, the CAB shall immediately instruct the Certificate Holder:

   a) Not to sell any product harvested from the date of suspension, withdrawal or cancellation as ASC certified or with the ASC logo or trademark

   b) To advise existing or potential customers in writing of the suspension, withdrawal or cancellation within four (4) days of the suspension, withdrawal or cancellation date

   c) The suspension deadline and the actions needed to lift the suspension.

30.7. The CAB shall set a deadline of a maximum of six (6) months for the Certificate Holder to complete the actions required to lift the suspension.

30.7.1. A suspension deadline shall not be extended.

30.8. If the actions are not satisfactorily completed by the Certificate Holder by the set deadline, the CAB shall withdraw the certificate.

30.9. Before lifting the suspension, the CAB shall verify that the Certificate Holder followed the CAB’s cessation of claims instruction described 30.6.1 and record this verification in the suspension lifting record.

30.10. The CAB shall record in the ASC database, the decision to lift a suspension within seven (7) days of the decision date.

31. Certification Information on the ASC Database

31.1. CABs shall be responsible for keeping their data entries on the ASC database up to date.
Annex A - ASC Vocabulary

Follow this link to the ASC Vocabulary Portal
Annex B - Auditor Qualifications and Competencies

All auditors shall possess the attributes described in clauses 4, 7.2.2 and 7.2.3.2.a in ISO 19011:2018.

Table A – Environmental Auditor qualifications and competencies

Auditors evaluating environmental requirements in ASC audits shall possess the following qualifications and competencies.

<table>
<thead>
<tr>
<th>Qualification/Competency</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Education</td>
<td>a) The individual shall have at least a post-high school diploma or equivalent (minimum course duration of two (2) years) obtained in a discipline related to the scope of certification, OR b) In exceptional cases practical experience can be regarded as equivalent. These cases shall be documented.</td>
</tr>
<tr>
<td>2. Work Experience</td>
<td>c) The individual shall have at least two (2) years of experience relevant to aquaculture operations (including aquaculture audits) and, if relevant, the processing facility being audited.</td>
</tr>
<tr>
<td>3. Language</td>
<td>a) Unless accompanied by an independent interpreter, the individual shall be a fluent speaker and reader of the language(s) used by managers, administrators and workers of the UoC being audited. b) The individual shall communicate effectively through an interpreter. c) The individual shall have knowledge of the technical language employed in aquaculture and processing of aquaculture products.</td>
</tr>
<tr>
<td>4. Audit training</td>
<td>a) The individual shall have undertaken and successfully completed an ASC approved auditor training course or courses in relation to specific standards and certification requirements, as required by the ASC, AND b) The individual shall complete the ASC training for new requirements as specified by the ASC within the deadlines set by ASC.</td>
</tr>
<tr>
<td>5. Audit Experience</td>
<td>a) The individual shall initially have completed a minimum of 10 days of on-site audit experience in conducting audits either environmental or aquaculture third party certifications (e.g., GlobalG.A.P., BAP, FOS, Organic Aquaculture) OR The individual shall have actively participated in at least three (3) ASC audits as a trainee; AND</td>
</tr>
<tr>
<td></td>
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<tr>
<td>---</td>
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</tr>
<tr>
<td>b)</td>
<td>The individual shall have undertaken at least one (1) satisfactory ASC audit witnessed by the CAB’s competent ASC auditor before final sign-off; AND</td>
</tr>
<tr>
<td>c)</td>
<td>The individual shall be witnessed by the CAB’s competent ASC auditor at least once every 3 years to maintain ASC auditor qualification.</td>
</tr>
</tbody>
</table>
Table B – Social auditor qualifications and competencies

**Auditors** evaluating **social requirements** in ASC audits shall possess the following qualifications and competencies.

<table>
<thead>
<tr>
<th>Qualification/Competency</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>6. Social auditing qualification</strong></td>
<td>The individual shall have one or more of the following qualifications or equivalent:</td>
</tr>
<tr>
<td></td>
<td>a) Has successfully completed a SAAS approved 5-day SA8000 basic auditor course, OR</td>
</tr>
<tr>
<td></td>
<td>b) Has successfully completed the Verité five day “EICC Labour &amp; Ethics Lead Auditor Course”, OR</td>
</tr>
<tr>
<td></td>
<td>c) Is an APSCA-approved auditor with category Certified Social Compliance Auditor (CSCA)</td>
</tr>
<tr>
<td><strong>7. Social auditing experience</strong></td>
<td>a) The individual shall have participated as an active audit team member in at least two (2) third party audits in agriculture or aquaculture, AND</td>
</tr>
<tr>
<td></td>
<td>b) The individual shall have participated as an active audit team member in at least five (5) third party audits for one or more of the following schemes:</td>
</tr>
<tr>
<td></td>
<td>• Amfori (Business Social Compliance Initiative - BSCI)</td>
</tr>
<tr>
<td></td>
<td>• Ethical Trading Initiative (ETI) Base Code</td>
</tr>
<tr>
<td></td>
<td>• Fair Trade USA</td>
</tr>
<tr>
<td></td>
<td>• Fairtrade International (FI)</td>
</tr>
<tr>
<td></td>
<td>• Goodweave (Rugmark)</td>
</tr>
<tr>
<td></td>
<td>• International Council of Toy Industries (ICTI) – Code of Business Practice</td>
</tr>
<tr>
<td></td>
<td>• Social Accountability International (SAI) SA 8000</td>
</tr>
<tr>
<td></td>
<td>• Worldwide Responsible Apparel Producers (WRAP) – Code of Conduct</td>
</tr>
<tr>
<td></td>
<td>c) The individual shall have undertaken at least one (1) satisfactory social audit under the supervision of a competent social auditor for any of the schemes in point b) above or the ASC social component.</td>
</tr>
<tr>
<td></td>
<td>d) The individual shall be witnessed by a competent social auditor for the ASC program or for any of the schemes in point b) above, at least once every 3 years to maintain the ASC social auditor qualification.</td>
</tr>
<tr>
<td>8. ASC Social Auditor Training</td>
<td>a) The individual shall have undertaken and successfully completed an ASC Social Auditor training course, or courses in relation to specific standards, as required by the ASC.</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>--------------------------------------------------------------------------------------------------</td>
</tr>
</tbody>
</table>
| 9. Competencies               | a) The individual shall have knowledge of local labor and human rights legislation  
|                               | b) The individual shall have familiarity with local customs  
|                               | c) The individual shall speak and read the primary local language, unless an independent interpreter makes up part of the audit team  
|                               | d) Unless accompanied by an independent interpreter, the individual shall be proficient in the language of the audit (at least at level B2 according to the Common European Framework of Reference for Languages (CEFRL), if the language is not native to the social auditor  
|                               | e) The individual shall be able to manage relationships with workers and managers. |
| 10. Continuous professional development | a) The individual shall conduct at least 3 ASC social audits per year  
|                                | b) The individual shall take part in ASC annual social auditor calibration session  
|                                | c) The individual shall attend update training or session on topics related to ASC social requirements. |
| 11. Qualifications for ASC environmental auditors evaluating social criteria | ASC environmental auditors evaluating ASC social criteria allowed by the “ASC social audit risk calculator” shall have the following qualifications:  
|                                | a) The individual shall maintain their ASC environmental auditor qualifications.  
|                                | b) The individual shall have undertaken and successfully completed an ASC Social Auditor training course, or courses in relation to specific standards, as required by the ASC.  
|                                | c) The individual shall have participated in at least two (2) ASC social audits under the supervision of an ASC social auditor to gain experience in employee interview techniques and employee file sampling.  
|                                | d) The individual shall have undertaken at least one (1) satisfactory ASC social audit, witnessed by a competent ASC social auditor before final sign-off.  
|                                | e) The individual shall be witnessed by a competent ASC social auditor for the ASC program, at least once every 3 years to maintain the ASC social auditor qualification. |
Table C – Lead Auditor qualifications and competencies

In addition to the requirements of tables A OR B lead auditors leading ASC audits shall possess the following qualifications and competencies.

<table>
<thead>
<tr>
<th>Qualification/Competency</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>12. Audit Training</td>
<td>a) The individual shall have successfully completed a Lead Auditor training course based on ISO 19011 principles that have a minimum duration of thirty-seven (37) hours. The certificate shall specify the course content and duration. Successful completion shall be indicated on the certificate. The Lead Auditor training course shall cover: applicable standards on quality auditing, auditing techniques, focus of the audits (psychological aspects and communication) and reporting, and it shall also include a practical case study.</td>
</tr>
<tr>
<td>13. Auditor Competency</td>
<td>a) The audit team leader should have acquired additional audit experience to demonstrate the competencies described below:</td>
</tr>
<tr>
<td></td>
<td>i. Plan the audit and assign audit tasks according to the specific competence of individual audit team members.</td>
</tr>
<tr>
<td></td>
<td>ii. Develop and maintain a collaborative working relationship among the audit team members.</td>
</tr>
<tr>
<td></td>
<td>iii. Manage the audit process, including:</td>
</tr>
<tr>
<td></td>
<td>• Making effective use of resources during the audit.</td>
</tr>
<tr>
<td></td>
<td>• Achieving audit objectives.</td>
</tr>
<tr>
<td></td>
<td>• Directing the audit team members, technical experts and interpreters.</td>
</tr>
<tr>
<td></td>
<td>• Coordination and collation of audit findings.</td>
</tr>
<tr>
<td></td>
<td>• Preventing and resolving conflicts and problems that can occur during the audit as necessary.</td>
</tr>
<tr>
<td></td>
<td>iv. Represent the audit team in communications with the Client.</td>
</tr>
<tr>
<td></td>
<td>v. Prepare the audit report in conjunction with the audit team.</td>
</tr>
</tbody>
</table>
Table D – Management Systems Auditor qualifications and competencies.

In addition to the requirements of tables A or B, *auditors* evaluating the management system requirements at ASC audits in multi-site option 2 (IMS) and group (GMB) UoCs shall possess the following qualifications and competencies.

<table>
<thead>
<tr>
<th>Qualification/Competency</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>14. Auditor training</td>
<td>a) The individual shall have successfully completed an IRCA or Exemplar Global management system lead auditor course.</td>
</tr>
<tr>
<td>15. Audit Experience</td>
<td>a) The individual shall have conducted at least three (3) management system audits.</td>
</tr>
</tbody>
</table>
Annex C - Audit Report Requirements

General Requirements

C1. Audit reports shall be written in English and in the most common language spoken in the areas where the operation is located.

C1.1. The CAB may submit only a report in English for audit reports of UoCs located in countries evaluated as Very High in the latest report by the EF English Proficiency Index.

C2. Audit reports may contain confidential annexes for commercially sensitive information.

C2.1. The CAB shall agree the content of any commercially sensitive information with the applicant, which shall be submitted separately to the ASC and be accessible to the appointed accreditation body upon request, as stipulated in the certification contract.

C2.2. The public report shall contain a clear overview of the items which are in the confidential annexes.

C2.3. Except for the annexes that contain commercially sensitive information, all audit reports will be public including unannounced audit reports.

C3. The CAB is solely responsible for the content of all reports, including the content of any confidential annexes.

C3.1. The CAB shall submit to the ASC the full Impact Assessments reports as required by the applicable ASC Standard. In case the assessment reports are in local language(s), a summary or synopsis of the report in English shall be included as part of the audit reports.

C4. The CAB shall submit to the ASC audit reports or summaries of non-conformities for failed audits or audits that resulted in the suspension, cancellation or withdrawal of a certificate.

C4.1. The CAB shall submit as a minimum a summary of non-conformities in English of each failed audit within 28 days from the date of the closing meeting or last on-site date.

C4.2. The ASC shall keep these reports published for 12 months and make them available upon request after this period.

C5. The CAB shall include a record of changes if a published final report is updated or corrected.

C6. Audit reports shall contain accurate and reproducible results.

Reporting Deadlines* for certification and re-certification audit reports
C7. Within forty-two (42) days of the completion of the audit the CAB shall submit a draft report written in English and the national or most common language spoken in the area where the operation is located.

C8. Within seven (7) days the ASC should post the draft report to the ASC website.

C9. The CAB shall allow Stakeholders to comment on the report for twenty-one (21) days.

C10. Within twenty-eight (28) days of the close of comments, the CAB shall submit the final report to the ASC written in English and the national or most common language spoken in the area where the operation is located.

C11. Within seven (7) days the ASC should post the final report to the ASC website.

Reporting Deadlines* for surveillance audit reports

C12. Within twenty-eight (28) days of completing the audit the CAB shall submit a summary of the non-conformities detected during the surveillance audit in English.

C13. Within ninety-eight (98) days of completing the audit the CAB shall submit a final report written in English and the national or most common language spoken in the area where the operation is located.

C14. Within seven (7) days the ASC should post the final report to the ASC website.

* Refers to calendar days
Annex D - COMMUNICATION WITH THE ASC

D1. Language
D1.1. All CAB communication with the ASC shall be in English.

D2. Forms
D2.1. CABs shall use the ASC database to submit Client and CAB information relevant to the Certification Process.
D2.2. Requests for interpretation of the ASC Requirements and requests for variance to these normative requirements shall be made by CABs via the Variance Request & Interpretation Platform

D3. Public Information
D3.1. The CAB is responsible for control of all confidential information submitted to the ASC on forms that specify public disclosure.

D4. Format
D4.1. Information shall be submitted in the formats specified by the ASC
Annex E - ASC CERTIFICATION FOR MULTI-SITE UoC

**E1. Scope**

E1.1. In addition to the requirements in this document, this annex shall be used by CABs to audit multi-site UoCs.

E1.2. The CAB shall evaluate the Internal Management Systems (IMS) requirements in Annex B of the ASC Certification Requirements for Units of Certification (RUoC) depending on the type of multi-site:

a) Multi-site option 1 (without IMS)

b) Multi-site option 2 (with IMS).

**E2. Initial Audit (Multi-site-options 1 and 2)**

E2.1. The CAB shall conduct an initial audit of multi-site Clients as follows:

a) All the sites shall be operative and with product on site

b) At least twenty five percent (25%) of the total number of sites meet one of the conditions specified in part B, section 8.2 of this document, Audit Timing

c) Include on-site visits of ALL sites in the unit of certification

d) Employee interviews conducted according to Social Audit Risk Assessment (Annex H)

e) Files and records shall be sampled at a rate to be established by the CAB taking into account that threats and risk level of the unit of certification are yet to be identified and assessed at the end of the initial audit.

E2.2. Initial audits for Multi-site shall include the evaluation of the relevant IMS requirements in Annex B of the ASC RUoC.

**E3. Sites**

E3.1. Only sites that are in production shall be included in the unit of certification of a multi-site applicant.

E3.2. Sites that are certified under an existing ASC certificate(s) may be exempted from the initial audit if:

a) The site has been the subject of an audit within the last 6 months, and

b) All major or critical non-conformities are closed in the specified timelines.

E3.2.1. The CAB may decide to audit any site that conforms to these conditions if it determines that it is necessary to demonstrate conformity with ASC Requirements.

E3.3. Sites may be removed from the scope of an initial audit by the CAB at the request of the Client.

E3.3.1. Removed sites and reason(s) of removal shall be included in the audit report.

E3.3.2. Audit findings of sites removed after the initial on-site audit shall be documented in the audit report.

E3.3.3. Sites that are removed from the scope of an initial audit may only be added to the scope of the certificate at a surveillance, recert or scope extension audit fulfilling the requirements of section 8 (Audit Timing), section 10 (Stakeholder
Engagement) and Annex C (Audit Report Requirements) applicable to initial audits.

E3.4. Sites may be removed from the scope of an existing certificate by the CAB
   a) due to a major non-conformity that is not closed out in due time OR
   b) due to not complying with applicable local regulations as notified by the Client.

E3.5. The CAB shall follow requirements in section 30 (Suspension, cancellation and withdrawal of certification) of this document when removing sites from a certificate.

E3.6. Reason(s) of site removal from a certificate shall be documented in the next audit report.

E3.7. Sites removed from a certificate may be added to the scope of the certificate once the CAB confirms that:
   a) all outstanding non-conformities are closed following an agreed timeframe between the multi-site Client and the CAB
   b) the site complies with applicable regulations and,
   c) product produced in the removed site(s) is not at risk of being included as certified production and in further certified chain of custody.

E3.8. New sites may be added to an existing certificate only after an on-site audit has been conducted by the CAB without any open major or critical non-conformities.

E3.8.1. Sites that are fallowed at the time of the initial audit shall be treated as new sites if they are to be added to the scope of a certificate.

E3.8.2. All site(s) removed from the initial audit and from a valid certificate as described above shall be treated as new sites if included in the next audit.

E3.9. The CAB shall update the certificate with an up-to-date list of all sites within the unit of certification and their locations each time a site is added or removed.

E4. Surveillance audits (Multi-sites with IMS (Option 2))

E4.1. All audits conducted after the initial audit, including surveillance and re-certification audits, shall use the risk weighted sampling procedure below.

E4.1.1. If the Client chooses to change to a different CAB, the succeeding CAB shall use the risk weighted sampling procedure below.
   a) Data gathered by the preceding CAB in its first audit shall be applied
   b) The succeeding CAB may use additional information for its risk weighted sampling procedure.

E4.1.2. If a Client had a certificate that has expired for any period of time, any new certification audits shall be treated as an initial certification (E2).

E4.1.3. The CAB shall make or revise its risk analysis of the Client using the same risk-based method described in this Annex E to determine the rate and selection of samples.

E4.1.4. The grading of threats as a low, medium or high risk may be revised based on audit evidence and other information gathered in previous audits and Stakeholder input received by the CAB.

E4.1.5. Grading of risks and sampling levels may change from audit to audit, based on the information gathered in previous audits and new information gathered.
E4.1.6. All ASC certification requirements relevant to threats that are determined to be high and medium risks shall be audited in every surveillance audit.

E5. Re-certification audits (Multi-sites with IMS (Option 2))

E5.1. All re-certification audits shall include all requirements for certification as stated in the relevant standard.

E5.2. The CAB shall review and revise the risk analysis for the Client using the same risk-based method described in this Annex E to determine the rate of sampling for the re-certification audit.

E5.2.1. The revision of the risk analysis for re-certification audits shall consider all risk information gathered in previous audits.

E6. Risk-Weighted Sampling Procedure (Multi-sites with IMS (Option 2))

E6.1. The CAB procedures shall document its risk-weighted sampling procedure that shall conform to this Annex E. This procedure shall include:

E6.1.1. Audit planning procedures including:
   a) Initial audits
   b) Surveillance audits
   c) Re-certification audits.

E6.1.2. Risk assessment procedures for threats not covered in this annex including:
   a) Threat identification
   b) Risk assessment
   c) Assignment of risk categories.

E6.1.3. Sample selection procedures including:
   a) Sample size
   b) Sample selection including following site(s).

E6.1.4. Reporting procedures:
   a) Reporting on audit planning, risk assessment and sample selection.

E7. Risk-Weighted Sampling (Multi-sites with IMS (Option 2))


E7.1.1. The CAB shall evaluate the operations of the Client against the ASC standard to be audited and identify any material environmental, operational, social or economic threats to its conformity to ASC Requirements that are not included in Table E1.

E7.1.2. These additional threats and associated risk assessment shall be included in the audit report.

E7.2. Risk Assessment

E7.2.1. For the threats listed in Table E1, the CAB shall apply the thresholds in the Table to determine if the risk is low, medium or high.

E7.2.2. For threats identified by the CAB that are not listed in Table E1, the CAB shall develop thresholds for determining whether the threat is a low, medium or high risk and shall include this information in Table E1 in the audit report.
This determination shall be based on the likelihood of the occurrence and the likely impact of each threat during the term of certification.

The audit plan shall include provision for evaluating threats that are identified by the CAB and are not listed in Table E1.

All threats assessed and their risk classification shall be described and justified in the audit report.

### Table E1 - Threat Evaluation Matrix for Multi-site risk assessment

<table>
<thead>
<tr>
<th>Threat</th>
<th>Threshold</th>
</tr>
</thead>
</table>
| **1. Management system weakness**                                     | Low Risk: The Client is certified to a management system standard such as ISO 9001 or 14001, or GAA/BAP group certification or GlobalG.A.P. multi-site option 2 or group certification.  
Medium Risk: The Client is not certified to a management system standard such as ISO 9001 or 14001, or GAA/BAP group certification, or GlobalG.A.P. multi-site option 2 or group certification.  
High Risk: The Client is not certified to management system standard such as ISO 9001 or 14001, or GAA/BAP group certification, or GlobalG.A.P. multi-site option 2 or group certification; and is known to have a weak management system. |
| **2. Weakness of Client’s internal site checklist**                    | Low Risk: All internal site checklists are complete and up to date.  
Medium Risk: Internal site checklists are not complete and up-to-date but performance is not being affected.  
High Risk: Internal site checklists are not complete and up-to-date and performance is at risk. |
| **3. Internal audit weakness**                                         | Low Risk: Complete internal audit at all sites is conducted by qualified internal auditors. Audit and audit report include a review of all ASC Requirements and internal site checklists. All audit findings are reported and acted upon.  
Medium Risk: Complete internal audit at all sites is regularly conducted by qualified internal auditors. Internal audit includes a review of all ASC Requirements and internal site checklists. Audit report is incomplete.  
High Risk: Either 1) Internal audit does not include a review of all sites and all ASC Requirements and internal site checklists  
Or 2) Internal audit is conducted by unqualified internal auditors. |
| **4. Staff training weakness**                                         | Low Risk: All responsible personnel at all sites are trained in relevant procedures and are competent to accomplish their responsibilities.  
Medium Risk: No staff training procedure is available. All responsible staff are trained to do their job to ensure  
High Risk: Staff training is deficient, or not occurring. |
<table>
<thead>
<tr>
<th>5. Multiple management systems</th>
<th>A staff training procedure is implemented.</th>
<th>conformity with ASC Requirements.</th>
<th>The Client has more than one management system implemented for all its operations.</th>
<th>The Client has more than one management system but only one is used by the central office and for all sites included in the unit of certification.</th>
<th>The Client has more than one management system for operations managed by the central office including for sites that are part of the unit of certification.</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. Records management weakness</td>
<td>All required records are retained and organised as per legal requirements, applicable ASC standard and own regulations.</td>
<td>Not all required records are found due to missing records, or they are not organised for retrieval.</td>
<td>Required records are not retained or found.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Subcontractors including subcontracted sites and subcontracted services (related to the operations of the unit of certification)</td>
<td>Either: 1) No subcontracted sites or services are used in the unit of certification; OR, 2) Performance requirements for subcontracted sites and services are defined. The performance of all subcontracted sites and services meet the defined ASC Requirements and are monitored by the Client. All records are retained by the Client.</td>
<td>Records of the Client monitoring the performance of subcontracted sites and services are not complete. The performance of subcontracted sites is found to be in compliance with relevant ASC Requirements.</td>
<td>Records of monitoring the performance of subcontracted sites and services are incomplete.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Use of resources</td>
<td>Purchasing of supplies and services is centralised. Records are complete.</td>
<td>All purchasing of supplies and services is centralised, but records are not centralised.</td>
<td>Supplies and services are purchased as needed and approved by more than one individual.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Record of NCs raised by the ASC CAB and response</td>
<td>No open NC(s)</td>
<td>Open minor NC(s)</td>
<td>Any site was once suspended or removed from the scope of a certificate within the past 3 years due to not complying with ASC Requirement(s).</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### 10. Complaints resolution weakness

<table>
<thead>
<tr>
<th>Description</th>
<th>All complaints regarding the UoC to the Client have been responded to and resolved within timelines in the Client’s complaint procedure.</th>
<th>Complaints regarding the UoC are addressed but not in a timely fashion as specified in the Client’s complaint procedure.</th>
<th>Evidence is found that complaint responses and resolution related to the UoC is intentionally delayed or avoided, OR A complaint related to the UoC has escalated to legal actions.</th>
</tr>
</thead>
</table>

### 11. Traceability weakness

<table>
<thead>
<tr>
<th>Description</th>
<th>All production of the UoC can be sold as ASC certified AND there is no non-conformity raised (by either internal or external auditor) against RUoC Annex B 1.4.2.</th>
<th>Not all production of the UoC can be sold as ASC certified but there is an effective tracking system implemented AND products are clearly identified, segregated and traceable as required in RUoC Annex B 1.4.2</th>
<th>Either 1) Not all production of the UoC can be sold as ASC certified and there is a non-conformity raised (either by internal or external auditors) against the requirement RUoC Annex B 1.3 b); OR 2) Owner(s) of any subcontracted sites has other sites producing the same species but not being part of the UoC.</th>
</tr>
</thead>
</table>

### 12. Country risk assessment score

<table>
<thead>
<tr>
<th>Description</th>
<th>Operations located in a country that is above 62 on Transparency International’s latest list and has not been designated as medium or high risk by ASC.</th>
<th>Operations located in a country that is between 32 and 62 on Transparency International’s latest list and has not been designated as high or low risk by ASC.</th>
<th>Operations located in a country that is 31 or less on Transparency International’s latest list and has not been designated as medium or low risk by ASC.</th>
</tr>
</thead>
</table>

### E8. Sample Size for surveillance and re-certification audits

**E8.1.** The minimum sampling size for sites and staff interviews shall be determined by using the “ASC multi-site sample size combined calculator” located on the ASC website.

**E8.1.1.** Audit approaches and any additional samples selected for risks identified by the CAB that are not listed in Table E1 shall be determined by the CAB.

i. These shall be documented in the audit report.

**E8.2.** Sample size for files and other records shall be determined by the CAB, considering the risk profile of the Client.

ii. Sample size for records should be greater for sites with elevated risks in areas where there are elevated risks.
E8.2.1. These shall be documented in the audit report.

E9. Sample selection

E9.1. The allocation of the sample size determined in E8 shall include:

E9.1.1. If the sample size is less than the total number of sites or staff to be interviewed:
   i. No less than 20% (rounded up) shall be selected randomly
   ii. No less than 50% (rounded up) of any balance shall be selected based on medium and high risk identified for any of threats number 2, 3, 7 or 9 in table E1.

E9.2. Where the Client’s operations, sites, locations or staff have been stratified, the sample selection for each stratum will conform to E9.1.

E9.3. For samples selected where there are only low risks identified under E7, E9.1.1 shall not apply.

E9.3.1. Samples for all low-risk multi-site Clients shall be representative and shall be clearly explained and documented in the audit report.
**Annex F - Requirements for CABs Providing Certification Services for Producer Groups**

**F1. Scope**

F1.1. This annex, in addition to relevant requirements in this document, shall be used by CABs to audit Producer Groups.

**F2. Normative Documents**

F2.1. In the application of this Annex CABs shall also conform to the requirements of the following:

F2.1.1. ASC Certification Requirements for Units of Certification (RUoC) Annex B.

**F3. Requirements for CABs**

F3.1. CAB audit team members shall conform to the requirements of Annex B of this document.

F3.2. The CAB shall apply the methodology described in this Annex to audit Group Producers.

**F4. Certification process**

F4.1. Review of application for Group certification.

F4.1.1. The CAB shall review and only accept eligible Group applicants as specified under Section 5 “Application for Group Certification” in the ASC RUoC.

F4.1.2. As a result of the review, the CAB shall determine whether a Group applicant shall have a separate MSC/ASC Chain of Custody (CoC) certification for the processing, packing or trading of ASC products.

F4.2. Desk review (off-site).

F4.2.1. A Desk Review shall be completed prior to any on-site audit (initial, surveillance, re-certification, and any other) and whenever major changes occur in the Group’s structure and/or Internal management system. As a minimum the CAB shall review the following document and record types:

- Group’s IMS policies and procedures
- The Sites Register (latest version)
- Reports of the latest Group internal audit and internal audits, including all non-conformity reports and evidence of their close-out
- Maps of Group Members
- Member agreement and/or contract farming terms and conditions
- Group Members’ sales and delivery notes
- Minutes of the last management review
• List of staff of the GMB and employees of each site and their functions
• Received complaints and appeals and details of their respective resolutions; for the 6 months preceding the initial audit, and between on-site audits for all subsequent audits.
• Other records as specified in the Desk Review section to social auditing, if applicable.

F4.2.2. Results of desk review shall serve as a source of information for the CAB risk weighted sampling procedure and planning for on-site audits.

F4.3. Risk Weighted Sampling Procedure

F4.3.1. The CAB procedures shall describe its risk-weighted sampling process for the audit of the Group that conforms to this Annex. This process shall include:
• Risk assessment procedures including threat identification, risk assessment, and assignment of risk categories
• Sample selection procedures including sample size, sample selection.

F4.4. Risk Assessment

F4.4.1. Before every on-site audit the CAB shall (re-)evaluate the operations of the Group Management Body (GMB) and its Group Members against the ASC Requirements to identify any material environmental, operational, social or economic threats to its conformity to ASC Requirements.

F4.4.2. For the threats listed in Table F1 in this Annex, the CAB shall apply the thresholds in the table to determine if the risk is low, medium or high. The default risk level of threats (except threat number 12) in Table F1 for the initial audit is Medium.

F4.4.3. For threats identified by the CAB that are not listed in Table F1, the CAB shall develop thresholds for determining whether the threat is a low, medium or high risk. This determination shall be based on the likelihood of the occurrence and the likely impact of each threat during the term of certification. These additional threats and associated risk assessment shall be included in addition to the Table F1 in the audit report.

F4.4.4. Threats may be added or removed based on audit evidence and other information gathered in previous audits and Stakeholder input received by the CAB.

F4.4.5. Risk classifications and sampling levels may change from audit to audit based on the information gathered in previous audits and new information gathered.

F4.4.6. All assessed threats and their risk classification shall be described and justified in the audit report.

F4.5. Sample size and sample selection

F4.5.1. The minimum sampling size for sites shall be determined by using the ASC Group sample size calculator (Excel file – Annex F-1). The CAB shall only use the number of small-scale producers to calculate the audit sample size (i.e. number of sites to be audited). Medium and large producers shall be singled out and audited in every CAB audit.
Any additional samples shall be determined based on the additional threats identified by the CAB.

F4.5.2. The sample size for documents and records shall be determined by the CAB, considering the risk profile of the Client. The sample size for records should be greater for sites with elevated risks in areas where the elevated risks are.

F4.5.3. Selection of sites shall include:

- Minimum 20% of the sampled sites shall be random
- Minimum 50% of the sample sites shall be based on medium and high-risk threats identified in section F4.5.1 above
- The balance shall be stratified based on production stages, production systems and methods, size of sites within the unit of certification, site location in relation to GMB’s office, sites admitted by the GMB in between CAB audits, new sites, number of sites per member, among others
- Fallow sites may be the sampled sites for any on-site audits, except the initial one.
- Sites with harvesting activities shall be included in the sample for initial, surveillance and re-certification audits
- Sites with critical and/or major non-conformities raised either in the latest internal audit or previous audit shall be included in the audit sample
- Where there are only low risks identified, the above requirements under F4.5.3.1- F4.5.3.5 may not apply
- Samples may be selected representatively

F4.5.4. Selection for interviews

- The CAB shall select to interview as many diverse positions within the GMB as possible
- As a minimum the interviews shall be conducted with Group internal auditor(s), Group’s decision-makers (regarding compliance status of sites, sanctions applied to Members and their site, removal/addition of sites, complaints and appeals, traceability), Group Members, managers of sites, workers if any
- The Group Coordinator shall only be counted in the interview sample if s/he takes charge of any of the Group’s other functions (e.g., Group internal audit(s), handling of Group’s product, handling of complaints and appeals)
- Farmers or site managers and workers of selected sites shall be interviewed.

F4.5.5. Sample size and justification for selection of sites, interviews and records shall be documented and explained in the audit report. This shall include any additional samples as determined by the CAB.

F4.6. Audit Planning
F4.6.1. Planning for all on-site Group audits shall be undertaken based on the results of the Desk Review and Risk-weighted Sampling process described above.

F4.6.2. The audit plan shall:
- Apply the sampling level and selection as determined
- Cover all requirements for certification as stated in the ASC Requirements for the Certification of Producer Groups and in the CAR (this document).

F4.6.3. The on-site audit plan shall include provision for evaluating threats that are identified by the CAB and are not listed in Table F1.

F4.7. On-site audits

F4.7.1. All audits by the CAB shall be on-site following the Desk Review and Risk-weighted Sampling procedures. This includes:

a) Initial audit
b) Surveillance audits
c) Re-certification audit
d) Follow-up (for closing out critical and/or major non-conformity, as determined by the CAB)
e) Re-audit
f) Transfer audit
g) Ad-hoc audit (to include new members if required by the Group).

F4.7.2. All on-site audits shall:

a) Be carried out at the GMB to verify the information previously provided to the CAB, and at selected sites of Group Members to verify the results of the Group’s internal audits of those sites
b) Review all ASC certification requirements relevant to threats that are determined to be high and medium risks
c) Conduct at a minimum 20% unannounced audits to sampled sites in the initial audit
d) Names of these sites receiving unannounced audits shall not be disclosed to the GMB and sites in advance, up to 48 hours prior to the actual on-site visit to those sites
e) If no non-conformities detected at sites receiving unannounced audits and no major non-conformities for the GMB, the CAB may consider to gradually reduce the amount of unannounced audits to sampled sites, but not to less than a level of 10% unannounced audits.
f) The other sites in the sample shall be announced to the GMB with no more than 2 weeks from the on-site audit.

F4.7.3. Within a certification cycle, all sites within the unit of certification should be audited on-site at least once if the size of the group allows it. The CAB should select sites not visited in previous audits.

F4.7.4. Group UoCs are subject to receive unannounced audits, as per CAB discretion based on GMB performance and risks.

F4.8. Adding and removing sites

F4.8.1. Upon GMB’s request to add new sites to the unit of certification, the CAB shall communicate its determination in a Letter of Approval to the GMB within a maximum forty-two (42) days.

- The CAB shall only accept requests to approve new sites if the GMB does not have any pending non-conformity
• The CAB shall review documents and records submitted by the GMB
• The CAB may request additional information from the GMB if deemed necessary
• The CAB shall carry out an on-site audit for adding medium and large sites.
• The CAB’s determination may be approval or rejection of all or a certain number of the sites submitted by the GMB
• Justification for any decision shall be provided in the Letter of Approval.

F4.8.2. The CAB shall update (the Annex of) the Group certificate and send to the ASC within seven (7) days of the CAB’s approval (to add new sites) or of the GMB’s submission to remove existing site(s).
• When approving to add new sites, in addition to the update Group certificate the CAB shall submit the Letter of Approval to the ASC for publishing on the website.

F4.9. Traceability

F4.9.1. The CAB shall run traceability tests during each audit to verify the effectiveness of the Group’s traceability procedures.
• The number of tests shall be at least 5% of the total number of selling transactions\(^7\) of ASC certified product carried out by the GMB in the past 12 months. If 5% represents less than one (1) selling transaction, one (1) traceability test shall be completed.
• The tests and outcome shall be documented in the audit report.
• The CAB shall reconcile volumes of Group’s production and sales of ASC certified product on a calendar year basis. This volume reconciliation may be included in the list of confidential annexes and shall be reported only to ASC.

F4.9.2. The CAB shall document its review of the risks to traceability that may arise due to any decisions taken relative to F4.9.1 - F4.9.2

F4.9.3. the CAB shall determine if the traceability systems are sufficient to allow products to enter chain of custody and record:
  a) The intended point of first sale
  b) The point from which chain of custody is required to begin.
     After the on-site initial audit, the CAB shall set a collective eligibility date, which is the certification date, for all sites of the Group. The CAB’s approval date shall be the eligibility date for new sites being added to the Group Unit of Certification.

F4.10. Audit findings and sanctions

F4.10.1. The CAB shall follow the requirements in 18 Findings (in the CAR) for the classification and treatment of audit findings of the GMB and sampled sites.

F4.10.2. In the event of a critical and/or major non-conformity raised for a site, the CAB shall:
   Immediately suspend the site if a critical non-conformity is detected,

\(^7\) See the definition for “Transaction”
Suspend the site if the major non-conformity is not closed by the deadline, Remove the sites from the Group certification scope if the critical non-conformity is not closed within three (3) months from Detection Date, or the major non-conformity is not closed within three (3) months after the deadline, Determine and inform the GMB that any product harvested from the suspended site(s) from the date of suspension shall be treated as non-certified, Sites removed from a Group unit of certification shall only be re-admitted to any Group after 12 months from the date of removal.

F4.10.3. The CAB shall raise non-conformities for the GMB at any time during the certification cycle if it comes to the CAB’s knowledge that a Certification Requirement for Producer Groups is not being met. A critical non-conformity for the GMB with regard to the effectiveness of internal audits shall be raised if more than one (1) site is found to have systematically not met a standard indicator. A critical non-conformity for the GMB shall be raised if it fails to fulfil any of requirements C2.2.3.1- C2.2.3.5 and C2.2.3.8 – C2.2.3.10 and C7.1 & C7.2 in the ASC Certification Requirements for Producer Groups.

F4.10.4. In the event of a critical non-conformity raised for the GMB, the CAB shall: Postpone the certification decision until the critical non-conformity is closed according to the timeline specified under section 18 in case of an initial audit; Immediately suspend the Group’s certificate until the critical non-conformity is closed within three (3) months from the date of detection, and; Withdraw the Group’s certificate if the critical non-conformity is not closed by the deadline. All product harvested from any sites of the Group unit of certification shall be treated as non-certified on the date of suspension onwards until the suspension is lifted. A Group with a withdrawn certificate shall only be re-admitted to certification by any CAB after 12 months from the withdrawal date. Upon re-admission, the CAB shall verify if the reason(s) of previous withdrawal has been effectively addressed.

F4.11. Group’s certificate

F4.11.1. The Group Certificate shall only be valid when accompanied by an Annex with the following information:
Names of the Group Members in the scope of Group certification;
Group Member’s full address;
Name of site(s) of each Group Member that is included in the scope of Group certification;
GPS (both longitude and latitude) of the sites;
Site (license) unique number or ID as indicated on the license or permit of the site;
Name of certified (sub-)species (in both Latin and English names) grown at each site;
Date the site(s) is added to the scope of Group certification. If the sites are included in the initial audit, the date shall be the Group’s initial certification date.

F4.11.2. The Group certificate is updated every time a site is newly added or removed from the Group’s Sites Register.

Table F1 - Threat Evaluation Matrix for Group risk assessment

<table>
<thead>
<tr>
<th>Threat</th>
<th>Threshold</th>
</tr>
</thead>
</table>

ASC Certification and Accreditation Requirements (CAR) v 2.3 - July 2022
<table>
<thead>
<tr>
<th>Management system weakness</th>
<th>Low Risk</th>
<th>Medium Risk</th>
<th>High Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Management system weakness</td>
<td>The Group has an organogram with defined functions. Each function has clearly defined role and responsibilities. The Group has the capacity to run its daily operations. Procedures are fully implemented; covering at least all areas specified in the ASC Certification Requirements for Producer Groups.</td>
<td>The Group has an organogram with defined functions. Procedures are fully implemented, covering at least areas (C2.2.3.1-5, C2.2.3.8-10) in the ASC Certification Requirements for Producer Groups.</td>
<td>The Group has procedures covering at least areas (C2.2.3.1-5, C2.2.3.8-10) in the ASC Certification Requirements for Producer Groups.</td>
</tr>
<tr>
<td>Internal audits weakness</td>
<td>Internal audit procedures are documented and implemented. Internal audits are led by competent auditors with third-party auditing experience leading at least 10 third-party audits. Each site is internally inspected more than once a year. All findings of the last internal audit round have been closed out prior to this risk assessment. All internal audits records are kept.</td>
<td>Internal audit procedures are implemented. Internal audits are carried out by qualified internal auditors. Not all findings of the last internal audit round are closed prior to this risk assessment.</td>
<td>Internal audits are carried out by trained Group Members. The last internal audit round was conducted just before this risk assessment.</td>
</tr>
<tr>
<td>Group internal audit weakness</td>
<td>Group internal audit procedures are documented and implemented. Group internal audits are led by competent auditor(s) with third-party</td>
<td>Group internal audit procedures are implemented. Group internal audits are carried out by qualified Group internal auditors.</td>
<td>Group internal audits are carried out by trained Members of the GMB.</td>
</tr>
<tr>
<td>Section</td>
<td>Description</td>
<td></td>
<td></td>
</tr>
<tr>
<td>---------</td>
<td>-------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Training weakness</td>
<td>The Group has training procedures documented and implemented. All functions within the Group are performed by competent persons. Yearly training takes place based on identified training needs within the Group. All Group Members are trained and understand Group’s certification.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Training weakness</td>
<td>The Group has training procedures implemented. Personnel are trained to do their job. Not all Group Members are trained and understand Group’s certification requirements.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Training weakness</td>
<td>The Group has training procedures documented. Not all Group Members understand Group’s certification requirements.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Overseeing operations of Group Members’ sites</td>
<td>All operations of all sites within the unit of certification are carried out according to a single set of standard operating procedures (SOP). The GMB provides technical assistance to Group Members through regular visits to their sites. Data of all sites’ operations is available at the GMB.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Overseeing operations of Group Members’ sites</td>
<td>There are SOPs provided to Group Members. The GMB does provide technical assistance to group Members once a year. Data and records are kept individually by Group Members.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Overseeing operations of Group Members’ sites</td>
<td>There are SOPs but not for all operations of Group Members’ sites. Group Members receive no visits from the GMB to oversee operations of their sites.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Records management weakness</td>
<td>All required records are retained and organised as per legal requirements, Not all required records are found due to missing records, or they are</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Records management weakness</td>
<td>Required records are not retained or found.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>applicable ASC standard, ASC Requirements for certification of Producer Groups, and own regulations.</td>
<td>not organised for retrieval.</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
</tbody>
</table>
| 7. Group governance | Group Members share common interests and objectives.  
Group Members participate in the GMB’s decision making.  
The GMB holds regular meetings with Group Members to discuss issues faced by the majority of Group Members.  
All GMB’s activities and decisions are transparent. | Group Members share common interests and objectives.  
No regular meetings are held with Group Members to discuss collective issues of the Group.  
GMB’s decisions are communicated to Group Members. | Decisions related to operations of Group Members are top-down. |
| 8. Use of resources | The Group has procedures for purchasing supplies and services documented and implemented.  
Purchasing of supplies and services is centralised by the GMB.  
Records of all purchases and distribution to Group Members are complete. | All purchasing of supplies and services is centralised.  
Records of purchases are available at the GMB. | Supplies and services are purchased as needed by individual Group Members. |
| 9. Sanction mechanism weakness | The Group has different events and associated sanction measures clearly defined.  
All Group Members are fully aware of | The Group has sanction measures clearly defined.  
Not all Group Members know about sanctions in the Group. | Events and sanctions are defined.  
Group Members are not aware of sanctions existing in the Group. |
<table>
<thead>
<tr>
<th>10. Complaints resolution weakness</th>
<th>Enforcement of the sanction measures is evident.</th>
<th>It is evident that sanctions are not imposed in any of the defined events.</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Group has complaints and appeals procedures documented and implemented.</td>
<td>The Group has complaints and appeals procedures implemented.</td>
<td>Evidence is found that complaint responses and resolution related to the unit of certification are intentionally delayed or avoided.</td>
</tr>
<tr>
<td>All complaints regarding the unit of certification to the GMB have been responded to and resolved within timelines in Client’s complaint procedure.</td>
<td>Complaints regarding the unit of certification are addressed but not in a timely fashion as specified in Client’s complaint procedure.</td>
<td>Group Members are not aware of the procedures.</td>
</tr>
<tr>
<td>Group Members are aware of how the procedures work in case they have complaints or appeals regarding their compliance status in the Group.</td>
<td>Not all Group Members are aware of the procedures and how they work.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>11. Traceability weakness</th>
<th>Any Group Member has more sites than those registered with the unit of certification.</th>
<th>Product of sites is sold as conventional by Group Members.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Either</td>
<td>All product of all sites within the unit of certification is sold centrally, both certified and non-certified (e.g., from suspended sites).</td>
<td>Group Members have more sites than registered ones with the unit of certification.</td>
</tr>
<tr>
<td>The unit of certification of the Group has a separate MSC/ASC CoC certification, <strong>OR</strong> The Group has traceability procedures documented and implemented.</td>
<td>The Group did have suspended or withdrawal sites either in the last CAB’s audit or through internal audits until this risk assessment.</td>
<td>Sites in the unit of certification are surrounded by uncertified sites growing the same species.</td>
</tr>
<tr>
<td>All Group Members have all their sites registered for the unit of certification. All product of all sites is sold centrally.</td>
<td>Group Members arrange delivery of their product to the GMB.</td>
<td></td>
</tr>
<tr>
<td>The Group did not have any site</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
suspended or withdrawn either in the last CAB’s audit or through internal audits until this risk assessment.

The GMB arranges collection of product from sites within the unit of certification. The Group does not have any new sites added to the unit of certification with CAB’s remote approval within the last 12 months.

| 12. Country risk assessment score | Operations located in a country that is above 62 on Transparency International’s latest list and has not been designated as medium or high risk by ASC. | Operations located in a country that is between 32 and 62 on Transparency International’s latest list and has not been designated as high or low risk by ASC. | Operations located in a country that is 31 or less on Transparency International’s latest list and has not been designated as medium or low risk by ASC. |
Annex G - Desk Review (Information of Unit of Certification/ List of Documents and Records/ CAB’s Review)

A separate Excel file is available on the ASC website. The format of the file may be altered to suit the operating system used by the CAB, however its content shall remain unchanged.
Annex H - Social Audit Risk Assessment Calculator

A separate Excel file available on the ASC website.