



AUDIT REPORT

American Chrome &
Chemicals N.A. Inc.
Main audit

ISO 9001:2015

Audit Date: 07/07/25
Reference:
22298315/00541827





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1. ORGANIZATION INFORMATION

NAME	American Chrome & Chemicals N.A. Inc.
ADDRESS	5408 Holly Shelter Rd , Castle Hayne, 28429, NC, USA
MAIN CONTACT	Joel Bing
PHONE	910-675-7216
EMAIL	joel.bing@americanchromechemicals.com

2. AUDIT INFORMATION

Audit Type:	Main audit		
Accreditations:	UKAS	N. Sites: 1	N. Employees: 178
Head Office:	American Chrome & Chemicals N.A. Inc.		
Start date: 07/07/25	End Date (Closing meeting): 07/12/25		Duration (days): 5.5

Audit Criteria (Standards)	Certification Global Scope
ISO 9001:2015	Manufacture and supply of Chromium and Chromate Conversion Products to the metal finishing, surface treatment and catalyst manufacturing industries

In addition to the standards above the audit criteria include the defined processes and documentation of the management system developed by the organization.



3. EXECUTIVE AUDIT SUMMARY

Team Leader recommendations

Recommendation	Grant Certification
Reason for issue or change of the certificate	Main Audit
Scope modification comments	During the audit we confirmed that the certification scope is appropriate.
Follow up required? No	

Number of findings identified in the audit

Minor nonconformities	Major nonconformities	Opportunities for Improvement
0	0	3

Audit Conclusions

There have been no significant changes affecting the management system of the organization since the last audit.

Auditing is based on a sampling process of the available information and the audit methods used were interviews, observations, sampling of activities and review of documentation and records.

Previous events corrective action effectiveness:

During this audit there was no previous nonconformities with the need to get effectiveness reviewed.

The organization has demonstrated an effective implementation of its management system in conformance with the standards.

- Internal audit process:
 - Reviewed and discussed following:
 - Internal Audit Plan and Schedule - scope of an individual audit defined on the Process Plan for that specific key process - Internal audit results and status discussed during Management Review.
 - Internal audit Procedure 11.02.14 rev 0

Last done – Nov 13-14, 2024, by Kristin Case, Lead auditor from North Carolina State University – verified qualifications – Ok
 Audit plan – covered all processes
 Audit report reviewed – 9 NCs and 1 OFI raised – good audit report – covered all processes.
 Reviewed Corrective actions & closure – Ok.
 One full round of Internal audit was conducted.

- Management review process:
 - Planned at planned intervals using the Management Review Plan - retained on the Management Review Meeting Minutes
 - Yearly frequency - last done on May 13, 2025 – covered all input and output requirements as per ISO 9001:2015 - good coverage of all agenda points - Ok
 - One full round of Management review was conducted.
- Capability to meet applicable requirements and expected outcomes:
 - The management system has shown to be capable to meet applicable requirements and expected outcomes. Appropriate documentation available in audit trail notes.

The audit objectives as presented in the Appendix – Audit Planning – have been fulfilled.

A full ISO 9001:2015 Recertification audit was conducted from 7-11 July 2025 covering the appropriate clauses of the international standard(s) as applicable to the client identified processes within the scope of certification.

The logistics (site name, address, scope, industry codes assigned, current employee count, current scope of operational processes, etc.) were verified between the appropriate client representative(s) and the Lead auditor, and it could be confirmed that the information on the Certificate, Justification sheet/Contract, and Surveillance Plan is accurate and up-to-date.

The management system information and oversight of all operations of the management system and its processes.

- The processes for document and record control was verified as conforming to standard requirements.
- The Management Review process is currently in place and is effectively maintaining the management system.
- The internal audit program has been established to meet the requirements of the international standard and has taken into account the importance of the processes relating to the production process.
- The internal audit program also produces effective results in identifying areas of non-conformances and results in corrective actions generated based on audit findings.
- The logo is currently not being used at this time.

The processes were assessed against the requirements of the standard and the internal quality management system and customer requirements with the following conclusions:

0 Nonconformity and 3 OFIs.

The following trends related to deviations from management system requirements were noted:

No trends of non-conformities detected here.

Based on successful completion of this audit it was determined that the Management system of your organization continues to meet the expected outcomes of the ISO 9001:2015 standard and is continually improving.

Therefore, the result of this audit activity is a recommendation from the audit team to Certification to the ISO 9001:2015 standard.



Congratulations to your entire team for a job well done. Thank you as well for your hospitality and transparency throughout the audit. I look forward to our next visit.
Ashok Mammen – Lead Auditor

Use of Marks and Logos:

The organization does not use accreditation/certification marks and logos.

Review of Performance for Current Cert Cycle:

Effectively implemented.

4. AUDIT FINDINGS

Best Practices

#	Process	Description
1	Quality Management	<ul style="list-style-type: none"> • Procedures established for all QMS processes • Tracking of quality objectives • Management review - comprehensive • Internal audits done well. • Employee awareness to Quality policy, Quality objectives and procedures • Top management involvement in all QMS processes

Opportunities for Improvement

#	Process	Clauses	Description
1	Quality Management	9K 5.2.2	May consider including Quality policy in the Employees/Visitors/Contractors orientation training.
2	Contract Management	9K 8.1	May consider periodic audit of outsourced packaging process of Na sulphate at South Atlantic Services (SAS). Inspection was done by Quality Manager and Plant Manager on May 14, 2024 & June 13, 2025 – Report reviewed – Ok.
3	Quality Management	9K 7.1.5	<ul style="list-style-type: none"> • May consider including handheld pyrometer used by Klin operator for tempt check in the plant calibration plan

Unresolved points (if identified)

Nil



5. AUDITOR NOTES

Site name:	American Chrome & Chemicals N.A. Inc.			
Process	Date	Standards	Auditor	Contacts
Quality Management	07/07/25	ISO 9001:2015	ASM	Joel Bing (Quality Manager) Stan Hansley (Plant Manager) , Joel Bing (Quality Manager) Brandon Peck, Wayne Jeffcoat

Notes

Discussed and reviewed the following:

Went for site tour of the plant after the opening meeting.
The Castle Hayne facility is one of the largest chromium manufacturing plants in the world. The Castle Hayne plant produces three major products that provide the basis for the other chromium sites within ACC are purchased worldwide and are found in multiple applications. Sodium sulfate is a co product produced that also has many worldwide uses.

SODIUM DICHROMATE DIHYDRATE (SSD) is an oxidizing agent and can be used to manufacture inorganic pigments and chromium sulfate, as a passivate for steel and other metals, and in oil field drilling mud systems. SDD is also used in Leather tanning.
SODIUM DICHROMATE SOLUTION 69% (SDS) is liquid version of SODIUM DICHROMATE DIHYDRATE. It is an oxidizing agent and can be used to manufacture inorganic pigments and chromium sulfate, as a passivate for steel and other metals, and in oil field drilling mud systems. SDS is also used in Leather Tanning.
CHROMIC ACID FLAKE is a high-purity crystalline product for use in chromium plating, metal passivation, aluminum anodization and wood preservation applications. It can also be used in the production of chromate conversion compounds, bright dips, pigments and catalysts. CA Flake can be found in such items as shock absorbers, pistons, bearings, hydraulic cylinders, Sanitary fixtures, auto accessories, appliances, Telephone poles, marine pilings, and railroad ties.
SODIUM SULFATE ANHYDROUS is a free-flowing, high purity, white crystalline salt. The product is used primarily in the textile, detergent, paper and glass industries.
American Chrome & Chemicals ISO 9001:2015 Quality manual Rev 10 was reviewed - Ok.

QMS Manual - logged in FoCul American Chrome & Chemicals controlled Document Manger – Castle Hayne – OK

Total number of employees – 178
Shifts:
1st shift: 6 am to 6 pm
2nd shift: 6 pm to 6 am
Office: Monday to Friday: 7 am to 5 pm
It was not necessary to audit all the shifts since the manufacturing process is continuous and identical activities in all shifts. No unique processes occur on the 2nd shift that cannot be confirmed on 1st shift. This was confirmed from a review of the job orders and competencies of the employees.
Effectiveness of processes was possible to gauge via the audit of the 1st shift after interviewing of relevant responsible personnel.
Reviewed scope and quality policy documented in QMS manual.
Scope confirmed as "The manufacture and supply of Chromium and Chromate Conversion Products to the metal finishing, surface treatment and catalyst manufacturing industries."
Exclusion & justification: clause 8.3 Design and Development
Justification: All products manufactured based on Chromium manufacturing standard.

Context of the Organization:
Internal & External Issues and Interested Parties:
Reviewed Internal and external issues identified - initially addressed by top management, recorded on the Improvement Plan and monitored in Management Review meetings.
Reviewed Improvement plan rev 6
Risk Prioritization and Response conducted for all applicable internal and external issues – sampled:
Quality Performance, Production or Service Efficiencies, Environmental Management / Climate Change, Training Needs, Technology Needs / Trends
Actions to address Business Risk and Opportunities identified for
Technology Needs / Trends: upgrading technology - upgraded the DCS system and installed new camera systems and security badge system – Status: Ongoing through 2025
Environmental Management / Climate Change: Quarry life limited (less than 3 years) - Need to continue to seek ways to reduce environmental impacts – Status: Ongoing through 2025. May create a quality objective around quarries in 2026.

Quality policy - reviewed - meets requirement – documented in Quality manual and QMS plan - posted in different areas in the facility, provided as card to employees - availability to interested parties on request.
OFI: Consider including Quality policy in the Employees/Visitors/Contractors orientation training.

Reviewed Organizational chart 2025 - all positions filled.
Roles and responsibilities - identified in QMS plan (rev 6), Job descriptions – sampled: Production supervisor, Production operator, Manager - Ok.

Discussed following topics with Plant manager (Top Management)
1) Automation upgradation – started in 2025 – improve in process, tighter parameters, efficiency, quicker response time
2) Training of operators
3) Maintenance – training with Café Fear Community college
4) Support from HQ – very good
5) Feedback from customers – good
6) Employee turnovers
7) Suggestion box
8) Incentives
9) Communication – toolbox talk (weekly), all employees (quarterly)



Risk management process – identified in the Process Plans and Improvement Plan and evaluated in the Management Review meeting - Ok

Objectives and targets:

Previous quality objectives reviewed

- 2024 quality objectives - reviewed in Management review 2025.
- Hazard Recognition met – 1/month goal – achieved > 1/month per employee
- Product Complaints per 1000 MT Produced - < 0.050 % - achieved 0.112: Several repeat complaint caused Product Complaints / 1000 MT Produced to not be met. These complaints were investigated and resolved with retraining of personnel. High turnover rate in CA Packing. More oversight of Packing and Shipping needed.
- Procedures in Document Manager – goal 100% complete by Sept 2024 - completed in Nov 2024: Document Manager procedures updated a month late due to change of personnel working on updating database.

Quality objectives 2025 established – documented in Quality measurement plan rev 6 – discussed and reviewed:

- 1) Safety Interactions – goal/target > 90% Completion for 2025 - Monthly data collection from HSE Manager – Status: 100% YTD- on target
- 2) Reducing Quality Complaints from Customers - 25% Reduction from 2024 (18 in 2024) - Monthly data collection from Quality Manager – Status: 11 YTD – behind target
- 3) Product Complaints per 1000 MT – goal 0.100 % - Monthly data collection by the Quality Manager - Status: 0.191% through May – behind target
- 4) Reduction of Costs by Removal of all Frac Tanks on Site – goal 100% Removal by end of 2025 - Monthly data collection by the Operations Manager – Status: 9 remaining thru May – on track
- 5) On Time In Full Shipping of Products to Customers – goal: Greater than 87% - Monthly data collection by the Supply Chain Manager and Quality Manager – Status: 88.8% YTD – on track

All above to be reviewed annually during the next Management review- Ok

Process	Date	Standards	Auditor	Contacts
Quality Management	07/08/25	ISO 9001:2015	ASM	Joel Bing (Quality Manager) Derek R, Kyle Earley (Safety), Cheryl Morlote (HR Manager)
Notes				



HR & training:

Discussed and reviewed the following:

Resource planning - done yearly or as and when required

On boarding process: safety training – instructor led as well as computer based – on the job training – written test taken – sampled

1) Julia Hunt (QC lab) – date of hire 11/4/24 – safety training 11/5/24 – on the job training completed 12/20/24 – Ok

2) Lukas Lanier - date of hire 10/4/24 – safety training 10/10/24 – on the job training completed 11/24/24 – Ok

Castle Hayne Plant ISO 9001:2015 training – sampled

Charles Brewer (Maintenance) – 9/10/24

Levi Wells (Plant operator) – 3/19/24

Beth Riggs (Lab Tech) – 9/17/24

Communication and awareness plan rev 4 Doc# 11.02.10 – determined the internal and external communications - topic of communication, occurrence frequency, who needs to be involved, how they should be communicated, and who is responsible were identified – sampled – Ok.

Documented Information:

Document control procedure Doc# CASQT-4.3.05 dt 3/9/25 rev 3 – Ok

Record retention policy – Doc# CASHR-08.01.07 rev 2 dt 6/4/25

Reviewed Record storage matrix - 5-year minimum retention period identified.

Sampled – Management review Doc#11.02.15 rev 1 dt 4/7/25 – reviewed every year – Ok

Wet Area log sheet – Doc#02.00.02.01

Dry side worksheet form – Doc#04.01.09.01 –

Customer complaint response form – 04.03.07 – Ok

Management of change:

Sampled

New XRF machine for Labs – MOC# General 1188_2021_1 – dt of start 3/19/25 – installed dt 6/25/25 - Ok

Monitoring, measurement, analysis and evaluation - maintained within Measurement Plan – reviewed in Management Review.

Customer satisfaction

Used customer complaints and customer satisfaction surveys. The customer satisfaction data is discussed during Management Reviews.

Nonconformity and corrective action - documented in Customer Complaints Spreadsheet and discussed during Management Review

Internal audit:

Reviewed and discussed following:

Internal Audit Plan and Schedule - scope of an individual audit defined on the Process Plan for that specific key process - Internal audit results and status discussed during Management Review.

Internal audit Procedure 11.02.14 rev 0

Last done – Nov 13-14, 2024, by Kristin Case, Lead auditor from North Carolina State University – verified qualifications – Ok

Audit plan – covered all processes

Audit report reviewed – 9 NCs and 1 OFI raised – good audit report – covered all processes.

Reviewed Corrective actions & closure – Ok.

One full round of Internal audit was conducted.

Management review:

Planned at planned intervals using the Management Review Plan - retained on the Management Review Meeting Minutes

Yearly frequency - last done on May 13, 2025 – covered all input and output requirements as per ISO 9001:2015 - good coverage of all agenda points - Ok

One full round of Management review was conducted.

Corrective action:

Taken as part of Customer complaint proc Doc# 04.03.03

Sampled customer Complaints:

1) Received by customer service by email dt 3/21/25 - Customer: Unid – drum with wet material inside - corrective action report 4/4/25 – RCA done – corrective action taken – review of CA under progress – Ok

2) Received by customer service by email dt 1/17/25 – Customer: Lautan-Luas – package issue – Corrective action report 02/5/25 – RCA done – corrective action taken – review and closure under progress – Ok

3) Received by customer service by email dt. 4/23/25 - customer: Univar Solution – action taken - Ok

Acknowledgement to customer after receiving complaint - Ok

Continual improvement Project on water in SO2 – started Oct 2024 – discussed and reviewed root cause map & solutions – project under progress

Process	Date	Standards	Auditor	Contacts
Contract Management	07/08/25	ISO 9001:2015	ASM	Tim Tippett, Petricia Sullivan, Charles Head, Michelle Moore
Notes				



Discussed and reviewed the following:
 Contract management process plan rev 5 Doc# 11.02.06

Sampled customer purchase orders, review requirements, pick tickets, BoL & packets - CoA, COC, Booking confirmation, Trailer & container inspection checklist & trailer loading form

- 1) Customer Order # NCIPD-250623-01 – customer: Nyspon Chemical – pick slip 7/7/2025 - Ok
- 2) Customer Order # 186789 – customer: Gallade Chemicals – pick slip 7/7/2025 – Ok
- 3) Customer Order # 907015 – customer: Ingredion Inc – pick slip 7/2/2025 – Ok
- 4) Customer Order # 183603 – customer: South Atlantic Services – pick slip 6/16/2025 – Ok

All steps followed as per procedure effectively - Ok.

Outsourced process: Sodium sulphate (the only bye-product produced) is packed at South Atlantic Services (SAS) – shipped to customers.

Inspection done by Quality Manager and Plant Manager on May 14, 2024 & June 13, 2025 – Report reviewed – Ok.

OFl: Consider including periodic audit of outsourced process

Customer complaint – Proc Doc #04.03.03 rev 4 dt 3/9/25

Sampled customer Complaints:

- 1) Received by customer service by email dt 3/21/25 - Customer: Unid – drum with wet material inside - corrective action report 4/4/25 – RCA done – corrective action taken – review of CA under progress – Ok
- 2) Received by customer service by email dt 1/17/25 – Customer: Lautan-Luas – package issue – Corrective action report 02/5/25 – RCA done – corrective action taken – review and closure under progress – Ok
- 3) Received by customer service by email dt. 4/23/25 - customer: Univar Solution – action taken – Ok
- 4) Received by customer service by email dt 4/22/25 - Customer: Industrial Chemical – powdery issue of product – acknowledgment to customer 4/22/25 – customer response 5/16/25 – customer returned material 6/9/25 – credit note issued 6/9/25 – complaint closed.

Customer evaluations received – discussed every Thursdays – sampled SOIP meetings 6/19/25, 5/29/25

Received from customer Anchor Glass Co on 4/21/25 – score 100% over all

Received from customer Maringa Quimar on 6/1/26 – score 95% over all

Process	Date	Standards	Auditor	Contacts
Purchasing and Receiving	07/09/25	ISO 9001:2015	ASM	Tim Tippett, Dona Cookston

Notes

Discussed and reviewed the following:
 Procedure Approval of supplier Doc#07.02.03
 Supplier corrective action – uses Customer compliant procedure
 Supplier quality assurance survey Doc# 07.06.01 – under updation – Ok

Reviewed process plan Rev 5

Sales forecast – plan – Purchase order – select supplier – raise PO

Supplier inspection (audit) form Doc# YLD-YLMD-SAY-F-09

Supplier re-evaluation form – rating – risk rating – A, B & C vendors

No supplier corrective actions raised till date

Sampled purchase of raw materials & packaging materials and receipt of the same

- 1) Raw material: Ferrous chloride – PO# 737707 – Supplier: IAC Works LLC, dt 12/31/24 – in approved supplier list – supplier evaluation done – criteria: OTIF & complaints – material received based on CoA – reviewed raw material specification - Ok
- 2) Raw material: Flocculant – PO# 741049 dt 6/2/25 – Supplier: Polytech Inc - in approved supplier list – supplier evaluation done – criteria: OTIF & complaints – material received based on CoA – reviewed raw material specification - Ok
- 3) Packaging: 25 kg open top bag – PO# 740213 dt 4/22/25 – Supplier: United Bags Inc - in approved supplier list – supplier evaluation done – criteria: OTIF & complaints – material received based on visual check -

Process	Date	Standards	Auditor	Contacts
Order Fulfillment and Manufacturing	07/09/25	ISO 9001:2015	ASM	Manufacturing: Stan Hansley, Wayne J, David, Tyler R, Mike Thomson, Eddie Lewis, David Lyerly, Jared Wells QC: Joel Bing, Julia Hunt, David R Calibration: Mike Mathews (Plant) Joel Bing (Lab)

Notes



Discussed and reviewed the following:
Operational planning and control – reviewed QMS Plan and Process Plans

All phases of product or service realization controlled - controls include documented characteristics, monitoring and measurement, validations or reviews of products and/or processes, and release and post-delivery activities.

Products identified by means of unique lot and batch number - use stickers or tags indicating the date produced along with unique numbers.
Finished products released for shipment to the customer by authorized Lab Technician(s), QA Manager/ Lab Manager, or Site Manager after verifying quality of products against product specifications.
Nonconformity resolutions taken using Customer Complaint Report.
Discussed and reviewed Order fulfillment & Manufacturing Process Plan rev 5,
Chromium manufacturing process from ore receipt to manufacture of various products – Chromic acid products, Sodium dichromate crystal products, Sodium dichromate liquid products and Sodium Sulfate products (bye product).
Manufacturing was carried out as a continuous process

Sampled Associated Documents & Records: Training Plan, Batch records, Inventory, OTIF, Schedule Adherence, JD Edwards Backflush, Operating Procedures, Safety Procedures
Discussed Inputs, activities, outputs and controls

Went to the production floor – Discussed with employees on site - observed their activities and interviewed.

Kiln Operation:
Reviewed Kiln/utility log sheet maintained Doc# 02.00.01.01 – Roast temperature, Exit gas temperature taken – within set point – uses handheld pyrometer for temperature check
OFI: Consider including this pyrometer in Plant calibration plan
Discussed and observed Process tests carried out by operator – Roast water soluble Cr and Sodium ash content tests – Ok

Quench Operation: Quench log sheet maintained
Test carried out - Quench density (Be Bame) – wihin target - Ok

Process	Date	Standards	Auditor	Contacts
Order Fulfillment and Manufacturing	07/10/25	ISO 9001:2015	ASM	Manufacturing: Stan Hansley, Wayne J, David, Tyler R, Mike Thomson, Eddie Lewis, David Lyerly, Jared Wells QC: Joel Bing, Julia Hunt, David R Calibration: Mike Mathews (Plant) Joel Bing (Lab) , QC: Joel Bing, Julia Hunt, David R Calibration: Mike Mathews (Plant) Joel Bing (Lab)

Notes



Evaporators: Tripple evaporation operation – critical parameter pH 3.9 to 4.2, Be >37 – all within spec – Ok

85% Evaporator – Crystallizer Filter log sheet Doc# M55000011- reviewed – all within spec – Ok

Salt cake log sheet – Cr hexavalent – limit <0.05 – within limit – Ok

Chromic acid reactor, filter and scrubber log sheet – Ok

Chromic acid melter log sheet - Sulphates and tempt – monitored every 4 hours – Ok

Chromic acid packing – scales used: tare scale, Final full scale, Check scale, 2nd check scale – all calibrated by Toledo Carolina – done monthly – last done 6/18/25 – next due 7/18/25 – Ok.

Discussed with operators – demonstrated good knowledge of procedures, Quality policy and Quality objectives

The production areas are operated by control systems that are monitored by operators. These operators still must make rounds to confirm the systems are reading and functioning properly. Operators can make control adjustments to further purify the products they control. When issues arise with computers or equipment, repairs are sent to either instrumentation and electrical or maintenance to resolve. Maintenance activities are tracked in JDE through work orders prepared or PM's scheduled. The packing of final product is operated by machinery that requires operators to manage filling of containers / railcars and manual handling is required to finalize shipments.

Post-delivery activities include any technical support, complaints, and questions, received by Customer Service & Sales. These were reviewed during the audit.

Quality control:

Tour of Quality control lab – discussed various tests carried out

Sodium sulphate lab – sampled - moisture analysis, pH, carbonate –

Chromium lab - % dichromate test – use densitometer – calibration done by Mettler Toledo – last done 4/4/25, due Sept 30, 2025 – Ok

In process samples test – discussed and observed total chrome, soda ash

Retention of samples – Ok

Final products – sampled – reviewed results

Dichromate liquor – Lot # G0101 – dt July 1, 2025 – % Dichromate 68.44 - within spec – Ok

Chromic acid – Lot# 05125 dt May 21, 2025 – Chromic acid content 99.9 – within spec – Ok

Dichromate crystal – Lot# 3000BXDE2301 dt 23 May 2025

Na dichromate dihydrate – 102.12 (spec 100-106)

Na sulfate – 0.14 (0-0.30)

All within spec - ok

Sodium sulfate (bye product) – Lot# 3000BSSD1201 dt 12 April 2025 – Sodium sulfate & pH (10% sol) – all within spec - Ok

Process	Date	Standards	Auditor	Contacts
Quality Management	07/10/25	ISO 9001:2015	ASM	Calibration: Mike Mathews (Plant) Joel Bing (Lab)

Notes

Calibration:

Reviewed Plant calibration plan – Doc# 11.02.21 rev 2 dt 6/18/25

Sampled following from plant and QC Laboratory

Lab:

- 1) Analytical balance #0038203561 – last done 4 April 2025 – next due 30 Sept 2025 – done by Metter Toledo – reviewed certificate – Ok
- 2) Analytical balance #F 0821200520227 – last done 3 April 2025 – next due 30 Sept 2025 – done by Metter Toledo – reviewed certificate – Ok
- 3) ICAP 6300 Radial # 20111003 – last done 3 Jan 2025 – next due 3 Jan 2026 – done by Thermal Fisher - reviewed certificate – Ok

Plant:

- 4) Weighing scale # 0146364-6LM – CA packaging - monthly frequency - last done 6/18/25 - done by Toledo Carolina – reviewed certificate – Ok
- 5) Weighing scale Chromic acid floor scale - monthly frequency - last done 6/18/25 - done by Toledo Carolina – reviewed certificate – Ok
- 6) pH analyzer – Acidifier tank – monthly frequency – last done 7/8/25 – done inhouse – calibration checked – Ok

OFl: Consider including handheld pyrometer used in Klin operation in the Plant calibration plan.

Process	Date	Standards	Auditor	Contacts
Quality Management	07/11/25	ISO 9001:2015	ASM	Maintenance: Jeff Radley, Wayne Wray, Rob Garris, Joseph Lee

Notes

Reviewed PM schedule and Emergency work order – maintained in JD Edwards system

Sampled following maintenance records from different areas of the plant – reviewed work orders - all done as per PM frequency.

- 1) Dry end – Ball Mill inspection / PM 6 MO – half yearly – Ok
- 2) Wet end – PM#3 SC Bird Centrifuge – monthly frequency – Ok
- 3) Chromic acid – PM CA Filter wheel wear Pit 2 M – Ok
- 4) Emergency work order # 1564304 – Dry side – install motor - request 3 July 25 – completed 3 July 25 - Ok
- 5) Emergency work order # 1564303 – Open pump & inspect – request 3 July 25 – completed 3 July 25 - Ok

6. ANNEXES

HOW TO ANSWER TO A NONCONFORMITY RAISED BY BUREAU VERITAS AUDITOR(S)?

Nonconformities detailed herein shall be addressed through the organization's corrective action process, in accordance with the relevant corrective action requirements of the audit standard.

Here under you will find Bureau Veritas Certification requirements for:

- Expected timelines to address the nonconformity (a)
- Response content (b)

Expected Timelines to Address the Nonconformity (a)

Corrections and Corrective actions (if possible) to address identified major nonconformities shall be carried out immediately. Root Cause Analysis, Correction and Corrective action plan together with satisfactory evidences of implementation shall be submitted within **90 days after the last day of the audit unless Bureau Veritas Certification and client agree on a longer period of time.**

Review of nonconformities is done through desktop review. However, depending of severity of the findings, our auditor may perform a follow up visit to confirm the actions taken, evaluate their effectiveness, and determine whether certification can be recommended or continued.

For a minor nonconformity, root cause analysis, correction and corrective action plan shall be approved by the team leader and verification of implementation and effectiveness of corrective action(s) taken will be performed at the next visit.

It is recommended that the Client provide responses early to allow time for additional reviews if needed.

For recertification time limits to address nonconformities will be defined by the team leader in order to have them implemented prior to expiration of certification.

Any responses to the nonconformities which were raised may be either in hard copy or electronically using the NCR herein (preferred) and forwarded to the Bureau Veritas Certification office.

Expected Response Content (b)

Client response to NCR should be reviewed by the lead auditor in three parts; root cause analysis, correction and corrective actions.

In reviewing the three parts, the auditor looks for a plan and then evidence that plan is being implemented.

Root Cause Analysis

1. The Root Cause is not simply repeating the finding, neither is the direct cause of the issue.
2. Well thought out analysis to determine the true root cause: e.g. someone did not follow a process would be direct cause; determining why someone did not follow a process would lead to the true root cause.
3. The root cause statement must focus on a single issue without any obvious why questions remaining.
4. If a why question can reasonably be asked about the root cause analysis, this indicates that the analysis did not go far enough.
5. Ensure that the root cause answers the question, "What in the system failed such that the problem occurred?"
6. Blaming the employee will not be accepted as the only root cause.
7. Address problems with the process as well as what detection system failed.

Correction

1. The extent of the nonconformity has been determined (NCR has been corrected & the client has examined the system to see if there are other examples that need to be corrected). Ensure that correction answers the question "Is this isolated case or not?" in other words "Is there a risk that this can reoccur at the other site / department?"
2. If correction cannot be immediate; a plan to correct the NCR may be appropriate (responsible & date).
3. Evidence that the correction was implemented or evidence that the plan is being implemented.

Corrective Action

1. The corrective action or corrective action plan addresses the root cause(s) determined in the root cause analysis. If you have not defined true root cause you cannot prevent the problem from its reoccurrence.
2. In order to accept the plan it shall include:
 - actions to address the root cause(s)
 - identification of responsible parties for the actions and
 - a schedule (dates) for implementation.
 - always include a "change" to your system. Training and/or publishing a newsletter are generally not changes to your system.
3. In order to accept the evidence of implementation:
 - a. Enough evidence is provided to show the plan is being implemented as outlined in the response (and on schedule).
 - b. Note: Evidence in full is not required to close the NCR; some evidence may be reviewed during future audit when verifying the corrective actions.



AUDIT PLANNING

Audit Objectives

1. To confirm that the management system conforms with all the requirements of the audit standard(s);
2. To confirm that the organization has effectively implemented its planned arrangements;
3. To confirm that the management system is capable of achieving the organization's policies and objectives and evaluation of the ability of the management system to ensure the client organization meets applicable statutory, regulatory and contractual requirements;
4. If applicable to identify areas for potential improvement of the management system.
5. The purpose of the audit is to evaluate the implementation, including effectiveness, of the client's management system. It shall include at least the following:
 - a) information and evidence about conformity to all requirements of the applicable management system standard or other normative document;
 - b) performance monitoring, measuring, reporting and reviewing against key performance objectives and targets (consistent with the expectations in the applicable management system standard or other normative document);
 - c) the client's management system and performance regarding compliance;
 - d) operational control of the client's processes;
 - e) internal auditing and management review;
 - f) management responsibility for the client's policies;
 - g) Links between the normative requirements, policy, performance objectives (consistent with the expectations in the applicable management system standard or other normative document), any applicable compliance requirements, responsibilities, competence of personnel, operations, procedures, performance data and internal audit findings and conclusions.

General & Legal Compliance Requirements

Based on review of the compliance program, the organization has determined no open existing non-compliances {Legal compliance issues}.

Team Leader:	Ashok MAMMEN - ASM
Team members:	

Site Name	American Chrome & Chemicals N.A. Inc. [HO]		
Date	Process - Activity	Standard Clauses	Auditor
		9K	
07/07/25	1st Audit Day		
09:00 AM	Opening meeting		ASM
09:30 AM	Site Tour		ASM
11:00 AM	Quality Management	4.1, 4.2, 4.3, 4.4, 5.1, 5.1.1, 5.1.2, 5.2, 5.2.1, 5.2.2, 5.3, 6.1, 6.2, 6.3, 7.1, 7.1.1, 7.1.2, 7.1.3, 7.1.4, 7.1.5, 7.1.6, 7.2, 7.3, 7.4, 7.5, 7.5.1, 7.5.2, 7.5.3, 7.5.3.1.1, 7.5.3.1.2, 7.5.3.2.1, 7.5.3.2.2, 7.5.3.2.3, 7.5.3.2.4, 7.5.3.2.5, 7.5.3.2.6, 7.5.3.2.7, 8.1, 8.2, 8.2.1, 8.2.2, 8.2.3, 8.2.3.1, 8.2.3.2, 8.2.4, 8.4, 8.4.1, 8.4.2, 8.4.3, 8.5, 8.5.1, 8.5.2, 8.5.3, 8.5.4, 8.5.5, 8.5.6, 8.6, 8.7, 9.1, 9.1.1, 9.1.2, 9.1.3, 9.2, 9.2.2, 9.3, 9.3.1, 9.3.2, 9.3.3, 10.1, 10.2, 10.3, Use of marks, and/or reference to the certification	ASM
12:00 PM	Break		ASM
01:00 PM	Quality Management	4.1, 4.2, 4.3, 4.4, 5.1, 5.1.1, 5.1.2, 5.2, 5.2.1, 5.2.2, 5.3, 6.1, 6.2, 6.3, 7.1, 7.1.1, 7.1.2, 7.1.3, 7.1.4, 7.1.6, 7.2, 7.3, 7.4, 7.5, 7.5.1, 7.5.2, 7.5.3, 7.5.3.1.1, 7.5.3.1.2, 7.5.3.2.1, 7.5.3.2.2, 7.5.3.2.3, 7.5.3.2.4, 7.5.3.2.5, 7.5.3.2.6, 7.5.3.2.7, 8.1, 8.6, 8.7, 9.1, 9.1.1, 9.1.2, 9.1.3, 9.2, 9.2.2, 9.3, 9.3.1, 9.3.2, 9.3.3, 10.1, 10.2, 10.3	ASM
03:30 PM	Preparation for feedback meeting		ASM
04:30 PM	Feedback meeting		ASM
05:00 PM	End of 1st Audit Day		

Site Name	American Chrome & Chemicals N.A. Inc. [HO]		
Date	Process - Activity	Standard Clauses	Auditor
		9K	
07/08/25	2nd Audit Day		
09:00 AM	Quality Management	4.1, 4.2, 4.3, 4.4, 5.1, 5.1.1, 5.1.2, 5.2, 5.2.1, 5.2.2, 5.3, 6.1, 6.2, 6.3, 7.1, 7.1.1, 7.1.2, 7.1.3, 7.1.4, 7.1.6, 7.2, 7.3, 7.4, 7.5, 7.5.1, 7.5.2, 7.5.3, 7.5.3.1.1, 7.5.3.1.2, 7.5.3.2.1, 7.5.3.2.2, 7.5.3.2.3, 7.5.3.2.4, 7.5.3.2.5, 7.5.3.2.6, 7.5.3.2.7, 8.1, 8.6, 8.7, 9.1, 9.1.1, 9.1.2, 9.1.3, 9.2, 9.2.2, 9.3, 9.3.1, 9.3.2, 9.3.3, 10.1, 10.2, 10.3	ASM
12:00 PM	Break		ASM
01:00 PM	Contract Management	7.1, 8.1, 8.2, 8.2.2, 8.6	ASM



Site Name			
American Chrome & Chemicals N.A. Inc. [HO]			
Date	Process - Activity	Standard Clauses	Auditor
		9K	
03:30 PM	Preparation for feedback meeting		ASM
04:30 PM	Feedback meeting		ASM
05:00 PM	End of 2nd Audit Day		

Site Name			
American Chrome & Chemicals N.A. Inc. [HO]			
Date	Process - Activity	Standard Clauses	Auditor
		9K	
07/09/25	3rd Audit Day		
09:00 AM	Purchasing and Receiving	8.4, 8.7, 10.2	ASM
12:00 PM	Break		ASM
01:00 PM	Order Fulfillment and Manufacturing	7.1, 8.1, 8.2, 8.2.2, 8.6, 8.7, 10.2	ASM
03:30 PM	Preparation for feedback meeting		ASM
04:30 PM	Feedback meeting		ASM
05:00 PM	End of 3rd Audit Day		

Site Name			
American Chrome & Chemicals N.A. Inc. [HO]			
Date	Process - Activity	Standard Clauses	Auditor
		9K	
07/10/25	4th Audit Day		
09:00 AM	Order Fulfillment and Manufacturing	7.1, 8.1, 8.6, 8.7, 10.2	ASM
12:00 PM	Break		ASM
01:00 PM	Order Fulfillment and Manufacturing	7.1, 8.1, 8.2, 8.2.2, 8.6, 8.7, 10.2	ASM
02:30 PM	Quality Management	4.1, 4.2, 4.3, 4.4, 5.1, 5.1.1, 5.1.2, 5.2, 5.2.1, 5.2.2, 5.3, 6.1, 6.2, 6.3, 7.1, 7.1.1, 7.1.2, 7.1.3, 7.1.4, 7.1.6, 7.2, 7.3, 7.4, 7.5, 7.5.1, 7.5.2, 7.5.3, 7.5.3.1.1, 7.5.3.1.2, 7.5.3.2.1, 7.5.3.2.2, 7.5.3.2.3, 7.5.3.2.4, 7.5.3.2.5, 7.5.3.2.6, 7.5.3.2.7, 8.1, 8.2, 8.2.2, 8.6, 8.7, 9.1, 9.1.1, 9.1.2, 9.1.3, 9.2, 9.2.2, 9.3, 9.3.1, 9.3.2, 9.3.3, 10.1, 10.2, 10.3	ASM
03:30 PM	Preparation for feedback meeting		ASM
04:30 PM	Feedback meeting		ASM
05:00 PM	End of 4th Audit Day		

Site Name			
American Chrome & Chemicals N.A. Inc. [HO]			
Date	Process - Activity	Standard Clauses	Auditor
		9K	
07/11/25	5th Audit Day		
09:00 AM	Quality Management	4.1, 4.2, 4.3, 4.4, 5.1, 5.1.1, 5.1.2, 5.2, 5.2.1, 5.2.2, 5.3, 6.1, 6.2, 6.3, 7.1, 7.1.1, 7.1.2, 7.1.3, 7.1.4, 7.1.6, 7.2, 7.3, 7.4, 7.5, 7.5.1, 7.5.2, 7.5.3, 7.5.3.1.1, 7.5.3.1.2, 7.5.3.2.1, 7.5.3.2.2, 7.5.3.2.3, 7.5.3.2.4, 7.5.3.2.5, 7.5.3.2.6, 7.5.3.2.7, 8.1, 8.6, 8.7, 9.1, 9.1.1, 9.1.2, 9.1.3, 9.2, 9.2.2, 9.3, 9.3.1, 9.3.2, 9.3.3, 10.1, 10.2, 10.3	ASM
10:00 AM	Preparation for closing meeting		ASM
12:00 PM	Closing meeting		ASM
01:00 PM	End of 5th Audit Day		



Site Name	American Chrome & Chemicals N.A. Inc. [HO]	
Date	Process - Activity	Auditor
07/12/25	6th Audit Day	
09:00 AM	Reporting	ASM
05:00 PM	End of 6th Audit Day	

Audit Plan Preparation Date:	06/23/2025
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Meetings

Opening Meeting (Attendees)		
Designation	Name	Role
Audit Team	Ashok MAMMEN	Team Leader
Client Contact	Brandan Peck	Engineer
Client Contact	Davis Lyerley	Warehouse Manager
Client Contact	Derek R	Engineer
Client Contact	Joel Bing	Quality & Lab Manager, Management Representative
Client Contact	Kyle Emerley	Safety
Client Contact	Lukus L	Engineer
Client Contact	Mike Martin	Site Scheduler
Client Contact	Mike Mathews	Instrumentation Electrical manager
Client Contact	Shannon Brice	Purchase Manager
Client Contact	Stan Hansley	Plant Manager
Client Contact	Tim Tippett	Supply Chain Manager
Client Contact	Wayne J	Ops Manager
Closing Meeting (Attendees)		
Designation	Name	Role
Audit Team	Ashok MAMMEN	Team Leader
Client Contact	Brandan Peck	Engineer
Client Contact	Cheryl M	HR Manager
Client Contact	Davis Lyerley	Warehouse Manager
Client Contact	Derek R	Engineer
Client Contact	Derrick Blanks	Dry end Coordinator
Client Contact	Donna C	Purchasing
Client Contact	Joel Bing	Quality & Lab Manager, Management Representative
Client Contact	Mike Mathews	Instrumentation Electrical manager
Client Contact	Rick M	Contr. Engineer
Client Contact	Rob Garris	Maintenance Manager
Client Contact	Stan Hansley	Plant Manager
Client Contact	Wayne J	Ops Manager



AUDIT PROGRAMME

Process	Surveillances		
	1	2	Recert
Site	American Chrome & Chemicals N.A. Inc.		
Quality Management	x	x	x
Purchasing and Receiving		x	x
Order Fulfillment and Manufacturing	x	x	x
Contract Management	x		x

Sites	Audits			
	Initial	Main	Surv1	Surv2
American Chrome & Chemicals N.A. Inc.	1	5.5	2	2
Audit days	1	5.5	2	2

Created / Modified by: Ashok MAMMEN

Date: 07/12/2025

Any significant issues impacting on the audit programme:
Nil



SF03 AUDIT SUMMARY REPORT PER STANDARD ISO 9001:2015

AUDIT SUMMARY REPORT FOR ISO 9001:2015		Process / Activity / Department			NCR Total
		Quality Management	Purchasing and Receiving	Contract Management	
CLAUSES	DESCRIPTION				
4.1	Understanding the organization and its context	X			
4.2	Understanding the needs and expectations of interested parties	X			
4.3	Determining the scope of the QMS	X			
4.4	Quality management system and its processes	X			
5.1	Leadership and commitment	X			
5.1.1	Leadership and commitment - General	X			
5.1.2	Customer focus	X			
5.2	Quality policy	X			
5.2.1	Establishing the quality policy	X			
5.2.2	Communicating the quality policy	X			
5.3	Organizational roles, responsibilities and authorities	X			
6.1	Actions to address risks and opportunities	X			
6.2	Quality objectives and planning to achieve them	X			
6.3	Planning of changes	X			
7.1	Resources	X	X	X	
7.1.1	Resources - General	X			
7.1.2	People	X			
7.1.3	Infrastructure	X			
7.1.4	Environment for the operation of processes	X			
7.1.5	Monitoring and measuring resources	X	X	X	
7.1.6	Organizational knowledge	X			
7.2	Competence	X			
7.3	Awareness	X			
7.4	Communication	X			
7.5	Documented information	X			
7.5.1	Documented information - General	X			
7.5.2	Creating and updating	X			
7.5.3	Control of documented information	X			
7.5.3.1.1	The Organization shall ensure availability and suitability of documentation required by the QMS and by the ISO9001 standard.	X			
7.5.3.1.2	The Organization shall control the sufficient and appropriate protection of documented information and will identify risks for its safety and integrity	X			
7.5.3.2.1	Distribution, access and retrieval activities necessary for the control of documented information shall be determined and maintained	X			



7.5.3.2.2	Activities for storage and preservation, including activities to ensure that documented information remains legible necessary for the control of documented information shall be determined and maintained.	X			
7.5.3.2.3	Activities for the control of changes of documented information shall be determined and maintained.	X			
7.5.3.2.4	The Different levels of access permissions to and the authority to modify the documented information will be defined and controlled.	X			
7.5.3.2.5	Activities for retention and disposition necessary for the control of documented information shall be determined and maintained.	X			
7.5.3.2.6	Documented information of external origin needed for the planning and operation of the QMS will be identified, controlled and appropriately distributed.	X			
7.5.3.2.7	Documented information retained as evidence of conformity shall be protected from unintended alterations.	X			
8.1	Operational planning and control	X	X		
8.2	Requirements for products and services	X	X		
8.2.1	Customer communication	X	X		
8.2.2	Determining the requirements related to products and services	X	X		
8.2.3	Review of requirements related to products and services	X	X		
8.2.3.1	The organization shall ensure that it has the ability to meet the requirements for products and services to be offered to customers.	X	X		
8.2.3.2	The organization shall retain documented information, as applicable, on the results of the review and on any new requirements.	X	X		
8.2.4	Changes to requirements related to products and services	X	X		
8.4	Control of external provided products and services	X	X	X	
8.4.1	Control of external provided products and services - General	X	X	X	
8.4.2	Type and extent of control	X	X	X	
8.4.3	Information for external providers	X	X	X	
8.5	Production and service provision	X	X	X	
8.5.1	Control of production and service provision	X	X		
8.5.2	Identification and traceability	X	X	X	
8.5.3	Property belonging to customers or external providers	X	X		
8.5.4	Preservation	X	X	X	
8.5.5	Post-delivery activities	X	X		
8.5.6	Control of changes	X	X		
8.6	Release of products and services	X	X		
8.7	Control of nonconforming outputs	X	X	X	
9.1	Monitoring, measurement, analysis and evaluation	X			
9.1.1	Performance evaluation - General	X			
9.1.2	Customer satisfaction	X			
9.1.3	Analysis and evaluation	X			
9.2	Internal audit	X			
9.2.2	Internal audit programme	X			
9.3	Management Review	X			
9.3.1	Management review - General	X			
9.3.2	Management review inputs	X			
9.3.3	Management review outputs	X			
10.1	Improvement - General	X			
10.2	Nonconformity and corrective action	X	X	X	
10.3	Continual improvement	X			
Use	of marks, and/or reference to the certification	X			



Total					0
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Not Applicable	Justification For Not Applicable
8.3 Design and development of products and services	Products manufactured according to customer requirements
8.3.1 Design and development - General	
8.3.2 Design and development planning	
8.3.3 Design and development inputs	
8.3.4 Design and development controls	
8.3.5 Design and development outputs	
8.3.6 Design and development changes	



CERTIFICATE INFORMATION

ISO 9001:2015 - UKAS - English

Head Office	American Chrome & Chemicals N.A. Inc.
Address	5408 Holly Shelter Rd , Castle Hayne, 28429, NC, USA
Global Scope	Manufacture and supply of Chromium and Chromate Conversion Products to the metal finishing, surface treatment and catalyst manufacturing industries