

INTERNAL AUDIT REPORT · ISO 9001 · SEPTEMBER 2026

Quality Management System

Internal audit for initial certification readiness

Sundaram Precision Castings Pvt Ltd

Coimbatore, Tamil Nadu, India · 142 employees · 1 site

OVERALL ASSESSMENT

Needs improvement

No major non-conformity; 88.9% conforming. Ready for the certification audit once the 2 minor non-conformities are closed.

88.9 % Conformance across 27 applicable checkpoints	2 Non-conformities 0 major · 2 minor	1 Observations	100 % Conforming checkpoints with documented evidence
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Audit period	28 – 29 September 2026 · on-site
Report issued	30 September 2026 · version 1
Report ID	SPC-IA-2026-07
Lead auditor	Arjun Mehta, Northline Assurance
Submitted to	Lakshmi Narayanan, Quality Manager

STATEMENT OF CONFIDENTIALITY

This report is provided in confidence to Sundaram Precision Castings Pvt Ltd. It records an internal audit conducted on a sample basis and is not a certificate of conformity. It must not be disclosed in whole or in part to any third party without Sundaram Precision Castings Pvt Ltd's prior written consent.

Northline Assurance	QMS INTERNAL AUDIT REPORT Sundaram Precision Castings Pvt Ltd Initial certification readiness · Prepared by Northline Assurance	STANDARD	ISO 9001
		REPORT ID	SPC-IA-2026-07
		VERSION	v1 · Final
		ISSUED	30 Sept 2026

DOCUMENT CONTROL

SAMPLE REPORT: INVENTED COMPANY AND DATA

DOCUMENT CONTROL

Report title	QMS Internal Audit Report — Initial certification readiness
Report ID · version	SPC-IA-2026-07 · v1 · Final
Classification	Sample report: invented company and data — for the addressee and Sundaram Precision Castings Pvt Ltd's management only
Audit criteria	ISO 9001:2015, the Quality Manual v3, customer specifications and applicable statutory requirements.
Issued	30 September 2026

AUDIT TEAM & DISTRIBUTION

ROLE	NAME	ORGANISATION	DESIGNATION
Lead auditor	Arjun Mehta	Northline Assurance	Lead Auditor
Auditor	Neha Varghese	Northline Assurance	Auditor
Submitted to	Lakshmi Narayanan	Sundaram Precision Castings Pvt Ltd	Quality Manager
Copy	R. Sundaram	Sundaram Precision Castings Pvt Ltd	Managing Director

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PART A · EXECUTIVE SUMMARY

SAMPLE REPORT: INVENTED COMPANY AND DATA

PART A

Executive summary

The verdict, the numbers behind it, and the findings that need a decision — on one page.

A.1 OVERALL ASSESSMENT

Needs improvement

The quality management system fulfils the requirements of ISO 9001:2015 within the stated scope, subject to closing the two minor non-conformities.

KEY MESSAGES

- 1

The quality management system is well established: 24 of 27 applicable checkpoints conform, each backed by accepted evidence.
- 2

Two minor non-conformities, on risk planning and calibration, must be closed before the Stage 1 audit.
- 3

Production records and heat-number traceability are a clear strength.

88.9 % Conformance 24 of 27 applicable checkpoints	2 Non-conformities 0 major (high) · 2 minor (medium)	1 Observations low priority · opportunities for improvement	100 % Evidence coverage 24 of 24 conforming items documented
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A.2 SUMMARY OF FINDINGS

ID	CLAUSE	FINDING	PRIORITY	OWNER	DUE
IA-01	6.1	Risk register does not cover the new induction furnace line	MEDIUM	Quality Manager	15 Oct 2026
IA-02	7.1.5	Two vernier callipers used at final inspection are overdue for calibration	MEDIUM	Quality Manager	10 Oct 2026
IA-03	9.2	Internal audit programme does not cover the night shift	LOW	—	—

Satisfactory No major NC · ≥95% conforming · nothing open. Ready for the certification audit.	Needs improvement No major NC · ≥85% conforming. Ready once minor actions are closed.	Major action required Any major NC, or <85% conforming. Not ready until the major finding is closed and verified.
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PART B

Audit engagement

What was audited, against what, how, by whom, where and when — as ISO 19011 §6.5 requires the record to state.

B.1 OBJECTIVES, SCOPE, CRITERIA AND METHOD

Objectives	Confirm that the quality management system conforms to ISO 9001:2015 and is effectively implemented before the Stage 1 certification audit.
Scope	Manufacture of ferrous and non-ferrous precision castings and machined components to customer drawings, at the Coimbatore plant.
Exclusions	8.3 (Are products designed and developed in a contro...) — Castings are made only to customer drawings; the company does no design work. Justifications reviewed and accepted (Appendix B).
Criteria	ISO 9001:2015, the Quality Manual v3, customer specifications and applicable statutory requirements.
Method	Interviews, observation on the shop floor, and review of records sampled from April to September 2026.
Limitations	The night shift was not observed. Sampling covered two of the six product families.

B.2 TEAM, PARTICIPANTS, DATES AND LOCATIONS

DATE	LOCATION	AREAS AUDITED	AUDITEE PARTICIPANTS	AUDITOR
28 Sept 2026	Coimbatore plant	Opening meeting; context, leadership and planning (4 to 6); support (7)	Managing Director, Quality Manager, HR Lead	A. Mehta
29 Sept 2026	Coimbatore plant	Operation (8) on the shop floor; performance evaluation and improvement (9, 10); closing meeting	Production Manager, Stores In-charge, Quality Manager	A. Mehta

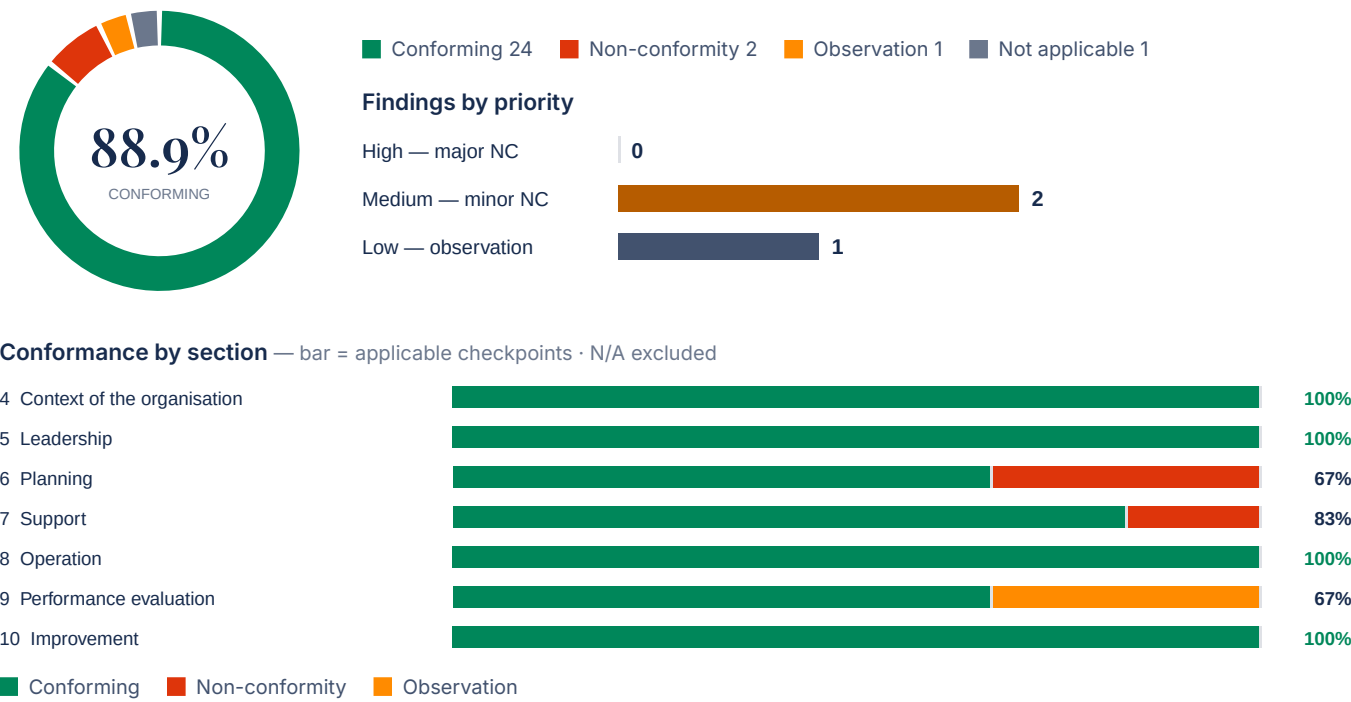
Audit mode: on-site · Sites: Foundry, machine shop and stores, Coimbatore · Total effort: 2 auditor-days · Audit team: Arjun Mehta, Neha Varghese.

PART C

Results overview

Conformance at a glance, then section by section. Every figure here derives from the clause-level results in Part E.

C.1 CONFORMANCE DASHBOARD



C.2 SECTION CONFORMANCE MATRIX

SEC.	SECTION TITLE	TOTAL	N/A	CONF.	MAJOR NC	MINOR NC	OBS.	CONF. %	RATING
4	Context of the organisation	4	—	4	—	—	—	100%	Conforming
5	Leadership	3	—	3	—	—	—	100%	Conforming
6	Planning	3	—	2	—	1	—	67%	NC present
7	Support	6	—	5	—	1	—	83%	NC present
8	Operation	7	1	6	—	—	—	100%	Conforming
9	Performance evaluation	3	—	2	—	—	1	67%	Observations
10	Improvement	2	—	2	—	—	—	100%	Conforming
All sections		28	1	24	0	2	1	88.9%	Needs improvement

Total = checkpoints in the section · Conf. = conforming · Rating: green = 100% conforming · amber = observations only · red = any non-conformity · blue = open items.

PART D

Findings

Each non-conformity is stated in five parts — criteria, condition, cause, consequence, corrective action — with the management response, owner and target date.

D.1 FINDINGS REGISTER

ID	CLAUSE	FINDING	CATEGORY	PRIORITY	OWNER	DUE	STATUS
IA-01	6.1	Risk register does not cover the new induction furnace line	NC	MEDIUM	Quality Manager	15 Oct 2026	Open
IA-02	7.1.5	Two vernier callipers used at final inspection are overdue for calibration	NC	MEDIUM	Quality Manager	10 Oct 2026	Open
IA-03	9.2	Internal audit programme does not cover the night shift	OBS	LOW	—	—	Open

D.2 NON-CONFORMITIES IN DETAIL

IA-01	Risk register does not cover the new induction furnace line 6.1 · Planning	NC · MINOR	MEDIUM
CRITERIA	ISO 9001:2015 clause 6.1.1: risks and opportunities shall be determined for the processes of the system.		
CONDITION	The induction furnace line commissioned in July 2026 has no entries in the Risk and Opportunity Register v2. Risk and Opportunity Register v2.pdf · uploaded 12 Sept 2026		
CAUSE	The register is not reviewed when new equipment or processes are introduced.		
CONSEQUENCE	Risks from the new line, such as melt temperature drift, are not planned for.		
CORRECTIVE ACTION	Add the furnace line risks with owners, and make a register review a step in the change control procedure.		
MANAGEMENT RESPONSE		OWNER	TARGET DATE
Accepted. The register will be updated by 15 October.		Quality Manager	15 Oct 2026

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PART D · FINDINGS

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IA-02 Two vernier callipers used at final inspection are overdue for calibration		NC · MINOR		MEDIUM
71.5 · Support				
CRITERIA	ISO 9001:2015 clause 7.1.5.2: measuring equipment shall be calibrated or verified at specified intervals.			
CONDITION	Callipers VC-07 and VC-11 were last calibrated in June 2025 against a 12-month interval, and both were in use on 29 September. Calibration Records 2026.pdf · uploaded 12 Sept 2026			
CAUSE	Calibration due dates are tracked by hand in a spreadsheet with no reminder.			
CONSEQUENCE	Products may be released on measurements from equipment of unknown accuracy.			
CORRECTIVE ACTION	Calibrate both callipers, assess the product released since June, and move due dates into a register with reminders.			
MANAGEMENT RESPONSE		OWNER	TARGET DATE	
Accepted. Both callipers were withdrawn on 29 September.		Quality Manager	10 Oct 2026	

D.3 OBSERVATIONS AND OPPORTUNITIES FOR IMPROVEMENT

ID	CLAUSE	OBSERVATION	OPPORTUNITY FOR IMPROVEMENT	OWNER
IA-03	9.2	All internal audits in 2026 were carried out on the day shift, while about a third of production runs at night.	Schedule at least one internal audit a year on the night shift.	—

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PART E

Audit summary by clause

Every checkpoint: the requirement, the auditee's position, the evidence examined by document name and upload date, the auditor's note, and the status. Grouped by section with subtotals.

#	CLAUSE	REQUIREMENT	AUDITEE POSITION	EVIDENCE EXAMINED & AUDITOR NOTE	STATUS
4 · Context of the organisation					4 checkpoints · 4 conforming
1	4.1	Are the external and internal issues relevant to the business determined and reviewed?	Yes	Evidence examined and accepted. Context and Interested Parties Register v3.pdf · 12 Sept 2026	CONFORMING
2	4.2	Are interested parties and their relevant requirements identified and monitored?	Yes	Evidence examined and accepted. Context and Interested Parties Register v3.pdf · 12 Sept 2026	CONFORMING
3	4.3	Is the scope of the quality management system documented, with any exclusion justified?	Yes	Evidence examined and accepted. Quality Manual v3.pdf · 12 Sept 2026	CONFORMING
4	4.4	Are the processes of the system, their sequence and interaction defined?	Yes	Evidence examined and accepted. Quality Manual v3.pdf · 12 Sept 2026 Process Interaction Map.pdf · 12 Sept 2026	CONFORMING
Section 4 subtotal					4 of 4 applicable conforming · 100% Conforming
5 · Leadership					3 checkpoints · 3 conforming
5	5.1	Does top management show leadership and commitment to the quality system?	Yes	Evidence examined and accepted. Management Review Minutes, March 2026.pdf · 12 Sept 2026	CONFORMING
6	5.2	Is a quality policy established, communicated and available?	Yes	Evidence examined and accepted. Quality Policy v2.pdf · 12 Sept 2026	CONFORMING
7	5.3	Are roles, responsibilities and authorities assigned and communicated?	Yes	Evidence examined and accepted. Organisation Chart and Responsibilities.pdf · 12 Sept 2026	CONFORMING
Section 5 subtotal					3 of 3 applicable conforming · 100% Conforming
6 · Planning					3 checkpoints · 2 conforming · 1 NC
8	6.1	Are risks and opportunities identified, with actions planned to address them?	Yes	→ IA-01 Risk and Opportunity Register v2.pdf · 12 Sept 2026	NON-CONF.
9	6.2	Are measurable quality objectives set at relevant functions, with plans to achieve them?	Yes	Evidence examined and accepted. Quality Objectives 2026-27.pdf · 12 Sept 2026	CONFORMING
10	6.3	Are changes to the quality system planned and carried out in a controlled way?	Yes	Evidence examined and accepted. Change Control Procedure.pdf · 12 Sept 2026	CONFORMING
Section 6 subtotal					2 of 3 applicable conforming · 67% NC present
7 · Support					6 checkpoints · 5 conforming · 1 NC

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PART E · AUDIT SUMMARY BY CLAUSE

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#	CLAUSE	REQUIREMENT	AUDITEE POSITION	EVIDENCE EXAMINED & AUDITOR NOTE	STATUS
11	7.1.3	Is the infrastructure needed for the processes maintained?	Yes	Evidence examined and accepted. Preventive Maintenance Plan 2026.pdf · 12 Sept 2026	CONFORMING
12	7.1.5	Are monitoring and measuring resources calibrated or verified at specified intervals?	Yes	→ IA-02 Calibration Records 2026.pdf · 12 Sept 2026	NON-CONF.
13	7.2	Is competence determined, and is evidence of training retained?	Yes	Evidence examined and accepted. Skill Matrix and Training Records.pdf · 12 Sept 2026	CONFORMING
14	7.3	Are people aware of the policy, the objectives and their contribution?	Yes	Evidence examined and accepted. Induction Record Sample.pdf · 12 Sept 2026	CONFORMING
15	7.4	Are internal and external communications determined?	Yes	Evidence examined and accepted. Communication Matrix.pdf · 12 Sept 2026	CONFORMING
16	7.5	Is documented information created, controlled and retained as required?	Yes	Evidence examined and accepted. Master List of Documents.pdf · 12 Sept 2026	CONFORMING
Section 7 subtotal		5 of 6 applicable conforming · 83%			■ NC present
8 · Operation		7 checkpoints · 6 conforming · 1 N/A			
17	8.1	Are operational processes planned and controlled?	Yes	Evidence examined and accepted. Control Plans: Pump Housing PH-220.pdf · 12 Sept 2026	CONFORMING
18	8.2	Are customer requirements reviewed before an order is accepted?	Yes	Evidence examined and accepted. Contract Review Records.pdf · 12 Sept 2026	CONFORMING
19	8.3	Are products designed and developed in a controlled process?	N/A	Not applicable — justification accepted (Appendix B).	N/A
20	8.4	Are external providers evaluated, selected and monitored against criteria?	Yes	Evidence examined and accepted. Approved Supplier List 2026.pdf · 12 Sept 2026	CONFORMING
21	8.5	Is production carried out under controlled conditions, with identification and traceability?	Yes	Evidence examined and accepted. Heat Number Traceability Log.pdf · 12 Sept 2026	CONFORMING
22	8.6	Are products released only after planned verification?	Yes	Evidence examined and accepted. Final Inspection Reports.pdf · 12 Sept 2026	CONFORMING
23	8.7	Are nonconforming outputs identified and controlled?	Yes	Evidence examined and accepted. Nonconforming Product Register.pdf · 12 Sept 2026	CONFORMING
Section 8 subtotal		6 of 6 applicable conforming · 100%			■ Conforming
9 · Performance evaluation		3 checkpoints · 2 conforming · 1 OBS			
24	9.1	Are customer satisfaction and process performance monitored and analysed?	Yes	Evidence examined and accepted. Customer Satisfaction Survey 2026.pdf · 12 Sept 2026	CONFORMING

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PART E · AUDIT SUMMARY BY CLAUSE

SAMPLE REPORT: INVENTED COMPANY AND DATA

#	CLAUSE	REQUIREMENT	AUDITEE POSITION	EVIDENCE EXAMINED & AUDITOR NOTE	STATUS
25	9.2	Is an internal audit programme planned and carried out at planned intervals?	Yes	→ IA-03 Internal Audit Programme 2026.pdf · 12 Sept 2026	OBSERVATION
26	9.3	Does top management review the system at planned intervals?	Yes	Evidence examined and accepted. Management Review Minutes, March 2026.pdf · 12 Sept 2026	CONFORMING
Section 9 subtotal			2 of 3 applicable conforming · 67% ■ Observations		
10 · Improvement			2 checkpoints · 2 conforming		
27	10.2	Are nonconformities corrected, causes analysed and actions checked for effectiveness?	Yes	Evidence examined and accepted. Corrective Action Log.pdf · 12 Sept 2026	CONFORMING
28	10.3	Is the system continually improved?	Yes	Evidence examined and accepted. Improvement Projects Register.pdf · 12 Sept 2026	CONFORMING
Section 10 subtotal			2 of 2 applicable conforming · 100% ■ Conforming		

PART F

Conclusion

The auditor’s statement on the degree to which the criteria are fulfilled, what is working, what to do next, and who signs.

F.1 DEGREE OF FULFILMENT OF THE AUDIT CRITERIA

AUDITOR’S STATEMENT

The quality management system fulfils the requirements of ISO 9001:2015 within the stated scope, subject to closing the two minor non-conformities.

STRENGTHS

4	Context of the organisation — every applicable checkpoint evidenced and accepted.
5	Leadership — every applicable checkpoint evidenced and accepted.
8	Operation — every applicable checkpoint evidenced and accepted.
10	Improvement — every applicable checkpoint evidenced and accepted.
—	Heat-number traceability from melt to dispatch, checked on five sampled orders without a gap.

WAY FORWARD

Next audit	Stage 1 certification audit · 11/2026
Close first	IA-01 · IA-02
Verification	Follow-up review of corrective actions by Northline Assurance, 20 October 2026
Review	Findings to be tabled at the next management review

F.2 RECOMMENDATIONS

O1	Close both minor non-conformities and keep the evidence ready for the certification body.	closes IA-01, IA-02
O2	Add a night-shift audit to the 2027 internal audit programme.	closes IA-03

ISSUED BY · NORTHLINE ASSURANCE

Lead auditor

Arjun Mehta

Date

30 September 2026

RECEIVED FOR · SUNDARAM PRECISION CASTINGS PVT LTD

Name

Lakshmi Narayanan, Quality Manager

Date

APP.

Appendices

Reference material: the evidence register, not-applicable justifications, and the definitions used throughout.

A EVIDENCE REGISTER

#	DOCUMENT	TYPE	UPLOADED	CLAUSES EVIDENCED	REVIEW
1	Approved Supplier List 2026.pdf	PDF	12 Sept 2026	8.4	ACCEPTED
2	Calibration Records 2026.pdf	PDF	12 Sept 2026	7.1.5	REVISION REQUIRED
3	Change Control Procedure.pdf	PDF	12 Sept 2026	6.3	ACCEPTED
4	Communication Matrix.pdf	PDF	12 Sept 2026	7.4	ACCEPTED
5	Context and Interested Parties Register v3.pdf	PDF	12 Sept 2026	4.1 · 4.2	ACCEPTED
6	Contract Review Records.pdf	PDF	12 Sept 2026	8.2	ACCEPTED
7	Control Plans: Pump Housing PH-220.pdf	PDF	12 Sept 2026	8.1	ACCEPTED
8	Corrective Action Log.pdf	PDF	12 Sept 2026	10.2	ACCEPTED
9	Customer Satisfaction Survey 2026.pdf	PDF	12 Sept 2026	9.1	ACCEPTED
10	Final Inspection Reports.pdf	PDF	12 Sept 2026	8.6	ACCEPTED
11	Heat Number Traceability Log.pdf	PDF	12 Sept 2026	8.5	ACCEPTED
12	Improvement Projects Register.pdf	PDF	12 Sept 2026	10.3	ACCEPTED
13	Induction Record Sample.pdf	PDF	12 Sept 2026	7.3	ACCEPTED
14	Internal Audit Programme 2026.pdf	PDF	12 Sept 2026	9.2	REVISION REQUIRED
15	Management Review Minutes, March 2026.pdf	PDF	12 Sept 2026	5.1 · 9.3	ACCEPTED
16	Master List of Documents.pdf	PDF	12 Sept 2026	7.5	ACCEPTED
17	Nonconforming Product Register.pdf	PDF	12 Sept 2026	8.7	ACCEPTED
18	Organisation Chart and Responsibilities.pdf	PDF	12 Sept 2026	5.3	ACCEPTED
19	Preventive Maintenance Plan 2026.pdf	PDF	12 Sept 2026	7.1.3	ACCEPTED
20	Process Interaction Map.pdf	PDF	12 Sept 2026	4.4	ACCEPTED
21	Quality Manual v3.pdf	PDF	12 Sept 2026	4.3 · 4.4	ACCEPTED

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#	DOCUMENT	TYPE	UPLOADED	CLAUSES EVIDENCED	REVIEW
22	Quality Objectives 2026-27.pdf	PDF	12 Sept 2026	6.2	ACCEPTED
23	Quality Policy v2.pdf	PDF	12 Sept 2026	5.2	ACCEPTED
24	Risk and Opportunity Register v2.pdf	PDF	12 Sept 2026	6.1	REVISION REQUIRED
25	Skill Matrix and Training Records.pdf	PDF	12 Sept 2026	7.2	ACCEPTED
25 documents examined · 22 accepted · 0 rejected					

B NOT-APPLICABLE JUSTIFICATIONS

CLAUSE	REQUIREMENT	AUDITEE JUSTIFICATION	DECISION
8.3	Are products designed and developed in a controlled process?	Castings are made only to customer drawings; the company does no design work.	ACCEPTED

C DEFINITIONS USED IN THIS REPORT

TERM	MEANING IN THIS REPORT
NON-CONFORMITY · MAJOR	A requirement is absent or has failed in a way that would prevent the management system achieving its intended outcome; a certification body would defer certification until closed.
NON-CONFORMITY · MINOR	A single lapse or evidence gap against a requirement that is otherwise implemented; closable by corrective action without redesign.
OBSERVATION	A situation that is not a non-conformity today but may become one, or where an opportunity for improvement was identified.
CONFORMING	The requirement is implemented and the evidence examined supports it.
N/A	The requirement does not apply to the scope; the justification was reviewed and accepted by the auditor.
HIGH MEDIUM LOW	Priority for action: High = major NC, act before the certification audit; Medium = minor NC, close within the quarter; Low = observation, address in the normal improvement cycle.