ISO 50001:2018

F19EN18
Issue 01
Rev 05

Name of the	CHHATNA CHANDIDAS MAHAVIDYA	ALAYA
Organization Address	P.O CHHTNA, DIST: BANKURA, PIN-7	22 132
Site Address (If any)		
No. of Employees	Teaching = 20, Non-teaching = 0, House-keepi Electrician=0, $Total = 26$	ng =5, Security =1,
No. Of Shift	1	
E mail id	ccmvoffice@gmail.com	
Contact Person		
	Dr. Malavika Sinha	
Telephone/Fax	70011383928	
Scope	"Teaching, Learning and Evaluation	n processes relating to
	awarding of B.A, as well as gener	ral learning considering
	Environment friendly and Energy	efficiency manner in
	College Green Campus".	
Technical Area	Teaching, Learning and Evaluation, Capacity Building, Skill Enhancement, Institutional Social Responsibility	
Audit Team	Lead Auditor: Amalesh Kr. Mandal Auditor: Technical Expert	Audit duration Man day(s): Technical Expert
Starting date of Audit	21.06.2023	
End Date of Audit	21.06.2023	
Brief about the organization	Chhatna Chandidas Mahavidyalaya started journey on 02/08/2007.Chhatna Chandidas Mahavidyalaya is located in Chhatna Block, Bankura District, West Bengal. It is located 15 KM towards west from District headquarters Bankura. A common belief that the Chhatna is the birthplace of Poet Chandidas (14th Century). College is well connected to the roadway and railway. Nearest railway station is the Chhatna Rail station (SE railway) and college lies in the side of the Bankura Purulia Road. College located in a remote area of Bankura district, catering to the academic needs of the	

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	socially backward communities, since the major areas population belongs to them with limited educational facilities. This college believes in holistic education rather th syllabus-oriented-study and students are provi opportunity to join NSS Training and study tou Teachers, Teaching Supporting Staffs, Students, Alumni along with The Principal convey thanks t visiting the website.	access to an simply ded with r etc.The Parents,
Audit Objective	To evaluate the client's documented system, location & site- conditions and gather other details through discussions with personnel to determine the organization's readiness for the S Audit for Certification	the client's

#### CHANGE DETAIL

Audit Duration for Stag	e 1
Are quoted man-days adequate?	Yes
Any change in employee detail?	None
Any Change in Scope?	None
Any additional Information:	None

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### **ATTENDENCE SHEET:**

NAME OF PERSON	DESIGNATION
Amalesh Kr. Mandal.	Lead Auditor
Malauska Sinha	Principal
P. Kumbhakaz	IQAC Coordinator
Kilavjan Chalů	Member , Clean and Green Initiative Committee
Dipanjoy Muhhiyer	Member , Clean and Green Initiative Committee
Dolankay	Member , Clean and Green Initiative Committee
Manas Sutta	Convener, Clean and Green Initiative Committee

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#### SUMMARY OF AUDIT

	AREA OF IMPROVEMET		
(Are	(Areas of Improvement Which May be Identified as Non Conformities During Stage 2 Audit)		
1	Communication/Display of policy		
2	Communication/Display of Objectives		

Non Conformities Raised

0 Minor/Major Non conformance identified in the Stage 1 audit, details of Non Conformance in F50.

Please respond by using your own corrective action form and include the root cause analysis with systemic corrective action. Failure to include root cause analysis with systemic corrective action will result in your responses being rejected by Lead Auditor

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Tea	Team Leader Declaration (Tick or cross Each Column as per applicability)		
	Auditing is based on a sampling process of the available information		
	Audit is combined, joint or integrated;		
	The effectiveness of corrective actions taken regarding previously identified		
	nonconformities has verified		
	outcomes are effective and complying.		
	The internal audit and management review process are effective and complying with the		
	requirements.		
	The scope of certification is appropriate.		
	The capability of the management system to meet applicable requirements and expected		
	The audit objectives has been fulfilled and achieved.		
RECOMMENDATION			
	Recommended Proceeding With Stage 2 (within 60 days from this audit date)		

$\gamma$	Recommended Proceeding with Stage 2 (within 60 days from this audit date)	
×	Recommend not proceeding to stage 2 until audit evidence has been submitted to AQC	
	showing that the concerns raised by the auditor (s) have been rectified. A date for stage 2	
	will then be agreed.	
×	Recommend not proceeding without a further stage 1 Audit due to the severity of the	
	concerns raised by the audit team	

Sign Off : Date 21.06.2023	
AQC Report Submission	Client Acceptance for Report
Name of Auditor: Amalesh Kr. Mandal	Name: Malavika Sinha
Analish Kr. Mandul. Signature: Authorization: Empanelled Auditor from IAF accredited Certification Body, Energy Auditor from National Productivity Council, IRCA Accredited Lead Auditor on ISO 50001:2018	Sign Principal Chhatna Chandidas Mahavidyalaya Designation: Principal Chhatna, Bankura

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### AUDIT CHECKLIST

REQUIREMENTS	COMMENTS	Status C/NC/ O
Is the Information documented as required as per the ISO 50001:2018?	Manual and other documented information available. (Doc. Ref. No. ENMS/L1, dtd. 02.04.2022) and other documented information available.	С
Has the discussion been held with personnel of the Client company for readiness for stage-2?	Yes. Within next month the Stage-2 needs to be completed, discussed and finalized as per discussion with the Principal and IQAC coordinator.	С
Has the Client site specific conditions been evaluated?	Established, implemented and the Scope has been set as per Site specific. (Under clause 4.3 of ENMS/L1 Manual). They are maintaining their Green monitoring report year to year wise to evaluate the environment performance.	С
Has the company identified energy performance indicators, Energy baseline, Energy objectives, energy targets and energy management action plans?	RespectiveEnergyprojectfoundtakenbyAuthority.Like"EfficientuseofEnergyResources"***Energysource and power consumption captured inGreen monitoring report.Data available.	С
Is the client having understanding with the ISO 50001:2018 Standard requirement and other requirement site specific?	<ul> <li>Yes. Awareness training has been conducted by an external consultant.</li> <li>1. Training on Standard given by External body "Management System Consultancy"</li> <li>2. Any other training reference maintained.</li> </ul>	С
Is the scope having boundaries and specific to client organization?	Scope defined in Manual and found as per course delivery.	С
If a client has Multisite then level of control is established.	Not applicable	С

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Is organization analyze energy used and consumption based on measurement and other data: (Identify current energy sources/evaluate past and present	Measurement done on Bill monitoring, list of energy sources are available, significant energy sources identified and included in Green monitoring report for review.	С
energy use and consumption? Based on the analysis of energy used and consumption, is the organization identifying the areas of significant energy use.(identify the facilities, equipment, systems, processes and personnel working for, or on behalf of, the organization that significantly affect energy use and consumption?	List of energy sources are available, significant energy sources identified. Energy program found. Last one year bill value/power consumption details found available.	С
Has the organisation identified EnPIs (energy performance indicators) appropriate for monitoring and measuring your energy performance?	Energy baseline declared as last year consumption. EnPI is set in the form of Energy Projects. *Energy efficiency utilization project taken *Secondary power utilization project taken in planning *Campaign/display project taken to aware other stakeholders	С
Has the organisation identified, implemented and have access to the applicable legal requirements and other requirements to which organization subscribes related to energy use, consumption and efficiency?	CHHATNACHANDIDASMAHAVIDYALAYAAFFILATEDTOBANKURA UNIVRSITY.	С
Are the resources adequate for stage 2 audit?	Yes, documented information found established as per standard requirement and organization requirements. So proposed for stage-2 audit. The implementation and monitoring system will be checked in stage-2 audit.	С
Is Internal Audit planned and performed and effective?	Yes, Internal Audit Report w.r.t Year to year Green monitoring checks found conducted and maintained properly against all possible parameters.	С
Is MRM planned and performed and Effective?	Yes, their committee meeting outcome was maintained. All agenda points discussed and records maintained.	С

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Name of the Organization	CHHATNA CHANDIDAS MAHAVIDYALAYA			
Address	P.O CHHTNA, DIST: BANKURA, PIN-722 132			
Site Address (If any)				
No. of Employees	Teaching = 20, Non-teaching = 0, House-keeping =5, Security =1, Electrician=0, <b>Total = 26</b>			
No. of Shift	1			
E mail id	ccmvoffice@gmail.com ccmahavidyalaya@gmail.com			
Contact Person	Dr. Malavika Sinha			
Telephone/Fax	70011383928			
Scope	"Teaching, Learning and Evaluation processes relating to awarding of B.A, as well as general learning			
	considering Environment friendly and Energy efficiency manner in College Green Campus".			
Technical Area	Teaching, Learning and Evaluation, Capacity Building, Skill Enhancement, Institutional Social Responsibility.			
Audit Team	Lead Auditor: Amalesh KumarNo of Mandays:Mandal1Auditor:1Technical Expert1			
Starting date of Audit	12.07.2023			
End date of Audit	12.07.2023			
Brief about the organization	Chhatna Chandidas Mahavidyalaya started journey on 02/08/2007.Chhatna Chandidas Mahavidyalaya is located in Chhatna Block, Bankura District, West Bengal. It is located 15 KM towards west from District headquarters Bankura. A common belief that the Chhatna is the birthplace of Poet Chandidas (14th Century). College is well connected to the roadway and railway. Nearest railway station is the Chhatna Rail station (SE railway) and college lies in the side of the Bankura Purulia Road. College located in a remote area of Bankura district, catering to the academic needs of the socially backward communities, since the majority of the areas population belongs to them with limited access to educational facilities.			

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	This college believes in holistic education rather than simply syllabus-oriented-study and students are provided with opportunity to join NSS Training and study tour etc.The Teachers, Teaching Supporting Staffs, Students, Parents, Alumni along with The Principal convey thanks to you for visiting the website.
Purpose of Audit	To verify the implementation of the Energy Management System as per the ISO 50001:2018 Standards Requirement, verification of records for the conformity of the implementation.

### **CHANGE DETAIL:**

Audit Duration for Stage 2		
Are quoted man-days adequate?	Yes	
Any change in employee detail?	None	
Any Change in Scope?	None	
Any additional Information:	None	

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#### **ATTENDENCE SHEET:**

NAME OF PERSON	DESIGNATION
Amalesh Kr. mandal.	Lead Auditor
Malauska Sinha	Principal
P. Kumbhakaz	IQAC Coordinator
Kilavjan Uhalii	Member , Clean and Green Initiative Committee
Dipanjoy Muhhiyer	Member , Clean and Green Initiative Committee
Dolan Ray	Member , Clean and Green Initiative Committee
Manas Sulta	Convener, Clean and Green Initiative Committee

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### **SUMMARY OF AUDIT**

AREA OF IMPROVEMENTS		
No such significant area identified as critical w.r.t energy consumption		
-		

#### Non Conformities Raised

0 Minor/Major Non-conformance identified in the Stage 2 audit, details of Non Conformance in F50

Please respond by using your own corrective action form and include the root cause analysis with systemic corrective action. Failure to include root cause analysis with systemic corrective action will result in your responses being rejected by Lead Auditor

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Tea	Team Leader Declaration (Tick or cross Each Column as per applicability)			
	Auditing is based on a sampling process of the available information			
	Audit is combined, joint or integrated;			
	The effectiveness of corrective actions taken regarding previously identified			
	nonconformities has verified			
	outcomes are effective and complying.			
	The internal audit and management review process are effective and complying with the			
	requirements.			
	The scope of certification is appropriate.			
	The capability of the management system to meet applicable requirements and expected			
	The audit objectives has been fulfilled and achieved.			

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### **Recommendation:**

V	The quality system complies with the requirements of the reference standard: Congratulations, on the basis of the above summary, Lead Auditor is pleased to put forward a recommendation for Issuance of Certificate. The organization can use the AOC Mark		
×	<b>exception of minor NC:</b> Congratulations, Team Leader is pleased to put forward a recommendation for Issuance of the certificate of Organization upon off-site verification of closure of all minor NC within 60 days from the date of Stage 2 audit. Responses to the non-conformances should be submitted to AQC and must include supporting evidence of closure to allow for off-site verification. In responding to the non-conformances, the organization should consider the root cause of the non-conformance and the potential for related issues in other parts of system.		
×	If all non-conformances are not closed within 60 days, a full reassessment may be required.         ×       Evidence of major non conformities: Organization is not recommended for Issuance of Certificate and at this time. Follow-up audit will be scheduled to allow for on-site verification and closure of all issues within 60 days from the date of Stage 2.         Once all non-conformances are closed, the recommendation for Issuance of certification may recommended.         If all non-conformances are not closed within 60 days, a full reassessment may be required.		
×			
Sign O			
-	Off: (Date) 12.07.2023Report Submission	Client Acceptance for Report	
	of Team Leader: Amalesh Kr. Mandal	Name:	
Amalesh Kr. Mandal. Signature:		Sign Malauika Sinha Principal	
IAF ac Audito	rization: Empanelled Auditor from ccredited Certification Body, Energy or from National Productivity Council, Accredited Lead Auditor on ISO 2018	Chhatna Chandidas Mahavidyalaya Chhatna, Bankura Designation:	

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#### **AUDIT CHECKLIST**

### VERIFICATION OF DOCUMENTED INFORMATION & RECORDS AS PER STD REQUIREMENT

(C- Conformity, NC-Non-Conformity, O-Observation)

Clause Number	C/NC/ O	Document Verification detail with statement of Conformity	
4 Context of the organization			
4.1 Understanding the organization and its context	С	Identified and included in Manual. (Under clause 4.1 of Doc. Ref. No. ENMS/L1, dtd. 02.04.2022)	
(External and Internal Issues)		*To capture those issues Staff and student feedback process was initiated and documented for review.	
4.2 Understanding the needs and expectations of interested parties	C	Identified and included in Manual. (Under clause 4.2 of Doc. Ref. No. ENMS/L1, dtd. 02.04.2022)	
(Need & Expectation of Interested parties)		*To capture those issues Staff and student feedback process was initiated and documented for review.	
4.3 Determining the scope of the energy management system	С	Scope established and included in Manual. (Under clause 4.3 of ENMS/L1 Manual)	
		Scope defined in Manual and found as per course delivery. Verified against their affiliation.	
4.4 Energy management system	С	Process Flow/Process description found established as guided by accreditation norms.	
		Reference: Affiliation/accreditation copies found available.	
5 Leadership	I		

5.1 Leadership and commitment (Ensure Top Management Commitment)	С	Interviewed with Top Management (Here Principal), found committed to communication of respective Energy Policies, Projects and implementation of Energy specific Projects. Reference specific projects against communication, through display.
5.2 Energy policy (Documented, communicated, availability and Review)	С	Energy Policy established and displayed on the notice board, signed by the Principal. Advise them to display for other stakeholders as well as on the Website.
<ul><li>5.3 Organization roles, responsibilities and authorities</li><li>(Assigned and communicated by Top Management)</li></ul>	С	Defined in Manual and available in the College office. Ref. Organogram maintained.
6 Planning	I	
6.1 Actions to address risks and opportunities	С	Risk Register found maintained (Doc. Ref. No. EnMS/POT/E-RISK/01), initially found 3 nos Energy risk identified.
<ul><li>6.2 Objectives, energy targets and planning to achieve them</li><li>(Consistent with Energy Policy, SEU, documented, measurable, communicated and updated)</li></ul>	С	Energy Objectives found established and planned to achieve action (MAP), Projects taken Like "Efficient use of Energy Resources" and monitoring methodology found set to achieve the goal.

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6.3 Energy review	С	Energy review has been done base	ed on Meter reading
(Current type of energy use, past and current consumption, documented and updated)		study and kept as documented info Current list of Energy sources fou Significant energy sources in their report for review.	nd available including
		You may put your current list of e	energy source here <b>Number</b>
			number
		Normal Tubelight	50
		LED Tubelight	30
		Normal Bulb	0
		LED Bulb	20
		Ceiling Fan	12
		Wall fan	00
6.4 Energy performance indicators	C	Documented in the form of Energ	v projects
(Documented and updated)	C		
		List of projects:	
		<ol> <li>Energy Efficiency</li> <li>Secondary power</li> </ol>	
6.5 Energy baseline (Documented and review periodically and retention)	С	Energy baseline declared as last y consumption, accordingly project reduce the Power.	

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С	Electrical Energy bill statements kept available for further review. Last one year bill details in Power consumption/value wise, found maintained.
С	Resource requirements discussed in committee meetings. Outcome of meeting available.
	Ref: Meeting details found maintained.
С	<ul> <li>Training planning and related training records found available. Awareness training conducted by External consultant.</li> <li>1. Training on Standard given by External body "Management System Consultancy"</li> <li>2. Other Training reference found maintained.</li> </ul>
С	Done through training and display.
	<ol> <li>Training on Standard given by External body "Management System Consultancy"</li> </ol>
С	Done through display, mail, meeting minutes.
	Reference: Campaign details found maintained theme wise.
	C C

<ul><li>7.5 Documented information</li><li>(Creation, Updating, Control, Retention, External Origin, Storage &amp; Preservation)</li></ul>	С	Control of documented information procedure established. Control of documented information procedure established. 1. Reference: Syllabus/Course details found maintained.
8 Operation		
8.1 Operational planning and control (Documneted, Plan, Implement, Control the process related to SEU and communication)	С	Operational procedures established supported with work instructions and related records. Project review checked
<ul><li>8.2 Design</li><li>(Documented, Specification, design consideration)</li></ul>	С	Design part not included
8.3 Procurement (Establish & Implement criteria for evaluating energy performance)	С	Effectively implemented, tendering system applicable in procurement. Comparative statement found available against any purchase.
9 Performance evaluation		
9.1.1 General (Monitoring, measurement, analysis and evaluation of energy performance and the EnMS)	С	<ul> <li>Criteria set against each Project mapping, to monitor the performance and effectiveness of the Energy performance.</li> <li>Current Status:</li> <li>1. Project mapping Vs. monitoring</li> </ul>
9.1.2 Evaluation of compliance with legal requirements and other requirements	С	CHHATNA CHANDIDAS MAHAVIDYALAYAAFFILATED TO BANKURA UNIVRSITY.

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<ul><li>9.2 Internal audit</li><li>(Frequency and Effectiveness)</li></ul>	С	Yes, Internal Audit Report w.r.t Year to year Green monitoring checks found conducted and maintained properly against all possible parameters.
9.3 Management review (Frequency and input/output)	С	Yes, their committee meeting outcome was maintained. All agenda points discussed and records maintained.
10 Improvement		
10.1 Nonconformity and corrective action	С	Procedure established and monitored through project planning.
10.2 Continual improvement	C	Objective and monitoring data found available.

### **END OF REPORT**