

<b>AQCGLOBALLC</b>	F19EN18
ISO 50001:2018	Issue 01
<b>Stage 1 Energy Audit Report</b>	Rev05

Name of the Organization	<b>Chakdaha College</b>	
Address	<b>Rabindra Nagar, Chakdaha, Nadia, West Bengal, PIN - 741222</b>	
Site Address (If any)	<a href="https://chakdahacollege.ac.in/">https://chakdahacollege.ac.in/</a>	
Email id	<a href="mailto:chakdahacollege1972@gmail.com">chakdahacollege1972@gmail.com</a>	
Contact Person	<b>Dr. Swagata Das Mohanta</b>	
Telephone/Fax	8967300985	
Scope	Teaching, Learning and Evaluation processes relating to awarding of Under Graduate in Arts, Science & Commerce 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: Rathin Kumar Biswas Auditor: Technical Expert	Audit duration Manday(s): Technical Expert
Starting date of Audit	06.08.2022	
End Date of Audit	06.08.2022	
Brief about the organization	<p><b>About College</b></p> <p>The November of 2021 marked the Golden Jubilee of Chakdaha College. With fifty years trailing behind it, the college today stands resolute and sturdy. Bearing the torch of education, it continues to work for the social and moral upliftment of its students. In its moment of inception in 1972, the college was born humbly and out of meagre means, conducting classes in a borrowed space and with a strength of only 76 students enrolled in merely 2 courses. The college has come a long way since then. Today it offers two sections via morning and day and a total of 17 courses which include 14 Honours and 3 General subjects. It is home to an overwhelming strength of nearly 8000 students. With 51% of the total strength being female, the college bears the marker of social progress in suburban Bengal. Further, the collection of nearly 28,000 books that the college library retains adds to its progressive spirit and motif.</p>	

## Stage 1 Energy Audit Report

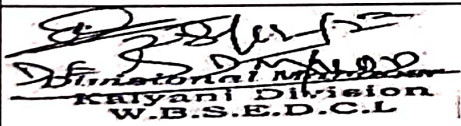
	<b>Name of the College</b>	<b>Chakdaha College</b>
	<b>Principal</b>	<b>Dr. Swagata Das Mohanta</b>
	<b>Establishment</b>	<b>21.11.1972</b>
	<b>Affiliated to</b>	<b>University of Kalyani</b>
	<b>NAAC Accreditation</b>	<b>B+ with CGPA 2.55 (2nd Cycle)</b>
	<b>UGC Recognition</b>	<b>2(f) and 12(B)</b>
	<b>AISHE Code</b>	<b>C-7057</b>
	<b>Financial Category</b>	<b>Grant-in-Aid</b>
	<b>Type of College</b>	<b>Co-Education</b>
	<b>Campus Area</b>	<b>Main Campus: 2.53 Acre; New Campus: 0.18 Acre Built-up area: 1.453 Acre</b>
	<b>No. of UG Programmes</b>	<b>15 Major courses</b>
	<b>Departments</b>	<b>Arts: 09; Commerce 01; Science 07</b>
	<b>Intake Capacity</b>	<b>3804</b>
	<b>Laboratory</b>	<b>Physics: 02 Chemistry: 03 Zoology: 03 Botany: 02 Mathematics: 01 Computer Science: 01 Geography: 01</b>
	<b>Hostel</b>	<b>Boys' Hostel for 14 SC/ST students Girls' Hostel: One under construction with UGC grant Construction for another one will be started with RUSA 2.0 Grant</b>
	<b>No. of Teaching Staff &amp; Librarian</b>	<b>Principal: 1; FTT: 33, SACT: 66. Librarian: 02, Contractual Librarian: 01</b>
	<b>No. of Office Staff</b>	<b>31</b>
	<b>Communicating Address</b>	<b>Rabindranagar, P.O. &amp; P.S. Chakdaha Dist. Nadia, Pin-741222, W.B.</b>

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<b>Stage 1 Energy Audit Report</b>		
	E-mail & Phone	chakdahacollege1972@gmail.com 8967300985
Audit Objective	To evaluate the client's documented system, location & site-specific conditions and gather other details through discussions with the client's personnel to determine the organization's readiness for the Stage 2 Audit for Certification	

**CHANGEDDETAIL**

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

**ATTENDANCE SHEET:**

NAME OF PERSON	DESIGNATION
 Divisional Engineer KRIYANI Division W.B.S.E.D.C.L	Lead Auditor
DR. MINTU DEBNATH	PHYSICS
DR. SAHANOUS MALLICK	MATHEMATICS
DR. IFTIKAR ALAM	GEOGRAPHY
DR. NIKHIL KUMAR MANDAL	ECONOMICS

**SUMMARY OF AUDIT**

AREA OF IMPROVEMENT	
(Areas of Improvement Which May be Identified as Non Conformities During Stage2 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.

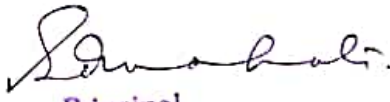
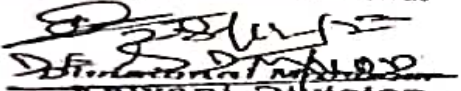
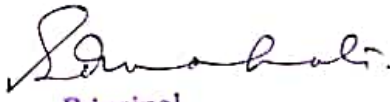
*Please respond by using your own corrective action form and include the root cause analysis with systemic corrective action. Failure to include root cause analysis with systemic corrective action will result in your responses being rejected by Lead Auditor*

<b>Team Leader Declaration (Tick or cross Each Column as per applicability)</b>	
√	Auditing is based on as ampling process of the available information
√	Auditis combined, joint or integrated;

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√	The effectiveness of corrective actions taken regarding previously identified
√	Non conformities 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 have been fulfilled and achieved.
<b>RECOMMENDATION</b>	
√	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

Signoff: Date 25.11.2022

AQC Report Submission		Client Acceptance for Report	
Name of Auditor: Rathin Kumar Biswas		Name: Dr. Swagata DasMohanta	
Signature: Rathin Kumar Biswas		Signature: 	
 Kalyani Division W.B.S.E.D.C.L		Designation:  Principal CHAKDAHA COLLEGE	

**AUDIT CHECKLIST**

REQUIREMENTS	COMMENTS	Status C/NC/O
Is the Information is documented as required as per the ISO50001:2018?	Manual and other documented information available. (Doc. Ref. No. ENMS/L1, dtd. 12.09.2022)	C
Has the discussion held with personnel of the Client company for Readiness for stage 2?	Yes	C
Have the Client site-specific conditions are evaluated?	Established, implemented and the Scope has set as per Site specific. (Under clause 4.3 of ENMS/L1 Manual)	C
Has the company identified energy performance indicator, Energy Baseline, Energy objectives, energy targets and energy management	Respective Energy project found taken by Authority. Like "Efficient use of Energy Resources"	C

action plans?		
Has the client having understanding with the ISO 50001:2018 Standard requirement?	Yes. Awareness training has conducted by external consultant.	C
Is the scope is having boundaries and specific to the client organization?	Yes scope found suitable as per client specific.	C
Is client having Multisite then the level of control is established.	Not applicable	C
Is organization analyse energy used and consumption based on measurement and other data: (Identify current energy sources/evaluate past and present Energy use and consumption?	Measurement done on Billmonitoring, list of energy sources are available, significant energy sources identified.	C
Based on the analysis of energy used and consumption, Is organization identify 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 established.	C
Has organization identified EnPIs (energy performance indicators) appropriate for monitoring and Measuring your energy performance?	Energy base line declared as last year consumption. EnPI set in the form of Energy Projects.	C
Has organisation identified, implemented and have access to the applicable legal requirements and other requirements to which organisation subscribes related to energy use, consumption and efficiency?	No such mandatory protocol applied on them. They has identified their own improvements parameters.	C
Is there source are adequate for stage 2 audit?	Yes	C
Is Internal Audit planned and performed and effective?	Last Internal scheduled on 20.05.2022	C
Is MRM planned and performed and Effective?	Last MRM held on 31.05.2022	C

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ISO 50001:2018

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**END OF REPORT**

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<b>ISO50001:2018</b>	Issue 01
<b>Stage2 Energy Audit Report</b>	Rev05

Name of the Organization	<b>Chakdaha College</b>	
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Technical Area	Teaching, Learning and Evaluation, Capacity Building, Skill Enhancement, Institutional Social Responsibility.	
Audit Team	Lead Auditor: Rathin Kumar Biswas Auditor: Technical Expert	No of Mandays: 1
Starting date of Audit	03.09.2022	
End date of Audit	03.09.2022	
Brief about the organization	<p style="text-align: center;"><b>About College</b></p> <p>The November of 2021 marked the Golden Jubilee of Chakdaha College. With fifty years trailing behind it, the college today stands resolute and sturdy. Bearing the torch of education, it continues to work for the social and moral upliftment of its students. In its moment of inception in 1972, the college was born humbly and out of meagre means, conducting classes in a borrowed space and with a strength of only 76 students enrolled in merely 2 courses. The college has come a long way since then. Today it offers two sections via morning and day and a total of 17 courses which include 14 Honours and 3 General subjects. It is home to an overwhelming strength of nearly 8000 students. With 51% of the total strength being female, the college bears the marker of social progress in suburban Bengal. Further, the collection of nearly 28,000 books that the college library retains adds to its progressive spirit and motif.</p>	




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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

**ATTENDANCE SHEET:**

NAME OF PERSON	DESIGNATION
 Kalyani Division W.B.S.E.D.C.L	Lead Auditor
DR. MINTU DEBNATH	PHYSICS
DR. SAHANOUS MALLICK	MATHEMATICS
DR. IFTIKAR ALAM	GEOGRAPHY
DR. NIKHIL KUMAR MANDAL	ECONOMICS

**SUMMARY OF AUDIT**

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


**Non Conformities Raised**

0 Minor/Major Non-conformance identified in the Stage2 audit, details of Non Conformance in F50

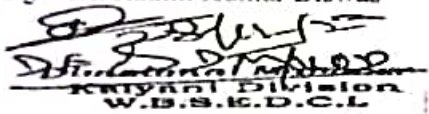

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√	The effectiveness of corrective actions taken regarding previously identified
√	Non conformities has verified
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√	The scope of certification is appropriate.
√	The capability of the management system meet applicable requirements and expected
√	The audit objectives has been fulfilled and achieved.

**Recommendation:**

√	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 AQC Mark
x	The quality system complies with the requirements of the reference standard with exception of minor NC: 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. I fall non-conformances are not closed within 60 days, a full reassessment may be required.
x	<b>Evidence of major non conformities:</b> 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 be recommended. I fall non-conformances are not closed within 60 days, a full reassessment may be required.
x	<b>Not Recommended:</b> Organization is not recommended for Issuance of certificate at this time. Full Stage 2 audit is required as the organization has not implemented the system and process at pace.

Sign Off: (Date) 25.11.2022

<p>AQC Report Submission</p> <p>Name of Team Leader: Rathin Kumar Biswas Signature: Rathin Kumar Biswas</p>  <p style="font-size: x-small; text-align: center;">KRIYATI Division W.B.S.K.D.C.L</p>	<p>Client Acceptance for Report</p> <p>Name: Dr. Swagata DasMohanta Signature:  Designation: <b>Principal</b> <b>CHAKDAHA COLLEGE.</b></p>
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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 a statement of Conformity
<b>4 Context of the organization</b>		
4.1 Understanding the organization and its context (External and Internal Issues)	C	Identified and included in Manual. (Under clause 4.1 of Doc. Ref. No. ENMS/L1, dtd. 12.09.2022)

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4.2 Understanding the needs and expectations of interested parties (Need & Expectation of Interested parties)	C	Identified and included in Manual. (Under clause 4.2 of Doc. Ref. No. ENMS/L1, dtd. 12.09.2022)
4.3 Determining the scope of the energy management system	C	Scope established and included in Manual. (Under Clause 4.3 of ENMS/L1 Manual)
4.4 Energy management system	C	Process Flow found established and as per UGC norms.
<b>5 Leadership</b>		
5.1 Leadership and commitment (Ensure Top Management Commitment)	C	Interviewed with Top Management, found committed to communication of respective Energy Policies, Projects and implementation of Energy specific Projects.
5.2 Energy policy (Documented, communicated, availability and Review)	C	Energy Policy established and displayed in notice board. Advise them to display for others stake holders as well as in Website.
5.3 Organization roles, responsibilities and authorities (Assigned and communicated by Top Management)	C	Defined in Manual and found as per Government protocol.
<b>6 Planning</b>		
6.1 Actions to address risks and opportunities	C	Risk Register found maintain (Doc. Ref. No. EnMS/POT/E-RISK/01), initially found 3 nos Energy Risk identified.
6.2 Objectives, energy targets and planning to achieve them (Consistent with Energy Policy, SEU, documented, measurable, communicated and updated)	C	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.
6.3 Energy review (Current type of energy use, past and current consumption, documented and updated)	C	Energy review has done based on Meter reading study and kept as documented information. Current list of Energy sources found available including Significant energy sources.
6.4 Energy performance indicators (Documented and updated)	C	Documented in the form of Energy projects.
6.5 Energy base line (Documented and review periodically and retention)	C	Energy baseline declared as last year Power consumption, accordingly projects taken to review and reduce the Power.
6.6 Planning for collection of energy data (Accuracy and repeatable, documented and retention)	C	Electrical Energy bill statements are kept available for further review.
<b>7 Support</b>		
7.1 Resources (Determination of resource required)	C	Found available
7.2 Competence (determine, documented and retain the competence)	C	Training planning and related training records found available. Awareness training conducted by External consultant.

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7.3 Awareness ( Objective, Policy, Non Conformance of EnMS)	C	Done through training and display
7.4 Communication (What, When, With Whom, How & Who)	C	Done in the form of minutes and display.
7.5 Documented information(Creation, Updating, Control, Retention, External Origin, Storage & Preservation)	C	Control of documented in formation procedure established.
<b>8 Operation</b>		
8.1 Operational planning and control (Documneted, Plan, Implement, Control the process related to SEU and communication)	C	Operational procedures established supported with work instructions and related records.
8.2 Design (Documented, Specification, design consideration)	C	Design part not included
8.3 Procurement (Establish & Implement criteria for evaluating energy performance)	C	Effectively implemented, tendering system applicable in procurement.
<b>9 Performanceevaluation</b>		
9.1.1 General (Monitoring, measurement, analysis and evaluation of energy performance and the EnMS)	C	Criteria set against each Project mapping, to monitor the performance and effectiveness of the Energy performance. Current Status: 1. Project mapping Vs. monitoring
9.1.2 Evaluation of compliance with legal requirements and other requirements	C	Compliance register found available
9.2 Internal audit (Frequency and Effectiveness)	C	Yearly frequency and Internal Audit plan/ records found available, Last Internal scheduled from 02.03.2022 to 03.03.2022.
9.3 Management review (Frequency and input/output)	C	MRM agenda and minutes found available. Last MRM Held on 10.03.2022.
<b>10 Improvement</b>		
10.1 Non conformity and corrective action	C	Procedure established and monitored through project planning.
10.2 Continual improvement	C	Objective and monitoring data found available.

**ENDOFREPORT**