System Assurance Protocol

General Regulations Part 1, Verification Process

Table of Contents

Applicability of the System Assurance Protocol

1. Process for organisations to apply for and maintain certification (for applicants and verified organisations to follow).
2. Requirements for Certification Bodies to apply for and maintain accreditation (for CBs to follow).
3. Audit and Verification Protocol (for CBs to follow in planning, conducting, and completing assessments)
4. Accreditation Protocol (for trustea to follow).
5. CB Agreement for Accreditation.

1. Introduction

trustea, the sustainable tea program is an initiative of the Indian tea industry to develop and implement a sustainability code for the Indian market. This initiative to transform the Indian tea industry is based on industry realities and globally accepted core sustainability principles. This meaningful, cost-effective and practical code is rooted in the realities of the Indian tea industry as well as its domestic market.

It is envisioned that compliance with trustea Code will not only improve competitiveness for tea farms but also make it possible for them to demonstrate compliance with national regulations and international sustainability standards. Verification under the code provides consumers with the assurance of responsible production and provides producers the opportunity to credibly demonstrate this to their customers.

The trustea Code has been developed by the industry and stakeholders for the industry and its supply chain.

Effective code implementation will provide sustainable tea to a rapidly growing community of discerning Indian tea consumers.

2. The purpose of the document:

This audit protocol specifies requirements for certification bodies, auditors, internal auditors, internal documentation system (IDS), managers and other interested parties related to procedures for trustea audit. Observance of these requirements is intended to ensure that certification bodies operate trustea verification in a competent, consistent and impartial manner, thereby facilitating the recognition of such bodies and the acceptance of their certificates.

The purposes of the trustea audit protocol are as follows:

- Explain the structure and process of verification according to the trustea Code
- Provide guidance to the producers and factories as well as tea packers on the procedures to be followed.
- Lay down the rules of auditing for achieving and maintaining the verified status
- Elaborate on the audit process and different audit cycles pertaining to trustea
- Describe the general rules of farm and group verification procedures
- Lay down the conditions that necessitate withdrawal of the verified status
- Lay down procedures for segregating trustea-verified tea from the non-verified tea
- Describe procedures for approving certification bodies (CBs), the required qualifications of their lead auditors, auditors, and the reporting obligations for CBs.
- Lay down the process by which a farm or a group could add or remove members within the verified facility
  The trustea Secretariat and the trustea Council have the overall authority for issuing and amendment of the content and requirements stated in this document.

Abbreviations

Full Name	Abbreviation
Bought Leaf Factory	BLF
Certification Body	CB
Code Development Committee	CDC
Control Points	CP
Estate Factory	EF
External Verification Audit	EVA
Farm Support Centers	FSC
Internal Audit	IA
Trustea Code Management System	TCMS
Mandatory Control Points	MCP
Monthly operation Meeting	MoM
Minimum Wage	MW
Other Control Points	OCP
Pollution Control Board	PCB
Provident Fund	PF
System Assurance Audit	SAA
Self Help Groups	SHGs
Small Tea Growers	STGs
Trustea Council	TC
Internal Documentation System	IDS
Verification Certificate	VC
Verified Organisation	VO

Zero tolerance Control Points	ZTCP
Pre-Qualification Criteria	PQC
Plantation Labour Act	PLA

VERIFICATION SCHEME FOR TRUSTEA:

GENERAL REGULATIONS, PART 1, VERIFICATION PROCESS

3   General

3.1   Purpose

To ensure an objective assessment and where justified verification of adherence to trustea requirements at the tea estates, Bought Leaf Factories (BLF) and small tea growers, and to promote uniformity in the operation of the verification scheme and the interaction between the certification bodies (CBs) and the clients (tea producers, tea factories and small tea growers) seeking verification.

3.2   Scope

A.   Organisations opting for a trustea Verification Certificate can be single estates, multiple estates of a single owner, BLFs and their associated producer base, multi-site operators with multiple estates, a mix of estates and BLFs, tea processors and their associated producer base.

B.   trustea verification covers all land managed or used by the Verified Organisation in conjunction with tea production, whether owned, rented, or leased. This explicitly includes, but is not limited to:

   a.   Tea gardens

   b.   Fallow lands within property limits

   c.   Infrastructure within the property limits, including but not limited to housing, roads, offices, warehouses and store rooms

   d.   Owned or leased infrastructure outside the property but closely connected to the activities covered in the scope, e.g. collection centers.

   e.   Processing or packaging plants covered under trustea audits

   f.   All workers working on the farm, regardless of their category (permanent, temporary, as well as the bona fide dependents who live inside the farm.

4.   Registration and Acceptance of Organisations

   a.   Applied organizations must meet the following criteria:

   I.   They must be a legal entity - In case of sole proprietorship or trade license of the owner. For partnership firms PAN/TAN card of the partnership firm is required. For registered companies, MCA Registration is required.

   II.   They must run a single internal documentation system (IDS) for all producers, estates, BLFs (including their associated producer base) that will be included in the scope of the trustea Verification Certificate.

   b.   Registration with the trustea Scheme

Organisations may apply to register with the trustea Secretariat through its website, by using the registration tab which leads to the membership form in tCMS portal. The form will have all relevant material for registering with the trustea Secretariat. The applicants will also get a list of Certification Bodies (CBs) accredited with trustea Secretariat. Applicants need to submit a complete registration form to the trustea Secretariat (via the above address), containing all required information. The Registration form can also be accessed at http://www.trusteacms.in

Once trustea Secretariat accepts the application, the applicant will receive a unique user credential in the registered email ID, which will be used as an identifier for all verification activities.

Once registered with trusteaSustainable Tea Foundation, the Organisation needs to fill up the PQC to proceed further. In case the Organisation needs support, the entity may request IP support through tCMS system. After the satisfactory completion of the IP handholding, the entity will receive gap closure and training completion acceptance to proceed with the verification audit. The Implementing Partners-supported trustea Farm Support Centers (FSC) located in Assam (Tinsukia), West Bengal (Siliguri) or Tamil Nadu (Coonoor) for an orientation programme on the use of the Implementation Guides in the process of conducting an internal audit where the interested party can connect with.

As regards the competence of the persons from the Implementation Partners entity, the following shall be ensured –

   1.   The IP representative shall be trained on any one of the below standard combinations –

   • ISO 9001 or ISO 22000 (or equivalent scheme within the food sector). AND

   • ISO 14001 or ISO 45001 or SA8000 (or equivalent scheme within the social sector)

   2.   The IP representative shall have completed the e-learning and shall have undergone formal training on the trustea Audit protocol and assessment checklist.

   3.   The IP representative shall have observed or participated (under supervision from an approved IP person) in the implementation of trustea requirements for at least 3 entities,

resulting into a successful issuance of NOC and a successful completion of the certification process from the CB.

4. The IP person shall have a good working knowledge of the applicable legislative framework & social issues.

5. Experience working within the tea sector is desirable

Note – the person may not be a qualified auditor for the above schemes, unlike the CB auditor. For CB auditors, the competence requirements are defined within the "General Regulation - Certification Bodies (control)"

Registered Organisations must inform the trustea Secretariat through tCMS about any change in the registration information. Special rules apply for change of scope and change of name, location and ownership of the organization (see section No. 6.8)

c. Exception under the code

Trustea does not allow any exception or variation in case of any noncompliance related to the statutory requirements and Zero Tolerance Criteria points as per the trustea standard. Except for the following cases which are allowed on case-to-case basis and the same is established and verified by the implementation partner after the request from the entity.

I. In certain exceptional cases related to ownership change of financially tressed units where the liability for the legal dues of the workers lies with the new owners, an exception can be made for the payment of legal dues in installments subject to intimation to the concerned legal authority and payment of all the dues arising post takeover. This exception will be granted on a case-to-case basis based on the submission of the undertaking by the authorized person and subject to verification of three months of compliance to the plan. This is in the interest to protect the financial rights of the workers in the entity. In all such decisions, the entity and trustea must ensure that the procedure is not in violation of the legal requirements in any way.

II. In case of any infrastructural changes that have a sizable financial impact, the entity may be allowed to submit a rational plan to support the non-compliance within a definite and acceptable time frame can be considered.

III. Extension for the validity of the certificate may be issued on a case-to-case basis for force majeure and any other exceptional situation based on the request of the entity in the trustea code management system. Any such decision is discussed and ratified by the operations committee in the monthly operations meeting.

IV. In the case of legal licenses and permits exceptions are made if there is a delay in renewal of the same in the licensing authority's end after submission of the application on time with all required fees and documents.

V. In case of any situation that requires decertification of any unit within a group certificate and the nonconformance is restricted only to the respective unit/units, the certificate will be continued after the removal of the non-compliant units. Then on-compliant units can come to the system by following the standard procedure of the decertification and appeal

procedure. For any Zero-tolerance non-compliance that leads to a system failure, the entire group will be decertified. Trustea will take the call based on the severity of the NC.

VI. The entity has the option of adding the decertified unit as per the point above V above, to the original certificate, in which case the validity of the new entity certificate will be the same as the group certificate.

VII. The entity may also opt for individual certificates for the unit/units which is/are certified by third-party audit after decertification.

VIII. For any other specific unavoidable situation, the entity may appeal to the secretariat for consideration. Those cases will be discussed with the appeal committee members and a final decision will be taken in accordance with the approval from the committee head (Director)

5. Assessment Process

The flow of the assessment process with the mandated approvals is as below:
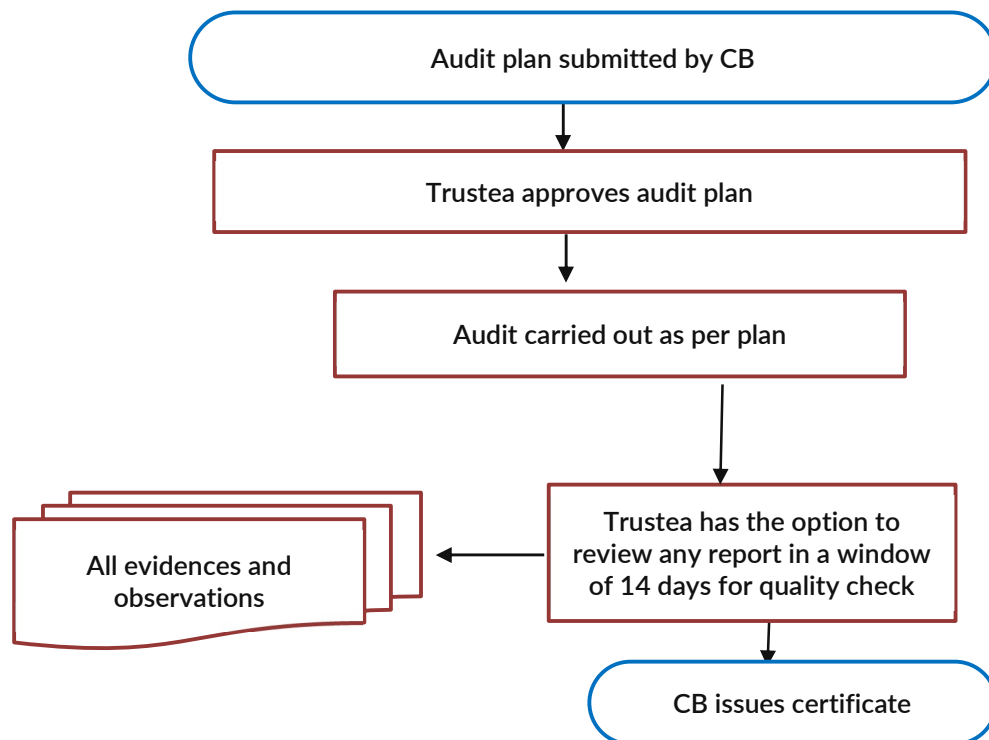
5.1 Types of Assessments and Assessment Cycle

A. Types of Assessment: There are three types of Assessments in the trustea scheme:

a. External Verification Audits ("External Audits"): The assessments that check an Organisation's compliance with the trustea Code requirements in order to get a Verification Certificate, carried out by a Certification Body (CB) every other year (starting from year 1, then year 3 etc.), and one surveillance audit in every 2nd year of the Verification Audit whenever communicated by trustea.

b. Internal Audits ("Internal Audits"): The verified organisation's annual formal self-assessment against the trustea Code Requirements

c. System assurance audit (SAA): Assessments by trustea Secretariat, engaging CB or ts auditors through a surprise visit. The trustea Secretariat may at any time carry out System Assurance Audits, and on annual basis the trustea Secretariat will select a random sample of verified organisations based on pre-decided sampling criteria, to conduct System Assurance Audits.

SAA is designed to check the ongoing compliance as well as the scope of continuous improvement in code as well as its implementation. It also helps to analyze the performance of the Certification Bodies and Implementation Partners.

I. evaluate continued adherence to the trustea code by the verified organisations,

II. check the quality of the verification audit done by the concerned CB

III. will be managed by the trustea secretariat, and a random sample of verified estates or BLFs and their associated supply base shall be selected for the audit, or to check a specific issue at a verified organisation outside the regular audit schedule, such as suspicion of non-compliance.

B. Assessment Cycle: Under the trustea scheme, verified organisations are audited once a year. Audits alternate between external and internal audits: Years 1, 3, 5, etc. are audited externally, and years 2, 4, 6, etc. internally. Before the first external verification audit, the organisation is required to conduct a gap assessment with the help of FSC. The gap assessment is for diagnostic purposes and does not necessarily lead to verification.

5.2 Scope of Assessments and Verification Requirements

5.2.1. **Extent:**

All External and Internal Audits will cover the entire operation of the Verified Organisation that will be covered by the Verification Certificate and are to confirm compliance to the entire trustea Code (i.e. all applicable Zero Tolerance, mandatory and other control points). Control audits may be full or partial (see 5.7.A)

5.2.2. **Assessments shall include visits to all key components of the operation, at a minimum**

a. Tea growing sites

b. Tea storage areas

c. Factories (if any)

     d.   Worker housing, sanitation, medical facilities, creches and primary education for children, (if any)

5.2.3. Content of the Assessment: All Assessments need to check:

     a.   That the Verified Organisation's registration information, as held by the trustea Secretariat, is complete, current and accurate

     b.   The Verified Organisation's internal documentation system and proper implementation (IDS)

     c.   That the Verified Organisation, and all its sub-entities in case of a group, conform to the trustea code and achieve the required level of compliance

     d.   Review of the results of the previous assessment, especially any non-conformities

     e.   Handling and disposal of non-conforming products, if any

     f.   Redressal of complaints, if any.

5.2.4. Minimum length of Certification or recertification onsite audit period:

The period of audit (number of days to be devoted for verification audit) shall vary according to the size of the organization (area under tea and the number of workers employed). However, the minimum number of onsite days for certification or recertification shall not be less than the one indicated in the table below:

5.2.4 A) For Estate with factory:

No	No. of Workers (Temporary + Permanent)	Tea garden Area (in Ha)	Minimum audit days
1.	Upto 100	Upto 50	1.5
2.	101 to 500	51 to 250	2.5
3.	501 to 1000	251 to 500	3.5
4.	1001 to 2000	501 to 1000	5
5.	Above 2001	Above 1001	5

Table 5.2.4 A

Note: In the case of estates without factory operation or linked with another estate factory, 0.75 audit days can be reduced up to 500 Workers and 0.5 audit days can be reduced up to 2000 Workers. Above2000 workers' full audit days are to be delivered as per table 5.2.4 A

5.2.4 B) For BLF with STG& LTG:

No. of STGs to be verified and the minimum number of audit days in the case of BLFs or Estate factories sourcing green leaves from small tea growers.

No.	No. of STGs/LTGs	Sq. root for STG/ Manual Sample for LTGs	Minimum audit days			
			For Factory	For STGs	For LTGs	Total*
1.	Upto 50 (including upto 10% LTG)	7/2	0.5	1.5	1	2
2.	51 to 200 (including upto 10% LTG)	14/5	0.5	2.5	2	3
3.	201 to 400 (including upto 10% LTG)	20/6	1	3	2	4
4.	401 to 1000 (including upto 10% LTG)	31/7	1	5	3	6
5.	Above 1001 (including upto 10% LTG)	31/7	1	5	3	6

Table 5.2.4 B

* The above total is considering only the STGs. If LTG is also in the scope then the additional audit days for LTGs should be considered on and above the total given as per the table.

Note: In case of an addition in STGs to the existing BLF operation, the STG audit days are to be considered.

While random sampling by square root method for identification of the growers for verification audit the small growers owning less than 10.12 ha are to be separated from the large growers owning more than 10.12 ha as the latter to comply with PLA.

5.2.4   C) Group Verification: For any entity holding more than one factory or estate with an individual tea board registration number shall be audited as per the procedure given below –
   I.   The entity will select one unit as the primary unit where the option is available to verify the centralized common policy and procedure
   II.   The audit plan for the primary unit will have the audit time and scope as a standard stand-alone unit
   III. For the secondary unit a minimum of one additional audit days will be carried out ensuring that the mandatory and zero tolerance criteria point at a minimum

IV.   The certificate will indicate the names of the holding company/group company and details of each individual site will be mentioned separately within a certificate with one unique number for the entire group.

V.   If nonconformance to the mandatory and zero tolerance points is re-observed in more than 1/3 of the total of the individual units, the entity has to go for a reaudit of the entire group after taking corrective actions.

5.2.5. Interviews:

Assessments shall include interviews in order to identify potential issues to be followed up during the course of the audit and triangulate information gathered throughout the Assessment. It is necessary to ensure interviews are conducted in the interviewees' first language, or one in which they are fluent, or perhaps with an independent interpreter where necessary.   Interviewees shall, at a minimum, comprise:

a. Smallholder farmers, if any
b. Both permanent and temporary workers in the field and factory, if any
c. The Verified Organisation's trustea officer
d. A representative of the senior management
e. Another two appointed Responsible Persons for two of the following key aspect of the operation: product quality and safety; worker health and safety and labour rights; pest management; environmental protection.
f. A trade union representative, if any
g. the welfare officer, if any
h. a member of the medical staff, if any

50% of interviewees shall be women and women should be interviewed by female auditors.

Interviewees should be selected by the auditors only and non-management interviews should take place where the interviewee feels comfortable and not in the presence of management.

Interviewees for 'b.' (above) should consist of a variety of roles, such as pluckers, drivers, security guards, sprayers, and maintenance workers from across different sections of the organization. The sample from these groups should also include workers from high risks categories such as younger, older, injured, and pregnant and nursing mothers.

5.2.6.   No. of persons to be interviewed:

Depending on the number of workers engaged in the organisation, the minimum number of persons to be interviewed shall not be less than the ones indicated in the table below; Workers should be interviewed both individually and in groups to achieve the minimum in the table below.

Minimum audit man day	Number of workers (excl. management)	Minimum individual interviews	Minimum Total employees interviewed
1	1-100	6	10
2	101-500	6	26
3	501-1000	12	42
4	1001-2000	20	52
4 but can be increased at the discretion of CB	Above 2000		

Table 5.2.6

Interviews should at least last 5 minutes per interviewee. With the exception of senior management staff, it should be made clear to interviewees that their identity will be kept confidential and information they provide will not be attributable to them. The Auditor shall document, for their internal records only, all interviewees with name and position; time, date and duration of the interview; a few notes from the interview; and for c) to e) signature of the interviewee

5.2.7. Opening and closing meeting:

External Audits shall start with an opening meeting with the Senior Management of the VO. In the absence of the Senior Management, it could be with the designated trustea officer of the VO. On completion of the assessment a closing meeting shall be held with senior management and any non-conformities identified during the assessment should be reviewed. In case of internal audits, the opening and closing meeting shall be with senior management.

5.2.8. Internal Documentation System (IDS)

A. Verified Organisations must have an Internal Documentation System (IDS). An IDS is an information management and record-keeping system by the verified organization which can demonstrate to auditors that its management controls cover all processes that are subject to trustea rules. If the Verified Organisation comprises a group of entities, then it must run the IDS on behalf of all of those individual entities.

B. If the Verified Organisation is a group of entities or individual farmers, the IDS shall comprise as a minimum:

  a. An organogram or explanation of how the group is organised, with roles and responsibilities of key staff and governance structures for the group

b. Approval of new members

c. Documenting at any point in time (a) which entities or farmers are included in the Verified Organisation and (b) what production areas and processing facilities are included;

d. Individual members' deliveries and sales of the Verified Organisation

e. Group member record-keeping requirements

f. Records of Internal Audits; and

g. Internal mechanisms for dealing with non-conformities with the trustea Code, sanctions and appeals.

C. In the case of groups, farmers and estates of a considerably different production system (in size, nature, or geography) can be covered under the same IDS but shall be audited in sub-samples with homogenous attributes.

D. During the Assessment the Auditor shall satisfy him or herself that the IDS:
   a. Exists to the extent of the above minimum requirements
   b. Is well-managed and up-to-date
   c. Contains accurate, unequivocal information that is internally consistent and in line with the information that the Auditor observes in the Verified Organisation's operations throughout the audit.

5.4 Compliance with the trustea Code

A. Checklist:

Certification Bodies and verified organisations shall use checklists, based on the full trustea Code, for all their trustea Assessments. The trustea Secretariat may from time to time issue its own checklist, plus rules for the use of such checklists (e.g. when it's there, its use is mandatory or for guidance only).

B. Types of Control Points:

The trustea Code has three types of Control Points (CPs) highlighted in different colours within the code:

1. Zero tolerance (ZTCP) – Statement in Red font with ZTCP mentioned in code criteria number box
2. Mandatory (MCP) – Statement in blue font
3. Other CPs (OCP) – Statement in Black font

Compliance levels are based on progressive improvement over three years in each section as follows:

Year 1:100% ZTCP+100% MCP & 65% of OCP

Year 2:100% ZTCP+100% MCP & 75% of OCP

Year 3:100%ZTCP+100% MCP & 90% of OCP (End of 2nd year – Recertification)

C. Sections:

For assessing compliance, the buckets of the trustea Code are grouped into four sections as follows: Segment I: Section - G 1

Segment II: Sections – E1 to E6

Segment III: Sections – S1 to S3

Segment IV: Sections – L1 and L2

The minimum compliance levels for the Other CPs of 65%, 75% and 90%, respectively, need to be met per section. An organization that fails to meet the minimum compliance level in one section cannot be verified.

D. The trustea Scoring Policy:

On the Checklist, (see sub-section 1 of section 3.4) compliance with each CP is marked as follows –

a. MCPs are either 'pass', scored with 1; or 'fail', scored with 0. There is no partial fulfilment of mandatory CPs. The sub-criteria are also mandatory under MCP. Anything but full compliance is scored as 'failed' in case of an MCP

b. OCPs can be 'fully met', scored with 1; 'partially met' (in case of a minor non-conformity), pro rata as per the applicable sub-criteria points; or 'failed' (in case of a major non-conformity), scored with 0

c. Not Applicable: If a CP, mandatory or other, is not applicable for the Verified Organisation's operation, then this is indicated in the comment column, along with the reasons or evidence for non-applicability.

E. Total score:

Scores for all MCPs and all OCPs will be added up separately. Dividing this sum between the numbers of applicable CPs of the trustea code will be used to arrive at percentage compliances for mandatory and other CPs. The auditors will check on the applicability of all control points.

F. Evidence and comments shall be provided for each CP and must be suitable to enable the audit trail to be reviewed after the event, and will include details of references taken during the audit. During all assessments, auditors must make records of the evidence seen for all applicable CPs.

5.5 External Verification Audit

The Organisation's chosen Certification Body (CB) will conduct the External Audit.

In case of single or group verification, the CB will audit following the protocol, as described in Clause 12 of the General Regulations.

The first External Verification Audit shall take place only after all necessary corrective actions

from the Gap assessment have been closed out and the VO has been issued with a gap closure and training completion report. The CB shall share with trustea secretariat the audit plan at least two weeks prior to the proposed date of audit and obtain confirmation that the entity is holding the gap closure report.

5.6 Internal Audit

A. General:

An Internal Audit must be carried out at least once every year (tentatively four weeks before the expiry of twelve months from the date of issue of the verification certificate for all recertified entities and maintain the cycle for every year). It will be carried out as a self-assessment under the responsibility of the verified organisation.

The self-assessment shall be done against the complete checklist issued through the tCMS.

In the case of group verification minimum of one internal audit must be carried out every year against the full checklist for each member of the group.

B. Planning and Execution:

The organisation shall plan the audit through tCMS entity login and follow the audit checklist generated by the system after planning the audit. Once the audit is completed, the finished checklists must be submitted to the tCMS portal, within one month of the audit completion date. The report then will be available for viewing to the respective CB and tS.

C. Internal Auditors:

- Internal Audits are self-assessments that must be carried out by qualified internal auditors.

- Internal auditors shall have both the following qualifications:

    1. Three years of experience in the tea industry or qualified auditor of any ISO management system.

    2. Having qualified trustea audit code training (in person or through e-learning).

In the absence or non-availability of a qualified internal auditor as mentioned above, the verified unit may subcontract its internal audit to an externally trustea approved certification body, different from the CB responsible for the external verification audits. The cost would be borne by the verified unit**

 ** Subject to consideration of the exceptional situation

5.7   System Assurance Audits (SAA)

A.   The trustea Secretariat may at any time carry out System Assurance Audits, and on an annual basis, the trustea Secretariat will select a random sample of verified organizations in which to conduct System Assurance Audits. System Assurance Audits may also result from complaints to the trustea Secretariat or CB about the certificate holder by relevant stakeholders.

System Assurance Audits can be:

a. Full (against the entire trustea code and covering the entire verified organisation) or partial (against parts of the trustea code or limited to certain parts or aspects of the Verified organisation's operation); and

b. Announced or unannounced.

System Assurance Audits can take two forms:

a. Non-Programmed Audits: independent re-audits carried out by the trustea Secretariat or its appointed auditors

b. Shadow Audits: a regular external or internal audit that is accompanied by a trustea approved auditor.

B. The timing for System Assurance Audits must keep in view the Production season to coincide the visit with plucking time as far as possible.

C. Any non-conformity will be treated like non-conformities found in regular audits and the same processes; timelines and consequences apply as for non-conformities found in regular audits. The entity will close the NC within the stipulated time based on the classification of the findings.

D. Cost for the System Assurance Audit (SAA) will be built into the fees payable to the regular audits for CBs.

E. For the audits done by trustea Secretariat there won't be any fees chargeable to the VO.

F. Mandatory for all VOs to comply with the SAA notice as this is an integral part of the whole trustea process.

G. Non-adherence to the same may be considered as an indication of ongoing non-compliance to the code requirements which may lead to the withdrawal of the trustea Certificate for that VO.*

*Subject to force majeure like riots, natural calamities, pandemics or similar can be reconsidered.

For the assessment team from trustea, the following competencies need to be ensured –

I. The trustea representative shall be trained on any one of the below standard combinations –

ISO 9001 or ISO 22000 (or equivalent scheme within the food sector). AND

ISO 14001 or ISO 45001 or SA8000 (or equivalent scheme within the social sector)

II. Basic awareness of overview of sustainability reporting practices.

III. The trustea representative shall have completed the e-learning or face-to-face training and shall have undergone formal training on the trustea Audit protocol and assessment checklist.

IV. The trustea representative shall have observed or participated (under supervision) in the implementation of trustea requirements for at least 3 entities (minimum one CB and one IP).

V. The trustea person shall have a good working knowledge of the applicable legislative framework & social issues.

VI. Experience working within the tea sector is desirable

H. The competence matrix for each of the trustea roles has been defined.

The mapping of the available competencies against the defined profile is done. Each of the roles is assessed formally to confirm and demonstrate that the relevant & necessary competence is available & record of the same is maintained. For trustea team, participation in the CDC and council meeting contribute towards the fulfilment of CPD requirements. As part of ongoing CPD, each of the trustea team members (technical team as a minimum) is required to undergo a minimum of 8 hours of training or equivalent actions.

As a part of ongoing monitoring & observation of trustea's own assessors, trustea must include stakeholders' Feedback, Report review of each trustea person performing SAA, and shall undergo onsite monitoring by another qualified auditor from trustea once in three years at a minimum.

5.8   **Audit Timing and Team Composition**

A. Audit timing:

The timing for all Assessments (Internal, External and Control) should take place during active production and when both permanent and temporary staff are available for interviews.

Timings and dates of External Audits shall be fixed with the consent of the VO ensuring that normal operations will be open for witnessing during the planned Audits.

Alternative timing options may be followed where an audit during production time is not possible, however, this should be avoided and appropriate justification should be documented and maintained by the CB. Where audits take place outside of production, this should be noted in the audit report along with a summary of the impact on the audit. Practically, an audit of records and visual evidence requires that the audit must take place as close to harvest as possible, for the evaluators to verify as many control points as possible. If an External Audit takes place outside of production time, the next External Audit must take place during production and assess any CPs that could not be evaluated in the previous External Audit.

B. Audit team composition:

The Certification Body shall plan the composition of the team of auditors and duration of the Audit through tCMS and share the audit plan with the trustea Secretariat and the VO at least two weeks before the planned audit date. CBs shall include female auditors so that woman workers are interviewed only by the female auditors.

C. Request for change against audit timing and team composition

Until two weeks before the planned audit date, the VO may raise any concerns about the timing or the assigned auditors (e.g. suspected conflict of interest) in writing to both the trustea Secretariat and the CB explaining in detail the nature of their concern, along with any evidence the normal appeals procedure applies (see Section 4.C.VIII). An appeal does not change the set audit date or team composition until it is either revoked by the CB or the matter is escalated to the trustea Secretariat by either party. Organisations and CBs are encouraged to find solutions bilaterally.

5.9 Checking of Audit Results by the trustea Secretariat

A. Random inspections

Every year the trustea Secretariat will randomly inspect a number of external Audits. The purpose is to ensure consistency in the quality of auditing across the trustea programme. In cases where the inspections uncover non-conformities or insufficient implementation of previously closed-out corrective actions, the trustea Secretariat may ask the CB to re-audit or put the VO's status to 'verification pending'.

B. The trustea Secretariat will also take random feedback on the CBs performance on the quality of their audit reporting, inform training needs and identify areas for improvement in the audit approach. In cases where audit reports are not of a sufficient standard, tS will contact the CB.

6. Verification Process

6.1 General

A. Contracting:

A written contract is established between the applicant organisation and the CB depicting the fees, timeframe, dates and scope of the audits. The applicant Organisation should select the CB from trustea's empanelled CB list through tCMS

B. Application for verification:

a. Organisations shall apply to the CB in the application format prescribed by the CB, and provide the required information for contract finalization.
b. The CB shall respond to all inquiries received from organisations regarding their application within seven days of receipt of the query.

C. Granting of verification against the trustea code:

a. The applications found to be complete and supported with all documents shall be accepted and registered in order of receipt with the CB's own unique identification number, acknowledged and records maintained.
b. The CB shall grant a verification certificate after ensuring complete compliance with the verification requirements and satisfactory close out of any corrective actions. There shall be no conditional grant of verification. (Unless specified)
c. Verification certificate is granted only against the latest versions of the trustea Code,

verification requirements and scheme rules. The CB shall review all applications for the above to ensure that applicants are prepared for an audit against the latest requirements.

    d. The Verification Certificate shall be issued within 30 days of completion of the audit unless corrective actions are noted, in which case the verification certificate shall be issued within 30 days of satisfactorily closing out the corrective Actions (see 4.4.3.1).

    e. CB must ensure checking the availability of the valid gap closure and training completion report prior to the audit execution for first verification or consent from the tS in case of re-verification of decertified clients.

    f. In case of re-verification, the verification certificate shall be issued prior to the expiry of the existing certificate.

D.   Rejection of applications:

a.   CBs shall reject and close all applications for verification under the following conditions:

    I.   Lack of competent personnel in the Organisation for handling trustea audit.
    II.   Organisation shows no progress towards completion of corrective actions within three months of the first audit.
    III.   Voluntary withdrawal of the application.

b.   Organisations that have earlier either violated the trustea Terms & Conditions or misused the Verification Mark or their affiliation with trustea, shall be banned from re-applying for one year from cancellation of the certificate by any CB.

Applications from Organisations found to be misusing the Verification Mark or their affiliation with trustea while their application is being processed, shall not be processed any further, and rejected after due notice of 15 days.

c.   The trustea Secretariat reserves the right to reject or put on hold applications if it believes that the application may put the reputation of the trustea scheme at risk. The applicant can appeal against such a decision with the trustea Board.

d.   Applications from eligible Organisations whose previous applications have been withdrawn, stopped, or rejected, shall be processed as fresh applications

E.   Notification to the Organisation and issue of verification certificate: On granting verification the certification body shall inform the organisation and issue a verification certificate, uniquely identified, indicating the names of the product verified, the verification requirements against which the verification has been awarded, effective date, expiry date, and the name and address of the organisation as a minimum.

F.   Notification to the trustea Secretariat and records. The CB must fill in the audit report using the trustea software and upload it to the trustea portal within 15 days after the audit (even if the NCs are open). The CB must give the results of the audit, and a summary report to the organization and trustea Secretariat within 60 working days after completing the audit. Based on the audit outcome the CB will then issue a VC to the organisation in the format prescribed by

trustea. The validity of the VC shall be two years from the date of issue of VC.

The CB shall maintain records of all verification activities: application registration, documents provided by the applicant and on-site audit reports and collected evidence for a period of five years after the audit.

6.2 Renewal of Verification

a. The CB shall send a renewal notice to the verified organisation at least four months prior to certificate expiration.
b. The Verified Organisation should apply for renewal of verification at least three months before the expiry of the verification.
c. The CB then carries out a full External Verification Audit, ideally at least eight weeks before the expiry of the old verification certificate.
d. When the performance of the verified organisation does not meet the verification requirements, the CB shall not issue a new verification certificate to the Organisation.
e. The new verification certificate shall be effective from the date of the expiry of the old certificate provided the verification audit has taken place at least four weeks prior to the expiry of the old VC.

In the event of audit takes place less than the period of 4 weeks prior to the expiry of the old VC and unable to complete the overall process of certification, the intervening period gap between the expiry date of the old certificate and the start date of the new one, shall be treated as a period of non-verification. During this period, the verified unit shall not claim verification or use the trustea logo, trademark, verification certificate, or any other type of document that has any relation to trustea verification or make any explicit or implicit reference that suggests it is trustea verified.

6.3 Verification status

Organisations will be classified as one of the following

1. Verified

2. Verification pending

3. Not Verified

4. Decertified

Only verified organisations may use the trustea word mark and logo, in line with trustea communication and branding guidelines. Organisations with a pending verification may not use the trustea word mark logo but may refer to their trustea status as "trustea verification pending" in written communication with their business partners.

6.4 Non-Conformance

Non-compliance with a requirement under the code will be termed as non-conformity. The interpretation of compliance to any code requirement will be finally adjudicated by trustea in case

there is any gap or inaccurate interpretation of the requirements. This can come up either during the review of the audit by trustea or through a reference by the audit agency. In case of appeal also the decision by trustea on a similar case of interpretation or compliance the decision by trustea will be implemented as final.

6.4.1   Types of non-conformities

a. Any non-conformity against a ZTCP leads to a ''failure'' of that Criteria Point and thereby failing to meet the verification requirements that lead to decertification for a period of 1 year

b. Any non-conformity against an MCP leads to a ''failure'' of that Criteria Point and thereby fails to meet the verification requirements. Maximum 90 days to be given to the entity to close the gap otherwise it will lead to a certificate suspension. (Ref.6.5.2)

c. Non-conformities against Other Criteria Points s are classified as yes or no to the compliance requirements. And the impact of this on the certification decision is based on the criteria defining clause number 6.4.2a.

Any interpretation on the level of noncompliance is based on the defined classification of ZTCP, MCP, and OCP. In case of any gap in interpretation or understanding of the audit finding/evidence which will have a bearing on the level of nonconformity, the decision will be referred to trustea and implemented accordingly.

Procedure to be updated to differentiate the responsibilities for approving decertification decisions and to approve the waiver requests to be done by persons not involved in the decision-making process.

6.4.2   Improvement Plans

a. In years 1 and 2 of the trustea verification, the IP (optional) and organisation jointly draw up an improvement plan those details how the organisation will move from its current compliance level to the compliance level required for the following year (e.g. moving from 50% compliance with all other CPs in year 1 to 65% in year 2).
Verified organisations are to continue having an annual improvement plan beyond year 2, as part of good management practice and their ongoing efforts to improve sustainability.

b. The Improvement plan shall be specific, measurable, actionable and time-bound:

Specific: Listing specific actions to improve compliance with specific CPs in the trustea Code.
Measurable: Leading to improvements that will increase the compliance level to the one required in the following year (or beyond).
Actionable: Concrete, as well as realistic in terms of time, competency and resources available to the verified organisation.
Time-bound: Specific by when an improvement will be achieved, and where appropriate defining interim milestones.

c. The CB checks that the organisation has achieved the improvements laid out in the improvement plan as part of the audit starts. If the CB determines that sufficient improvements have not been made then the entity, CB might raise that as non-compliance.

6.4.3 Corrective Action

a. Instead of failing the audit, the CB can demand corrective action from the organisation before issuing the verification certificate in cases where non-conformities in OCP prevent the organisation from meeting the required compliance level for a particular year. Corrective actions may also be mandated after the CB checks the results of the Internal Audit and after SAA and special investigations, whether initiated by the CB or the trustea Secretariat.

b. The CB registers the minor non-conformity and should review corrective actions proposed by the entity being audited, and if necessary, indicate why they may be inadequate to allow the closing of a non-conformity.

c. If the same non-conformity is found more than once in a three-year period, a warning will be issued. Corrective action can only be used once on the same Control Point in 3 consecutive years.

d. Corrective Actions comprise the following steps:

      I.   investigation of cause (root cause analysis),

     II.   finding possible solutions,

    III.   monitoring of effectiveness.

e. Corrective Actions can only be closed out as completed if:

      I.   the CB accepts the evidence presented by the organisation for following the three steps described in the previous paragraph; and

     II.   the CB verifies the implementation of the solution.

The Corrective actions shall be verified on-site unless the CB can verify the same off-site

f. The CB sends a notice to the organisation and the trustea Secretariat whether it accepts the evidence or not within 7 days of receipt of the evidence.

g. The period for completing Corrective Actions is set by the CB and must not exceed three months or the expiry date of the current VC, whichever of the two is shorter.

h. In case the organisation does not complete satisfactorily all corrective actions within their allotted periods, the verification shall stand cancelled from the end of the first deadline for a corrective action.

6.5 Sanctions

6.5.1 Warning

a. Both the CB and the trustea Secretariat can issue warnings. A warning is issued when a verified organisation -

I. Does not conform with the same verification requirement on two consecutive external audits (External Verification Audits or Control Audits) Or,

II. Is seen to misuse its affiliation with trustea, the trustea mark or logo, or behave in other ways that threaten the reputation of trustea or its other members. Or,

III. Is not completing the audit process before the expiry of the certificate and receiving the renewal certificate.

b. A warning is delivered to the verified organization by the trustea Secretariat in writing detailing the reason for the warning. If the warning is issued by the CB, the CB will notify the trustea Secretariat about the warning that is issued and provide all necessary information related to the warning. If the warning is initiated by the trustea Secretariat, a copy shall be sent to the CB that issued the current verification certificate.

c. Once placed under warning, an organisation's verification certificate can be cancelled without prior notice (see Section 6.5.2). While under warning the organization is still considered verified.

d. Warnings will be formally lifted in writing by the trustea Secretariat.

e. Organisations can appeal against being placed under warning with the trustea within three months after the warning has been issued. trustea will respond to appeals within two weeks.

6.5.2   Suspension of VC

Decisions regarding certification are done by Certification Body & the TSTF is only intimated about the same. TSTF does not interfere in the decision-making process of the Certification Body.

The VC of the verified organization may be suspended when it fails to close the Mandatory Criteria Points (MCP) findings within 90 days of the intimation without any valid reason if the appeals committee accesses the risk to be at the level where suspension is required.

The verified organization is given another 90 days for closure of the MCP and produces evidence to CB for lifting the suspension. The VC shall be cancelled if the VO fails to close the NC within the specified time. Such VOs shall apply for VC only after approval of the appeals committee following the proper hearing of the case. In case no appeal is submitted the VO cannot apply for reinstatement before 12 months from the date of cancellation of the previous VC. In case of Suspension, the VO can come back to the system if the removal of the cause of suspension can be verified by trustea based on the submission by the entity.

During the suspension period, the suspension letter issued by the certification body shall explicitly state that no claims (trustea mark or logo), is would be made by the clients which may misrepresent the verification status of the tea produced. The trustea Secretariat would be responsible for periodic checks (at least monthly)

during the suspension period to ensure no false claims are made by the client. Additionally, the trustea portal has been updated to reflect the current certification status as Valid / Suspended / Decertified.

6.5.3   Cancellation of verification

a. The VC shall be cancelled if the verified organization fails any ZTCP, such VOs can re-apply for VC only after 12 months from the date of cancellation of the VC.

b. The Verification Certificate shall be cancelled when corrective actions are not closed out as completed after the allotted time (see Sections 6.4.3).

c. The Verification Certificate may be cancelled either of:
    I.   A non-conformity leads to serious doubt about the integrity of the product, particularly food safety.
    II. An organisation severely or purposefully violates the trustea terms and conditions or misuses its affiliation with trustea, the trustea mark or logo, or behaves in other ways that threaten he reputation of trustea or its other members.

d. Certification Body shall also cancel the verification at the request of the verified organisation, if the operation(s) in the organisation's premises can no longer be carried out due to reasons of natural calamities such as flood, fire, earthquake, etc., lockout declared by the management, or closure of business operations, etc.

e. A formal notice of cancellation is delivered to the verified organisation by the CB that has issued the VC. The notice shall detail the reasons and the date from which the VC will be invalid.

f. VC's can only be cancelled by the CB that has issued them. The trustea Secretariat can however put an organisation's status on 'Not Verified' and instruct the concerned CB to cancel a VC if maintaining verification for an organisation poses a risk to the reputation of the trustea scheme or is deemed to pose a risk to the reputation of other verified organisations. The CB shall issue a notice period of at least two weeks to the verified organisation before cancelling the VC. However, if the verified organisation is under warning no notice period is required.

g. An Organisation that has had a cancellation applied may not re-submit for verification until twelve months after the date of cancellation until the Appeal is heard and approved (see section 6.6).

h. A cancellation of the verification certificate will result in the total prohibition of using the trustea logo, trademark, VC, or any other type of document that has any relation to trustea verification or making any explicit or implicit reference that suggests it is trustea verified.

i. Organisations can appeal against a cancellation with the trustea Board within three months after it has been issued. The trustea Board will respond to appeals within two weeks.

j. In case of decertification, the certification body is authorized to decide and initiate the decertification process. The decertification decision should be done typically within 2 - 7 days from the last date of the audit. The client as well trustea shall be formally informed about the initiation of decertification. In case the client would like to request a waiver to reduce the decertification tenure, the

same shall be done within 30 days from the date of receipt of the decertification intimation to the trustea Appeal's committee. The decision regarding approval of a waiver for shortening the decertification tenure shall be within the purview of trustea Appeal's committee or escalated to Director at trustea.

6.6 Appeals against Audit Outcomes/Decisions

a. An Organisation can appeal against decisions of CB audit findings within 15 days of receipt of formal notice of the decision through the system (tCMS). The appeal shall state which decision is contested, detailed reasons why the organisation objects, and what it thinks should be the correct decision.

b. The CB shall respond within 14 days of receipt of the appeal, replying in detail to the concerns of the organisation and either confirming or revoking the contested decision. The CB should also *immediately* notify trustea with the final decision.

c. If the organisation is not satisfied it should engage in further rounds of trying to resolve the issue directly with the CB or appeal to trustea.

d. Trustea's appeal committee comprises primarily the Manager of System Assurance, Program Manager and the IT Manager with the final approval from the Director. Any appeals will be logged with the trustea secretariat then both the appealing organisation and the CB have a duty to inform the secretariat, which issues a case number in the system and will log all related correspondence. All correspondence in the matter from both the appealing organisation and the CB shall be in writing (or confirmed in writing if verbal) and copied to the trustea Secretariat.

e. If either party feels that the issue cannot be resolved bilaterally, or cannot be resolved within an acceptable time, the party may escalate the matter to the trustea Secretariat. The trustea Secretariat will review the case, hearing both sides, and make a decision within one month. The Secretariat reserves the right to pass on the cost of such a review by the trustea Secretariat (time, travel to the field and other expenses) to one or both of the parties, at a level and split at its discretion.
In any entity that wishes to have a review of the trustea's decision, he can request trustea to escalate the grievance to the impartiality committee.

f. An appeals procedure is a mandatory component of the contract between organisations and CBs. The appeals procedure must be in line with the above generic framework.

g. In case the entity accepts the audit finding, they may appeal to trustea directly for reducing the cancellation period. Trustea will revert back to the entity maximum within 15 working days for an appeal hearing and necessary guideline will be given to the entity once the appeal is heard.

h. In case the of entities, decertified by trustea auditors from tSTF, may appeal to the trustea appeals committee where the committee head (director) will exclude the auditors who is/are responsible for the decisions of decertification. In case the entities wish to have a review of the trustea's decision, they can request trustea to escalate the grievance to the impartiality committee.

Appeal Guidelines on certificate cancellation for Zero Tolerance Criteria Point violation:

ZTCP	Process	PROPOSAL
1ST VIOLATION	Appeal	Draft Appeal Document prepared
2ND VIOLATION	Appeal	Straight One Year- no reduced sentencing

ZTCP	Code Requirement	Minimum/ Maximum (time for De-verification
2.3	**A clear process of physical segregation of all non-verified tea from verified tea during manufacturing and storing shall be maintained**	3 months / Maximum period=period of mixing/failure
6.2	**The verified facility shall not use any PPFs that have been banned by the central and state government or its affiliated bodies**	3 Months / 6 months or period of spraying whichever is higher
8.9	**Adolescent workers (14-18 years), pregnant women and feeding mothers shall not be involved in handling of hazardous chemicals. The women and adolescent workers shall not be involved in the spraying of agrochemicals.**	1 year- Straight

9.4	**The verified facility shall not permit the use of forced or bonded labour under any circumstances, including workers sourced through third party contractors.**	1 year- Straight
9.5	**No labour shall be employed below the age of 14 years. The adolescent workers between 14-18 years of age shall not be given hazardous jobs and work conditions will be regulated as per the national law applicable to the tea sector.**	1 year- Straight
9.7	**Equal work shall be remunerated with equal pay.**	3 months / Maximum period=period of mixing/failure
9.8	**The temporary workers shall not be paid less cash wages than the permanent workers.**	3 months / Maximum period=period of mixing/failure
9.9	**Workers (permanent and seasonal) are paid gross wages that comply with national legislation or collective bargaining agreements whichever is higher. If workers are paid per unit weight of harvested tea, in a normal working day (maximum of 6 days a week and 48 hours) they shall be allowed to earn at least the national or sector-established minimum wage. Deductions from wages for disciplinary purposes shall not be made beyond the provisions of the law.**	3 months / Maximum period=period of mixing/failure

9.1	**No adolescent worker shall be given work for more than twenty-seven hours a week as maintained in the PLA, 1951**	3 months / Maximum period=period of mixing/failure
9.11	**Workers shall not be required to work more than 48 hours per week on a regular basis and shall be provided with a weekly day off. In the event of engagement beyond 48 hours, as per the state and national legislation, it shall never be more than 12 hours a week.**	3 months / Maximum period=period of mixing/failure
9.13	**The verified unit (where applicable) shall provide Provident Fund (PF) for all its employees (permanent and temporary) & Gratuity and Pension schemes for all its permanent employees & conforming to national norms. PF benefits to be extended to the tea gardens/factories workers from the date of joining.**	3 months / Maximum period=period of mixing/failure
9.18	**The verified facility and its staff shall not engage in the use of corporal punishment, mental, physical or sexual harassment or any kind of intimidation at the workplace.**	1 year- Straight/ Minimum period= till the redressal of the issue or complaint (nature of action taken)
10.2	**There shall be no degradation and deforestation of the notified forest land or any other form of encroachment in the forest land.**	1 year- Straight

ZTCP Violation year wise	Action
For new certification	Re-Do Gap Audit and Re-audit by the CB
In SAA	1-year cancellation of VC and eligible for appeal
In Re-certification Audit	1-year cancellation of VC and eligible for appeal

6.7 Extension of Scope under an Existing Verification Certificate

6.7.1   **STG Addition:** A verified organization may increase the number of STGs that were not in the verified list, as per the approved STG details in the annexure provided with the VC by the CB. To add new STGs, the verified organization must inform the about the new STG list to trustea secretariat and adhere to all the necessary requirements like proper handholding, traceability training, usage of approved chemicals, conducting internal audits, and others as per trustea code criteria as applicable to the STGs. Post that, with the concurrence of the Secretariat, the entity may start taking tea leaves from the new STGs and within 90 days of the concurrence, an external audit is to be carried out by CB and upon approval by CB, the final list of the new and existing STGs can be confirmed. A verified entity may increase upto 10% in volume per STG which can be approved without the need of conducting a new External Verification Audit before the next scheduled external audit. However, the verified organization must report any change in the production area or of the approved STG to the trustea Secretariat and proceed only upon confirmation by the secretariat. Until the process as outlined above is followed, no new STG may be added to the original list of approved STGs

Note - **Maximum percentage should be 10 of the existing number of STGs which can be added after doing the IA and in a receipt from the tS approval within 3 months the entity should complete the EA to update the certificate.**

6.7.2   The trustea Secretariat may commission the CB to quality check the documentation wherever necessary, at the cost of the verified organisation. Further, new areas or new members of a group may only be included in the scope of the VC if the CB is provided with documentation demonstrating that those farms were subject to an Internal Audit and complied with all of the trustea Code requirements. The results of the internal audit must be submitted to the trustea Secretariat as part of the supporting documents.

6.8 Change of Location, Ownership, or Name:

6.8.1   Change of location: The verified organisation shall inform the CB and trustea Secretariat of any change in the location of its operations within four weeks.
The verified Organisation shall conduct an Internal Pre-Assessment and be subject to an External Audit at the new site like an organisation that applies for the first time.
If the External Audit is satisfactory, the CB shall transfer the Certificate to the new location and the verified organisation be permitted to operate verification from the new site.
The CB shall endorse the change of premises on the Certificate.

6.8.2 Change of ownership:

Status	Action by the new owner	Status of certificate <120 days to expiry	Status of certificate >120 days to expiry	Audit requirement
Certificate within the valid date	Commitment to continuing with certification	valid	Valid	EA before the due date as required
The recertification audit date crossed	Commitment to continuing with certification	valid	Certification invalid.	Fresh certification with Gap Audit
Internal audit due	Commitment to continuing with certification	valid	Valid	IA to be done*
Status	Commitment to continuing with certification	valid	Certificate Invalid	Immediate EA

* Below requirement to be fulfilled (anyone)

A. Internal Auditor is not changed then no need to go for an IA/EA

B. If Internal Auditor is changed then the entity needs to submit the relevant document for the new Internal Auditor to comply with the trustea requirement to satisfy the criteria.

C. If the entity is not complying with the above requirement, then they

have to go for an External Audit or Internal Audit by an External body (CB

or tS)

6.8.3 **Change of name:** In case of a change of name, the verified unit shall inform the CB and trustea Secretariat, supported with documentary evidence, and if satisfied the CB shall endorse the certificate in the new name.

6.9 Verification Certificate

a. The Certification Body shall provide a formal hard copy of the VC to the Verified organisation. The VC shall be in the standard template issued by the Secretariat, (see Annex 1)
   The name of marks shall be mentioned on the VC or any other document intimating indicating the grant of verification.

b. A copy of the VC shall be sent to the trustea Secretariat which may, within six weeks of issue, contest the verification in case of suspected errors or irregularities.
   The VC remains valid if contested by the trustea Secretariat, until its validity is accepted or a formal cancellation is issued.

c. The CB will maintain a copy of the VC as a record for five years.

d. The validity of the VC will be two years, subject to any suspensions, cancellations, or extensions.

e. Once the verification certificate is issued the product produced up to 3 months prior to that day is to be considered as verified.

f. If the verified organisation provides copies of the verification certificate to others, the certificate shall be reproduced in its entirety.

7. **Claims and usage of logo:** The verified entity is entitled to claim the verified status publicly subject to the requirements of the following documents

    a. **'Guidelines for the use of trustea verified seal'**

    b. **'trustea's Communication and Branding Guidelines'**

    c. **Claims Policy**

All these policies are available in www.trustea.org under policy and guidelines. Acceptance of the trustea verified status implies compliance to the above three policies regarding claims and usage of logo.

Any violation of the requirements as above will lead to suspension/ decertification of the concerned entity subject to a standard show-cause and appeals process. Trustea is within its full rights to take any action to save guard the organisation logo and brand during the pendency of the appeals process.

REVIEW RESULT:	REVIEWED BY: Anandita Ray Mukherjee
Document Reference – tSTF02 ASP	ISSUE DATE: 01-01-2014
Version: II January2015	
Revision Date: June 2019	APPROVED BY: Rajesh Bhuyan
Revision Date: July 2023	REVISION NO.: 03