

7.1.3 – Policy Documenton Environmental andEnergy usage

PRINCIPAI Annamecharys Institute o Technology & Sciences Phylour (V), Balaningerson (Post) B.B. Dist. MYD-50* 525 Pigliper (V), I



Policy Document on Environment and Energy Usage

The Environment and Energy usage policy of Annamacharya Institute of Technology & Sciences is to manage energy in such a systematic way so as to minimize its impact on the environment. The policy implies to explore the renewable energy resources to reduce the burden of the government and to find out suitable natural resources as solutions to the energy crisis. The environment and energy policy is binding for all the components of the institution and applies to all its stakeholders and to the various activities undertaken by the institution. It will help us embed efficiency and environmental awareness into everyday activities, thus helping us to realize our responsibilities and commitments to conservation of natural resources and to limit its usage. The E & E club, an official platform devoted to the cause of environmental awareness green initiatives, and to conduct green literacy programmes to save and to protect the environment.

Policies:

- > To assess our energy usage and measure its impact on the environment.
- > To count CO2 emissions generated by our means of transportations vehicles
- To reduce local air pollution emissions using environmental friendly vehicles, including bicycles public transportation and use of pedestrian-friendly roads
- > To install solar panels for the generation of alternate energy
- > To install LED bulbs in the complete campus to save energy.
- > To develop systematic waste management mechanism.
- > To develop rain water harvesting unit.
- To undertake tree plantation drive
- > To take additional measures to continuously improve our energy consumption.
- To develop and maintain an environmental management system which is ISO: 14001:2015
- To encourage use of advanced technology to minimize energy consumption, atmospheric emissions and noise, particularly from our vehicle fleets.

PRINCIPAL Technology & Sciences



- To monitor and respond to emerging environmental and energy issues. To strengthen our employees and students environmental knowledge and skills in order to improve our own environmental performance.
- > To provide information and training opportunities on energy saving measures.
- To train our employees and students through our E & E Club to make them "Go Green Specialists" and partners to plant trees every year. This policy will be communicated to the students and employees via internal communications channels, and will be made available to all the stakeholders on the institutional website. The environment and energy policy, objectives and targets will be reviewed on a regular basis by the E & E Club convener and its members under the guidance of the Director of the college.

PRINCIPAI Technology & Sciences R.R. Dist. HYD-50*



7.3.2: Quality audits on environmental and energy regularly undertaken by the institution.

Report on Energy audit submitted by auditing agency

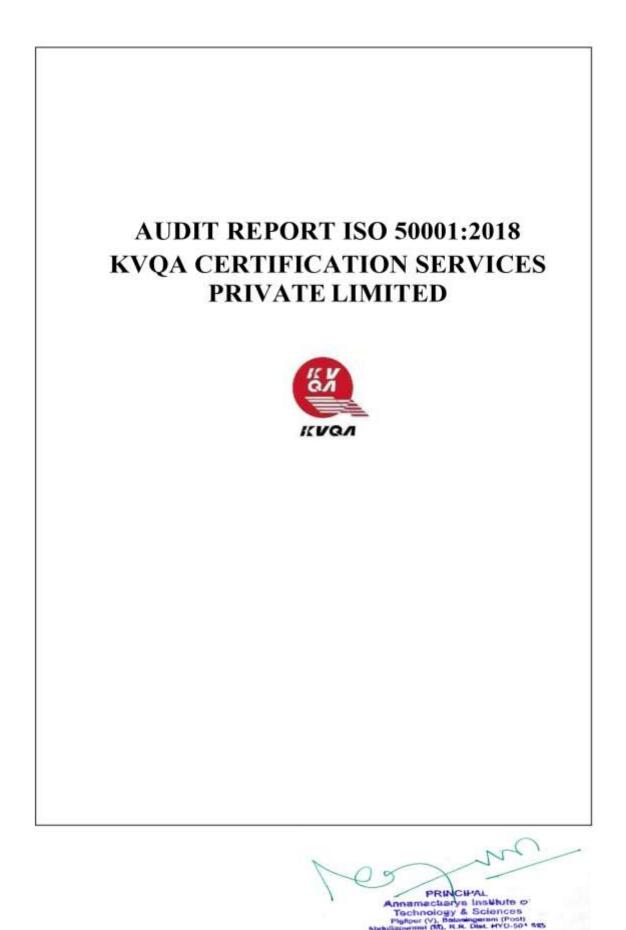
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1	Report on Energy audit	2021-2024	05 - 13
		2024-2027	14 - 21
2	Report on Environment audit	2024-2027	15 - 31

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College Code: T8



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DOCUMENT NAME:	A-2021/01/04
DOCUMENT REFERENCE:	With reference to Assessment conducted for ANNAMACHARYA INSTITUTE OF TECHNOLOGY AND SCIENCES

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	AF—8							2021.01	
		O	n-site a	audit rep	ort				
Organization	INSTITU	LOGY AND		Professor		P V Krishna thy	Audit No.	A-2021/01/04	
Address		R (V), BATSIN REDDY (DIST				MET (M), H	YDERABA	D - 501 512,	
Audit type	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	☑Initial (Reassessment) □ Re-audit □ 1 st surveillance Change Special surveillance Others ()							
Certificationscope	PROGRA ENGINE	PROVIDED EDUCATIONAL SERVICES LEADING TO AWARD OF UNDER GRADUATE PROGRAMS IN ENGINEERING (B.TECH), POST GRADUATE PROGRAMS IN ENGINEERING (M. TECH), DIPLOMA PROGRAMS IN ENGINEERING, MASTER OF BUSINESS ADMINISTRATION (MBA) AND MASTER OF COMPUTER APPLICATIONS (MCA).							
LAF CODE	38	38							
Standard	⊠ ISC	50001: 2018	EnMS						
Audit day	04/01/20	021							
	Lead auditor Auditors				Audit	Frainee			
Audit team	(sign) ARUN KUMAR			(sign)			(sign)		
Next audit	Follow-up or Re- audit			Document On-site ()			Re-audit()	
	Surveillance Da or reassessment			ate Dec/2021 Audittype:			() Re o	ertification	
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※ Indicates attact ★ limited to KV			영상에 다 같아요.						
Recipient: Registra	s recorded o plicant, exc en done on	luring audit sha cept upon reque sampling basis	ll be cont est from /	fidential and	shall not	disclose to any	yperson or e n of KVQA	ntity without	

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Doc. No : KAF-10

2021.01

Attendance Sheet

(Document On-site Surveillance Amendment-Re-audit Pre audit)

Audit no.: A-2021/01/04

Date: 04/01/2021

The	Signature		Name	Title	Signature		
Inte	Opening	Closing		-	Opening	Closing	
PROFESSOR				ARUN KUMAR	LEAD AUDITOR		
	Title PROFESSOR	Opening	Title Opening Closing	Title Opening Closing	Title Opening Closing	Title Opening Closing Opening PROFESSOR ARUN KUMAR LEAD	

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KAF-09					2021.01
		Audit su	immary		
Organization	ANNAMACHARYA INSTITUTE OF TECHNOLOGY AND SCIENCES	Date	04/01/2021	Audit No.	A-2021/01/04
CAR issue	E Minor: 1 issue, Major 0		confirm required:)
Document	Manual No. 01	Rev. No	umentconfirm: .: 00		A 1. C.
	Does organization's system	comply with	certification audit of	riteria?	(ØYes, □No)
	Was there any deviation from				(¤Yes, ⊠No)
	Are proper corrective & prev Internal audit?	entive actio	ns taken according to	the results of	(⊠Yes, ⊐No)
	Was there any issue impactin	(¤Yes, ⊠No)			
	Is there any significant chan andit & any difference betwy inon-site audit?	(¤Yes, ⊠No)			
	Is it assured that organizatic continuously?	(⊡Yes, □No)			
	(Additional review points in Does all elements of system e another? Is there any unresolv specify. Is it assured that organizatio effectively?	(⊠Yes, ⊡No) (⊡Yes, ⊠No) (⊠Yes, ⊡No)			
	(Additional review point in Is the certification mark pro		50		(ØYes, ⊐No)
Evaluation	Overall evaluation of audit rev: (Effectiveness of the system, R meethe applicable statutory, R potential improvement of Mam Energy management system of student service. This will be m department and monitored on n In the context of an educationa measures, energy conservation Verification of lighting, heating and Evaluation of awareness p students and staff. Verification of systems for mor and acknowledgment of the ins The details of observation are a auditors are convinced that afte have a good energy manageme action shall be verified in the n	equirements egulatory, C agement sys jective of th easured throo nanagement 1 institution, initiatives, i g, ventilation rograms and nitoring enee ititution's co mnexed in C r closure of nt system. T	ontractual requireme tem.) e organization are:-C ugh student question level. this could include ev and the overall manag t, and air conditioning campaigns promotin rgy consumption and mmitment to effective observation report On this CAR and its implied to the the the the the the the the the the the the the the	nts, meeting obj ontinuously imp naires, executed aluating energy gement of energy g systems for en- g energy conserv identifying areas e energy manage e minor CAR w lementation the tion compliance	ectives and rove the level of by the marketing efficiency resources. ergy performanc vation among s for improvement as issued. The organization will for corrective





	Recommend certification for initial audit; maintain its certification forsurveillance. As your system is proper and effectively practiced, certification is recommended. After document audit as follow-up, it will be resolved Your system is practiced without any serious major non-conformity as shown from CARissue. You are required to submit the result of corrective action taken, which includes corrective action, analysis of the reason, and preventive action to KVQA. Within 1month. When the result is satisfactory, certification will be recommended (certification will be maintained for surveillance). The observations shall be verified in the Surveillance audit After on-site visit as follow-up, this will be resolved
Audit Resul	More than 10 Minor non-conformity is found in your system as shown from aboveCAR issues. You are required to submit the result of corrective action taken, whichincludes corrective action, analysis of the reason, and preventive action to KVQA CERTIFICATION SERVICES PRIVATE LIMITED Within 1month. Additional on-site visit as follow-up will be conducted and when it is satisfactory,certification will b recommended (maintained for surveillance). Not to satisfy with standard Major non-conformities are found in your system as shown from above CAR issues. Re-audit is required.
	Remitted

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	Corrective Action	on Req	uest (C	AR)		
					Issue	no. : 01 /0
Organization	ANNAMACHARYA INSTITUTE OF TECHNOLOGY AND SCIENCES	Auditno.	A-2021/01	/04	Issue date	04/01/202
Applicable			Appl	icableClause	9.2	1
Standards	ISO 50001: 2018			Division	Monitoring a	and measures
c				Auditor conformity	ARUN KUN	MAK
Audit type	Initial (Reassessment)	Grade	⊠ Minor no ⊡Major non			
Nonconformi	ty (🗆 Confirm with on-site visit , 🗆	Confirm wi	th document)		
No real-time r	nonitoring system in place to track ener	rev consumm	tion actoss ca	mpus facilitie		
and rend-time t	and a place to use a click	est consump	1011 101 000 C	angers roemine	<u>.</u>	
Lead auditor	: ARUN KUMAR (sign)	Managem	ent Represe	atative: (sign)		
			can reeprese	annun (allen)		
	sic reason for occurring nonconform itoring system for real-time energy cor	isumption.				
Corrective ac Implement an	tion (Plan Result (Attachment energy con	Sumption.	to track energ	zy usage in rea	l-time, provid	ing insights
Corrective ac Implement an patterns and a	tion (Plan Result (Attachment)	Sumption.	to track energ	zy usage in rea	l-time, provid	ing insights
Corrective ac Implement an patterns and a Management	itoring system for real-time energy continue the energy continue of the energy monitoring system with sensors reas of high consumption.	Yes No)			l-time, provid	ing insights
Corrective ac Implement an patterns and a Management Follow- upaudit	tion (Plan Result (Attachment energy monitoring system with sensors reas of high consumption. Representative: (sign)	Yes No)	to track energ Validation		l-time, provid	ing insights
Corrective ac Implement an patterns and a Management Follow-	itoring system for real-time energy constitution (Plan Result (Attachment energy monitoring system with sensors reas of high consumption. Representative: (sign) (Document confirm on-site con ARUN KUMAR (sign)	Yes No)			l-time, provid	
Corrective ac Implement an patterns and a Management Follow- upaudit	tion (Plan Result (Attachment energy monitoring system with sensors reas of high consumption. Representative: (sign)	Yes No)	Validation		5 10 10 10 10 10 10 10 10 10 10 10 10 10	
Corrective ac Implement an patterns and a Management Follow- upaudit Auditor : Date: The result of c Within 1 mon The result of c	itoring system for real-time energy constitution (Plan Result (Attachment energy monitoring system with sensors reas of high consumption. Representative: (sign) (Document confirm on-site con ARUN KUMAR (sign)	isumption. Yes No) s and meters nfirm) d to KVQAO by on-site at	Validation Auditor: Date: CERTIFICAT	Date:	(sij ES PRIVATEI	m) LIMITED

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Organization:	ANNAMACHARYA INSTITUTE OF TECHNOLOGY AND SCIENCES	Audit No.	A-2021/01/04	Page: 1/1
Department	Con	tents	ISO Element	Grade of NC
Good Points Management	Points for Improve	amatte		
	Energy target of the institute 2020		intain	Good Observation
	Frequency of internal audit was no	ot evident.		Point of improvement
	Energy management system polic area.	Energy management system policy was not displayed in campus area.		Point of improvement
	The institute EnMS quality object	ive plan need to be update	sd.	Point of improvement
	The opportunities to optimize ener environmental impact was well m			Good Observation
Lead Auditor: ARUY	V KUMAR (signature)	NGA CERTIFICATION REINACES PAT. LD.	Audit date: 0	4/01/2021



Certificate of Registration KVQA (Energy Management System) KVQA CERTIFICATION SERVICES PVT. LTD. This is to certify that the Energy Management System of ANNAMACHARYA INSTITUTE OF TECHNOLOGY AND SCIENCES PIGILPUR (V), BATSINGARAM (P), ABDULLAPURMET (M), HYDERABAD - 501 512, RANGA REDDY (DIST), TELANGANA, INDIA. Has been found in accordance with Energy Management System standard ISO 50001:2018 This certificate is valid for the following product or service range Provided Educational Services leading to Award of Under Graduate Programs in Engineering (B.Tech), Post Graduate Programs in Engineering (M.Tech), Diploma Programs in Engineering, Master of Business Administration (MBA) and Master of Computer Applications (MCA). Certificate No: KCONE202101157 1st Surveillance Due On: 15/12/2021: Done On: Date Of Issue: 15, January, 2021 2nd Surveillance Due On: 15/12/2022: Done On: Valid Until: 14, January, 2024* Issued by Authorised signatory KVOA To Check the Status of the Certification kindly log on to www.kvqa.in F-300, Sector - 63, Noida U.P. India. Ph- 011 -22711940, 22711941 Email : delhi@kvqaindia.com *Subject to successful completion of surveillance audits

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ISO 50001: 2018 INITIAL REPORT

COMPANY NAME: ANNAMACHARYA INSTITUTE OF TECHNOLOGY AND SCIENCES

COMPANY ADDRESS: PIGILPUR (V), BATSINGARAM (P), ABDULLAPURMET (M), HYDERABAD - 501 512, RANGA REDDY (DIST), TELANGANA, INDIA.

Company Representative: D.Naresh

Start date of visit: 13 Jan 2024

Visit duration: 01 Days

AUDIT TEAM - Lead Auditor

ARUN KUMAR

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Report Number: AITS0010115

AUDIT SCOPE & OBJECTIVES

Objectives

To evaluate the ongoing effective compliance of the Energy Management System against the requirements of ISO 50001:2018, the scope of certification and your own Energy Management System(EnMS).

The audit will also identify any areas of potential improvement to your management system, as appropriate to the audit scope.

Scope

"Provided Educational Services leading to Award of Under Graduate Programs in Engineering (B.Tech), Post Graduate Programs in Engineering (M.Tech), Diploma Programs in Engineering, Master of Business Administration (MBA) and Master of Computer Applications (MCA)."

This scope was reviewed during this audit and was considered appropriate, there are no foreseen changes at this time.

Standard - Audit Criteria

ISO 50001; 2018

Site location

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Report Number: AITS0010115

Site Review

The audit was completed on site. A tour of 1 locations was included in this initial audit . These sites were all academic locations.

The site tours included interviews with the facilities managers and Facility Assistants, a review of site energy monitoring and a tour of the buildings including academics areas as relevant.

All of the locations visited were seen to be managed in line with the energy management system with onsite teams demonstrating a good understanding of the significant energy uses and the variables that effect energy efficiency.

AUDIT CONCLUSION

Summary and certification status

During the assessment no nonconformities were raised.

Continued certification is recommended.

The audit plan & objectives have been achieved and the certificate scope remains appropriate.

ISO 50001: During this audit it has been demonstrated and confirmed that there has been continual energy performance improvement made across the business. Examples of which are detailed in this report.

Follow up action required

In response to any nonconformity raised you are required to prepare, document and implement a correction and corrective action plan. Each finding must be investigated to identifyany root causes or underlying trends. Appropriate action must be taken to eliminate the causeof any nonconformity in order to prevent reoccurrence. The plan must define timely action, timescales and responsibilities.

There is no need to submit this plan to us as the actions detailed will be verified by the auditor during the next visit.

Failure to adequately implement the planned action may result in the raising of a major nonconformity putting your certification in jeopardy.

A response to any opportunity for improvement raised is optional.

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AUDIT FINDINGS

Nonconformities identified during last visit - (AITS0010115)

There were no corrective actions required to be taken in response to the last audit.

There are no outstanding nonconformities from previous audits.

Nonconformities identified during this visit - Aspect Impact register is not updated

The assessment was based on sampling.

ASSESSMENT COMMENTS & OPPORTUNITIES FOR IMPROVEMENT

ASSESSMENT COMMENTS

From the sample selected for audit at this surveillance audit the ANNAMACHARYAINSTITUTE OF TECHNOLOGY AND SCIENCES management & employees have demonstrated that they are maintaining their Energy Management System (EnMS) in line with Energy management processes and the policy objectives. As can be seen form the findings of this report there is evidence of compliance with both ISO 50001:2018 and the EnMS, Policy and Objectives. The EnMS was seen to have the capability to meet applicable requirements and expected outcomes.

EnPI's are identified and energy objectives have been set as part of the energy review process. From the representative sample taken as part of the audit the EnMS was seen to becapable of achieving Energy policy commitments, objectives and operational control needs. The EnMS was assessed and found to be managing internal monitoring processes & internalaudits.

The assessment demonstrated a high level of implementation of the processes and monitoring and measurement activities, ensuring that the planned arrangements are achieved. Management review and internal audits continue to be carried out to a high standard, are effective and conform to the requirements of the standard

Monthly monitoring of energy is reviewed and the results are investigated as appropriate. There is an opportunity to improve the investigation reporting (OFI/02) Energy performance is known and performance is evaluated against the objectives and predicted energy use.

There have been significant improvement made to the detail and effectiveness of the individual site audits. The duration and detail of the audit has been increased, and there is a positive effect can be seen in the energy performance. The audits now include interrogating the BMS and other control systems on site, improving control of energy use and better reflecting the sites occupancy.

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The scope of the EnMS has been updated to include carbon emissions from scope 3 sources. This has been done in anticipation of changes to the legal compliance scheme 'PAT Perform Achieve and Trade'. This may include net zero in future. This has been seen as an opportunity to remain compliant with PAT via the ISO 50001:2018 Certification. The details are to be fully established following the issue of government guidance on the changes to the PAT scheme.

There are potential complications with the relationship between Carbon reduction and energy efficiency. This will be monitored at future audits and will become clearer how this will fit in to the ISO 50001 EnMS, once the Indian Government has published the new PAT guidance / Scheme documents.

Continual Improvement of energy performance and the EnMS was demonstrated during this audit and the 3 year cycle. There are processes in place to identify and manage continual improvement. There has been significant improvement in energy performance set against the baseline. PIOEATFW continues to make cycle significant investment in new buildings to replace the older stock. There is an established commitment to continual improvement with stretching future objectives in place

All of the employees and management interviewed during this assessment were positive and demonstrated an awareness of the EnMS. There was an open dialogue established which greatly assisted the auditor – Thank You.

OPPORTUNITIES FOR IMPROVEMENT

OFI/01 - LEADERSHIP:

Top Management - Energy Policy and Carbon Management Plan were drafted by the Associate Director (Sustainable Operations) and approved by the Director of Estates.

The Carbon & Environment Action Group (C&EAG), is no longer responsible for this. The leadership section of the Compliance manual, needs to be reviewed to reflect this recent change in authorities.

OFI/02 - INVESTIGATION OF SIGNIFICANT DEVIATIONS:

Significant deviations are identified as part of the monthly energy monitoring process, with sites identified as having significant deviations required to investigate and respond the energy team.

A number of the responses are limited in detail and slow. Significant deviation needs to be investigated and responded to, to ensure energy performance is maintained. There is an opportunity to improve the response detail and time. ISO 50001:2018 9.1.1

Thanks to the company and its people for their time and cooperation during the audit.

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Report Number: AITS0010115

MISCELLANEOUS

Changes to your management system

You must not carry out significant changes to the Energy Management System, without first confirming with your auditor that the proposed changes are acceptable.

Report distribution

The report will be distributed to the company representative, the Lead Auditor and the Business Support Team (for archiving), unless otherwise agreed.

Report confidentiality

This report will not be disclosed to any third party by us. You are free to circulate it as required, however, if this report is circulated to a third party the entire content (excluding audit trail) must be included.

NEXT VISIT

The current 3 year audit programme, audit frequency and duration, were considered during this visit against your current scope and manning levels. The audit program and auditor competences are confirmed as suitable and sufficient and remain unchanged.

The next visit will be due in Dec. 2024 and will be of 1 days duration.

An Audit programme including an agreed outlined plan for your next assessment visit and a summary of previous assessments in the certification cycle is attached to/included in this report. Further details as appropriate will be confirmed prior to your next assessment visit.

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Piglipur(V), Batasingaram(Post), Adbullapurmet (M), R R Dist., Hyderabad - 501512 (Approved by A.I.C.T.E, Recognized by the Govt. of T.S., Permanent Affiliation from JNTUH, Hyderabad) Accredited by "NAAC with "B+" Grade, Recognized by UGC Under Section 2(f) and 12(B). Website: www. https://aits-hyd.org/, E-mail : principalaith@gmail.com , Contact No: 9848924705

Report Number: AITS0010115

Next visit plan – 1 day EnMS Initial Audit. Date Time Auditor Area / Department / Process / Function ANNAMACHARYA INSTITUTE OF TECHNOLOGY AND SCIENCES

PIGILPUR (V), BATSINGARAM (P), ABDULLAPURMET (M), HYDERABAD -501 512, RANGA REDDY (DIST), TELANGANA, INDIA.

13 Jan 2024	Arun kumar	Arrive On Site - On site meeting and greeting
		Opening Meeting & Management System Administration Management System Manual / Policy / Risks and Opportunities Management Review / Objectives & targets.
		Internal Audits Including corrective action management. Evaluation of Legal compliance
		Management Review
		Energy Planning, Baseline & Performance
		Lunch
		Operational Control - Site Tour Including site tours – Energy use, monitoring, communication, maintenance energy projects.
		Auditor / Report Preparation Time - The close out & follow up on any outstanding details picked up during the audit
	Arun kumar	End of day review
Day 1		

	Arun kumar	Arrive on site
	Contraction of the second	Monitoring & Measurement Including significant deviations.
		Operational Control – Site Tour Including site tours – Energy use, monitoring, communication, maintenance energy projects.
		Lunch
		Competence, Training & Awareness Identification of personnel who can have a significant effect on energy use. Evidence of training and awareness on site.
		Auditor / Report Preparation Time - The close out & follow up on any outstanding details picked up during the audit
1	8.00	Closing Meeting

Notes to Client:

Times are approximate and will be confirmed at the opening meeting prior to commencement of the audit. Our auditors reserve the right to change or add to the elements listed before or during the audit depending on the results

of on-site investigation

or or sale investigation Your contract with us is an integral part of this audit plan and details confidentiality arrangements, audit scope, information on follow up activities and any special reporting requirements.

End of Report

AOC GLOBAL LLC

Page 7 of 7

PRINCIPAL

Annamacuarya Institute of Technology & Sciences Piglour (V), Belonkogenen (Post) Mapurmat (M), R.R. Dist. HYO.50* 555



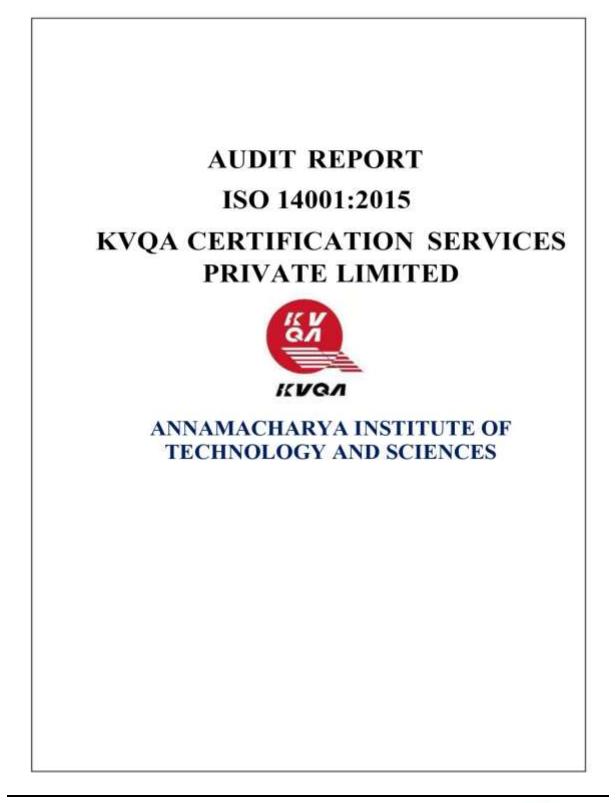
Piglipur(V), Batasingaram(Post), Adbullapurmet (M), R R Dist., Hyderabad - 501512 (Approved by A.I.C.T.E, Recognized by the Govt. of T.S., Permanent Affiliation from JNTUH, Hyderabad) Accredited by "NAAC with "B+" Grade, Recognized by UGC Under Section 2(f) and 12(B). Website: www. https://aits-hyd.org/, E-mail : principalaith@gmail.com , Contact No: 9848924705



PRINCIPAL Annamectarys Institute of Technology & Sciences Pigipor (V), Bataningersm (Post) Additapermit (M), R.R. Dist. HYD-504 550



Environment Audit



PRINCIPAL Technology & Sciences Annamachar Sullipor (V), Balaningerson (Post) apermis (ND, R.R. Dist. HYD-50* 5



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DOCUMENT NAME:

ANNAMACHARYA INSTITUTE OF TECHNOLOGY AND SCIENCESAUDIT_REPORT

KVGA CERTEICATION SERVICES PVT. UTD

PRINCIPAL Annamectarya Institute of Technology & Sciences Phylour (V), Babalagerum (Post) Millopurma (M), R. Diat. HYD-50* 335



		On		e audit re	n 0	rt		
Organization	INSTE	MACHARYA IUTE OF NOLOGY ANI	-	EMS CORD	÷	Naresh	Audit No.	2024/EN-01/52
Address	PIGILP	UR (V), BATSI ANGA REDDY					T (M), HYDE	RABAD - 501
Audit type	⊠Initi Cha	al (Reassessment nge Special su					550-1110-100-001-111-0100	3
Certification scope	Provide Engines Program	d Educational S ering (B. Tech), I ns in Engineerin ter Applications	ervic Post (g. M	es leading to A Graduate Progra aster of Busines	ward ms i	l of Under C in Engineeri	iraduate Progra ng (M.Tech), l	ams in Diploma
IAF CODE	37	ter Applications	trac	A).				
Standard	⊠ ISC	0 14001:2015 E	MS					
Audit day	12	2/01/2024						
	Lead a	uditor		Auditors			Audit Trains	e .
Audit team	KV HARGOPAL (sign)			(sign)			(sign)	
	Follow-up or re-audit Do			Document On-sit	Document On-site ())
Next audit	1000	Surveillance or Date: Audit ty			Audit type:	() audit		
Result of follow-up audit	Summary(Onivite confirm The client has implement Date:		ment	nt/Not implemented the CAR			(signature)	
Attachment								
 Observation Indicates attacht ★limited to KVQ Recipient: Registrat	Inle (KA action red reports a certification of the content of the	F-12) quest (CAR)(KA	andit o TCES VQA e confi m bod	or any changes occ PRIVATE CERTIFICATION idential and shall n	LIN SE	AITED AN RVICES PE close to any pe	RIVATE LI erson or entity with	
sampling basis. ※ Guidance of c	ertification	procedures applies						

5 PRINCHAL Annamecharys Institute of Technology & Sciences Pighour (V), Belawingersm (Post) hillapurmet (M), R.R. Obt. HYD-50* 435.



Audit no.:	2024/EN-01/52					Date; 12/01/2	024
Name	Title	Sig	mature	Name	Title	Sig	nature
Name	The	Opening	Closing			Opening	Closing
Y. Prabhakar	Asst. Prof. HOD Civil			KV HARGOPAL	Lead Auditor		
S. Hanmanthu	Asst. Prof.						
M. Prashanth	Asst. Prof.						
D. Ravinder	Asst. Prof.			-			
K. Srivani	Asst. Prof.						
G. Kiran	Asst. Prof.						
M. Laliya	Asst. Prof.						
Pranav Kumar	Asst. Prof.						
Vinay Kumar	Asst. Prof.						
Г. Gopi	Asst. Prof.						
Upendhar	Asst. Prof.		-				t.,
Yadhaiah	Asst. Prof.						
Visha	Asst. Prof.		-				

M PRINCHAL Annamacharys Institute of Technology & Sciences Pighour (V), Batamigerium (Post) Millapurmei (M), R.R. Obst. HYD-50* 535



Doc. 1	No : KAF-12					2	2023.01	
	Stage 2	Audit schee	lule for IS	SO 140	01:2015			
Organization	ANNAMAC INSTITUTE TECHNOLC SCIENCES	OF	Audit no.	2024/	EN-01/32	Revis	ion	0
Address		BATSINGARAM Y (DIST), TELA			MET (M),	HYDER	ABAI	0 - 501 512
Scope	(B.Tech), Post C	tional Services lea Graduate Program aster of Business	s in Engineer	ing (M.Te	ch), Diplon	na Progr	ams in	
		Auditing	Elements (departs Per Each					
Date	Time	(Lead Auditor) KV HARGOP	(A	uditor) r	(EXPERT	7.5	ISO 1400	1:2015 Claus
	10:00 to 10:30	Opening Meeting				7	4.0, 5.2 7.1.6, 9 9.3,10,	
	10:30 to 11:30	Management Representative/ Top Managemen	đ.			7	7.1.6, 8.3, 7.1.3, 7.1.4, 8.1, 8.5, 9.1.3, 10, 8.5.6	
12/01/2024	11:30 to 1:30	Transportation/ maintenance				8	3.1, 8.3	
	1.30 to 2.30	Lunch						and the second second
	2:30 to 4:30	Training/HR					1.31	.3, 7.3
	4:30 TO 5.30	Admin/store/pur	chase			7	7.1.3	
	5:30 to 6:00	Closing of the da	iy			:5	5.0, 7.1.3	, 7.1.4
Date: 12/01/20)24	111			50	0		
to meet ap Manageme effectivene It shall incl 9 9 0 0 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1	plicable Statutory, Reg at System. The above t ss, of the client's manu- ude the auditing of at 1 aformation and evidence assugement system sta- erformance monitoring xpectations in the appl Maer normative docum he client's management pplicable statutory, reg poperational control of the atemaal auditing and ma-	e about conformity to a ndard or other normative, measuring, reporting a icable management sys- ent); system ability and its p ulatory and contractual actions and contractual a client's processes;	nirements, meetin, respective clauses udit shall take plas all requirements of e documents; and reviewing agai stem standard or serformance regard requirements;	g Objectives in the Audit e at the site(the applicab nst key perfo	and Identificati summary Audi s) of the client. le mance objectiv	on of Poter it focus on i	ntial imp implement gets (cotas	rovement of atation, includ

NC PRINCHAL Annamectarya Institute of Technology & Sciences Pighor (V), Bolasmogerum (Post) Julizournea (M), R.R. Obst. HYD-50* 525



Organization:	ANNAMACHARYA INSTITUTE OF TECHNOLOGY AND	Audit No.	2024	4/EN-01/52	Page:
Department	SCIENCES Contents			ISO Element	Grade o
Good Points Management	The management committed towar EMS.	ds implementatio		Litikat	- MC
el de la companya de	Points for Improvements				
MR	Regular monitoring of transportation	a is not maintain	ed,	5.4.3	Obs
MR	Maintenance records are not monito efficiency.	red to improve		8.2.2	Obs
EMR	Internal audit checklist related to en	is to be done.		8.2.2	Obs
HR	Training records of Ems Individual	records lacking.		5.6.2	Obs
TRG	Management review meeting to don	e in more detaile	sd.	6.2.2	Obs
EMR	Aspect impact chart having but loca chart.	tion also include	in	4.3.1	Obs
Purchase	Supplier evaluation and performanc	e records not evi	dent.	7.4	Obs
Maint.	On the website of college the enviro displayed.	nmental policy i	s not	8.4	Obs
TRG	Training plan more elaborated and t to be done.	raining effective	ness	6.2	Obs
Auditor	name:- KV HARGOPAL			Date	:- 12/01/2024

PRINCHAL Annamecharys Institute of Technology & Sciences Plafour (V), Balasingerism (Post) Aliapurmes (ND, R.R. Dist. HYD-50* 525



1.2	KAF-09					2023.01
			Aud	lit Summary		
Organizati on	INSTITU	LOGY AND	Date	12/01/2024	Audit No.	2024/EN-01/52
CAR issue	Minor: 01	ssue, Major 0 issue (0	Dusite confirm	n required: ,⊡Document	confirm:)	
Document	Manual No. :		No. : 00			
	Compare Strated and an address of the strategy of	ation's system comply y deviation from audit j		A state in the interval and the interval of the balance in the balance interval and the balance in the balance		(⊠Yes, ⊡No) (⊡Yes, ⊠No)
		prective & preventive a y issue impacting the au		according to the results of ? If Yes please specify	f internal audit?	(⊠Yes, ⊜No) (⊜Yes, ⊠No)
				anagement system since la and assessed in on-site au		(⊡Yes, ⊠No)
	Is it assured t	hat organization mainta	in and devel	op its system continuously	17	(⊠Yes, ⊡No)
	Does all elen Is there any u	rview points in reassess ents of system effectiv nresolved issue identifi hat organization has co	ely interact v ed? If Yes P		ffectively?	(⊠Yes, ⊡No) (⊡Yes, ⊠No) (⊠Yes, ⊡No)
Evaluation		eview point in surveilla ation mark properly use				(⊠Yes, ⊐No)
	Management it was committee management A employees and each job right i pressures. The high-quality w We constantly marketplace. A geographic rese India. Quality Project deliver	became ample clear that on implementing the Qu. ITS places the highest va- between Clients. Our suc se well as maintaining a lo value of our services is du ock within the constraints adapt our skills to meet in howe all, at AITS we get to to enhance our reputati Policy Our endeavor is to	the manageme ality Managem lue on teannwe cess is the res- ing-tenns pers- rived from ou of the client's dividual clien- the job done. on as a stable achieve total rough adheren	t needs and the opportunities We aspire to grow in stature a , highly respected member of customer / client satisfaction ace to systems and procedure	d That it ntal system. The obj r its" team to do tee of daily usistently of the and the professional ser in terms of accuracy	vices community in timeliness of
	As your sy After doct Your syst required t and preve the result surveillan After c	stem is proper and effe sment audit as follow-u em is practiced without o submit the result of c ntive action to KVQA (is satisfactory, certifica ce). The observations sl m-site visit as follow-u t 01 Minor non-conform	ctively practi p, it will be a any serious orrective acti CERTIFICA tion will be all be verifi- p, this will b mity is found orrective acti	major non-conformity as a ion taken, which includes o TION SERVICES PRIVA recommended (certificatio ed in the Surveillance audi	mended. corrective action, a TE LIMITED. W n will be maintain t from above CAR i corrective action, a TE LIMITED. W	inalysis of the reasor ithin 1 month. When ed for ssues. You are malysis of the reasor ithin 1 month.
Audit Result	and preve Additiona recomment	ntive action to KVQA (l on-site visit as follow aded (maintained for su sfy with standard	-up will be c rveillance).	onducted and when it is sa 1 as shown from above CA	8) 909	anon win de

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Vaste Bin segregation is not done across all the departments specially in Laboral Lead auditor KV HARGOPAL(sign) Management Repre Analysis (Basic reason for occurring nonconformity) There is a lack of understanding regarding waste segregation. Corrective action (Plan, Result (Attachment Yes No)	8.1 Operational Control KV HARGOPAL (signature)
Organization INSTITUTE OF TECHNOLOGY AND SCIENCES Audit no. 2024/EN-01/5 Applicable Standards ISO 14001:2015 Applicable Division Auditor Audit type ISO 14001:2015 ISO 14001:2015 Audit type Initial. () 2nd surveillance Non conform .Grad Nonconformity(C Confirm with on-site visit, IC Confirm with document) .Grad Vaste Bin segregation is not done across all the departments specially in Laboral Lead auditor KV HARGOPAL(sign) Management Represent Analysis (Basic reason for occurring nonconformity) There is a lack of understanding regarding waste segregation. Corrective action (I Plan, Result (Attachment I Yes INO) Imagement Represent	8.1 Operational Control KV HARGOPAL (signature)
Applicable ISO 14001:2015 Applicable Standards ISO 14001:2015 Division Auditor Auditor Audit type Initial, () 2nd surveillance Non conform. Nonconformity(□ Confirm with on-site visit, □ Confirm with document) Grad Vaste Bin segregation is not done across all the departments specially in Laboral Lead auditor KV HARGOPAL(sign) Management Repre Analysis (Basic reason for occurring nonconformity) There is a lack of understanding regarding waste segregation. Corrective action (□ Plan, Result (Attachment □ Yes □No)	Operational Control KV HARGOPAL (signature)
Standards Division Standards Division Auditor Auditor Audit type Division Monconformity(□ Confirm with on-site visit , □Confirm with document) Grad Nonconformity(□ Confirm with on-site visit , □Confirm with document) Management Representation Vaste Bin segregation is not done across all the departments specially in Laborat Lead auditor KV HARGOPAL(sign) Analysis (Basic reason for occurring nonconformity) Management Representation Corrective action (□ Plan, Result (Attachment □ Yes □No) Non	KV HARGOPAL (signature)
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Audit type Diminal, () 2nd survemance conform. Audit type .Grad Nonconformity(□ Confirm with on-site visit , ☑Confirm with document) .Grad Waste Bin segregation is not done across all the departments specially in Laboral Lead auditor KV HARGOPAL(sign) Management Represent Analysis (Basic reason for occurring nonconformity) There is a lack of understanding regarding waste segregation. Corrective action (□ Plan, Result (Attachment □ Yes □No)	
Analysis (Basic reason for occurring nonconformity) There is a lack of understanding regarding waste segregation. Corrective action (Plan, Result (Attachment Yes No)	ity Minor nonconformity
	Date: 2/01/2024
Follow-upaudit (Edocument confirm Eon-siteconfirm) Validation	
Auditor: Date: (sign) Auditor: (Date:	gn)

PRINCHAL Annamecharys Institute of Technology & Sciences Plafour (V), Balasingerism (Post) Aliapurmes (ND, R.R. Dist. HYD-50* 525



1. The result of corrective action taken shall be submitted to KVQA CERTIFICATION SERVICES PRIVATELIMITED within I month after CAR issued. 2. The result of corrective action taken shall be verified by on-site audit (major nonconformity) or document review (minor nonconformity), if it is not made within 3 months re-audit will be require

5 PRINCIPAL Annamacharys Institute of Technology & Sciences Piglour (V), Betsmingerium (Post) illapurmuk (M), R.R. Dist. HYD-50* 555





PRINCIPAI Annamectarys Institute o Technology & Sciences Suppor (V), Bataningerson (Post)