

## Non-Conformance Report

|                            |                                         |
|----------------------------|-----------------------------------------|
| <b>NSF Customer Number</b> | C0569383                                |
| <b>Business Name</b>       | Pantonelli Kft                          |
| <b>Audit Address</b>       | Versec u. 9., Budapest, 1204<br>Hungary |

|                              |
|------------------------------|
| <b>Audit Date</b>            |
| 31-Aug-22                    |
| <b>Assessor</b>              |
| Tony Higginson               |
| <b>Assessor Number</b>       |
| R018895                      |
| <b>GAFTA Number: 1290845</b> |



**Standard:** Gafta Standard for Fumigation

**No non-conformances identified at this assessment**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                              |                                                                   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|-------------------------------------------------------------------|
| <p>The non-conformances recorded above were identified during this assessment. Where any non-conformances are required to be addressed through the submission of documentary objective evidence I will supply this to NSF Certification within the stated timescale. I agree to the enterprise being reassessed at any reasonable time to ensure continued conformance. I am aware that if admitted to the Scheme, I am required at all times to operate the enterprise in accordance with the requirements of the Scheme Standards, Scheme Rules and NSF Certification Regulations in such a way that will not bring the Scheme nor NSF Certification into disrepute. I confirm that the assessor observed all reasonable biosecurity measures and Health &amp; Safety requirements.</p> <p><b>I KNOW / DO NOT KNOW OF ANY CURRENT, PENDING OR PAST PROSECUTIONS WHICH MAY AFFECT THE ASSURED STATUS OF THE SITE(S) INCLUDED IN THIS REPORT</b></p> | <p><b>Member Signature:</b></p> <p><i>Nabir Zolhan</i></p>   | <p><b>First review signature &amp; date:</b></p>                  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <p><b>Assessor Signature:</b></p> <p><i>[Signature]</i></p>  | <p><b>Evidence reviewed, closed out signature &amp; date:</b></p> |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <p><b>Certificate to be issued signature &amp; date:</b></p> |                                                                   |