



# NQA MANAGEMENT SYSTEMS

## STAGE 2 PROCESS AUDIT REPORT

# REFUELS LIMITED

**VISIT NUMBER:**  
761268

**DATE OF OPENING  
MEETING:**  
22/05/2025

**THIS REPORT HAS  
BEEN PREPARED BY:**

**REGIONAL ASSESSOR:**  
Clare Braham

**CONTACT NUMBER:**  
07816113583

**EMAIL:**  
Clare.Braham@nqa.com

**APPLICABLE STANDARD(S):**

ISO14001:2015





## AUDIT REPORT PART A - EXECUTIVE SUMMARY

### Client Information

<b>Primary Contact:</b>	Steven Bell		
<b>Address:</b>	Bank Chambers, Canterbury Road Lyminge Nr. Folkstone Kent CT18 8HU		
<b>Contact Tel:</b>	07889 156148		
<b>Contact Email:</b>	bellsj@live.co.uk		
<b>Billing Contact:</b>	As above		
<b>Billing Tel:</b>	As above		
<b>Billing Email:</b>	As above		
<b>Audit Conducted at:</b>	Head Office (multi-site certification) <input checked="" type="checkbox"/>	Participating / Temporary Site (multi-site certification) <input checked="" type="checkbox"/>	Single Site Certification <input type="checkbox"/>
<b>Audit Conducted as:</b>	Fully On-Site <input type="checkbox"/>	Blended (On-Site / Remote) <input checked="" type="checkbox"/>	Fully Remote <input type="checkbox"/>
<b>System integration (integrated audits only):</b>	N/A		
<b>Additional information on integration (if required):</b>			
<b>Certificate expiry date(s):</b>	N/A Stage 2 only		
<b>Required changes to EAC or NQA Codes applied:</b>	No changes required		
	<b>At this location</b>	<b>Across all locations (Multisite)</b>	
Total employees	3	N/A	
Repetitive or parallel workers	50%		

Energy data only applicable for ISO 50001 audits. Further guidance available in ASR 47:2.1

**The date of the next audit is:** 14/05/2026 to 14/05/2026



## AUDIT REPORT PART A - EXECUTIVE SUMMARY

### Audit Information

<b>Total audit duration (in days):</b>	1.5 Days	<b>Duration conducted remotely (in days):</b>	0.5 day
<b>Scope of certification:</b>	<b>Misfuelling solutions including storage</b>  Scope is appropriate.		

#### Confirmation that audit objectives have been fulfilled: All objectives met.

*If no, which objectives have not been met including if remote auditing issues prevented the full completion of audit. Note that customers with installation/service activities within their scope must receive a minimum of one on-site visit once per cycle. Failure to achieve this may result in this activity being removed from the client's scope of certification.*

NQA Audit Team		Client	Position	Attendance
<b>Lead Assessor</b>	Clare Braham	Mike Taylor	Managing Director	Opening and Closing
		Steven Bell	IMS Consultant	Opening and Closing

*\* Mandatory attendance at OHSAS18001 / ISO45001 Audits. If these mandatory positions are not present at closing meeting, record and justify reasons in the Executive Summary.*

### Details of Changes

Type of action or change required	Action Required	Notes
Client Name Change:	<input type="checkbox"/>	
Change of Address:	<input type="checkbox"/>	
Scope Change:	<input type="checkbox"/>	
Contact Change:	<input type="checkbox"/>	
Number of Employees Change:	<input type="checkbox"/>	
Major NCs Raised:	<input type="checkbox"/>	
Special Visit Recommended:	<input type="checkbox"/>	
Remote Audit Issue:	<input type="checkbox"/>	
Other:	<input type="checkbox"/>	

## Executive Summary

This Stage 2 audit was conducted on site at Avonmouth with Mike Taylor and Steven Bell. The audit objectives were fully achieved via these means and ICT systems used were fully effective in achieving the audit objectives. An overview and tour of the sites was discussed and conducted with Mike Taylor

Refuels is the largest mixed fuels recovery company in the United Kingdom, offering solutions to fuel hauliers, retail forecourts, mobile fuel evacuation operators, insurers and the roadside recovery industry. They recover many millions of litres every year.

In addition to their own transport and managed collections they offer national coverage of 'drop off' points to allow their customers to conveniently and safely offload / decant mixed fuels on a 24/7 basis. They also offer a managed emergency fuel contamination re-mediation service for oil storage depots, retail forecourts, fuel bunkering sites and suppliers.

The Environmental Management System is established and developing well.

The scope is fully detailed within the EMS Manual and is in line with the requirements of the ISO14001:2015. This Stage 2 audit was carried out with the Document Review against ISO 14001:2015 completed to ensure Standard requirements have been met as a QMS.

The organisation's context is well defined, leadership has been effectively demonstrated and commitment levels are evident.

Scope agreed as appropriate to observed processes and activities.

Scope is confirmed as **"Misfuelling solutions including storage"**

Overall the organisation has demonstrated effective implementation and maintenance / improvement of its Integrated management system to meet its Environmental objectives."

Implementation and maintenance / improvement of the EMS is implemented and managed well with no Opportunity for Improvement and 0 Major or Minor Non Conformances were raised as a result of this audit.

The audit was carried out with access to all information, data and personnel freely and without any issues – all staff were particularly helpful and well versed in the knowledge of the audit process and the requirements of the standards as applicable to their areas of work. No obstacles were encountered that impact the validity of the audit conclusions, and no factors were encountered that reduce the reliability of the audit or its conclusions. Top management has shown its commitment to the EMS across the audit through setting the policy, objectives, targets and actions to achieve them. Equally, the risks and opportunities have been established and actions have been set.

The Environmental Management System was found to be in conformance with the requirements of ISO 14001:2015 and the client's internal procedures.

Certification to ISO 14001:2015 is recommended.

Thanks are passed to Mike and Steven and all the team for their time and assistance during this audit.

Major NCs	0	Minor NCs	0	OFIs	0	AoCs	0
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Is there any conflict of interest which exists between the Auditor(s) and the client, and are there any situations known to them that present themselves, or NQA, with a potential conflict of interest in respect to the audit undertaken.

No.

### Audit Conclusion

- This visit was Satisfactory: Continuation or granting of certification is recommended
- No findings have been identified
- Any findings are as detailed on the following page(s).

### Audit Follow-up Actions

The following post-audit action(s) shall be taken by the client: No action required.

**Please note that certification will not be granted, reissued or revised until all outstanding Non-Conformance responses have been submitted, and in the case of Major Non-Conformances, the evidence of corrective action has been provided to, and accepted by, NQA.**

For further information, useful guidance and further support for responding to audit findings, please visit <https://www.nqa.com/en-gb/clients/non-conformities>

### Management system performance, such as trends in audit findings that require further investigation at the next recertification audit.

Mandatory completion at the Head Office Audit of Surveillance Year 2

*Reviewed previous reports and no adverse trends identified.*



## AUDIT REPORT PART B – AUDIT REPORT

### Audit Findings

Ref No.	Clause No.	Details of any finding(s) raised.	Type (Major NC, Minor NC, OFI or AoC)
		None Raised	
		End of Findings	
Note: Responses to findings must be sent using the Corrective Action Plan form, as applicable, to <a href="mailto:caps@nqa.com">caps@nqa.com</a> within the timeframes stated on Page 5.			

## Closure of Findings from Previous Audit:

Report No. 761267, Dated 31/01/2025

Ref No.	Detail of finding and client action:			Outcome (Closed or Escalated)
	Clause	Summarise Action(s) Taken to Prevent Recurrence	Category	
01 CB	9.2	<p>A complete cycle of internal audits has yet to be conducted but is scheduled prior to the Stage 2 audit, reviewed the Audit Schedule for 2025.</p> <p><b>Reviewed:</b> A full internal audit was conducted and documents available and reviewed as part of the audit.</p>	AOC	Closed
02 CB	9.3	<p>A Management Review Meeting has not been conducted to date, however a meeting has been scheduled prior to the Stage 2 audit.</p> <p><b>Reviewed:</b> A Management Review meeting was conducted and minutes available and reviewed as part of the audit.</p>	AOC	Closed

### Opening and Closing Meetings

Opening and closing meetings were performed in accordance with Form 335. The objective of the audit was to confirm that the management system had been established and implemented in accordance with the requirements of the audit standards.

Confirmed no changes to system scope

No environmental incidents or complaints have occurred since the previous audit

No unusual operations scheduled during this audit.

No changes to company operations since previous audit.

No major customer complaints or health and safety complaints or issues with delivering contractual requirements have occurred since previous audit.

No RIDDORS or major accidents in the last year

No visits from the HSE on any of the sites within the last year.

No visits from the Environmental Agency on any of the sites within the last year.

Discussed approach to audit and availability of personnel.

Confirmed system scope, discussed and clarified business operations occurring on and off site and within the system scope.

Confirmed the client details

Scope is correct and confirmed as

**“Misfuelling solutions including storage”**

Address confirmed as correct at:

Bank Chambers,

Canterbury Road

Lyminge

Nr. Folkstone

Kent

CT18 8HU

No changes of significance to management structure since previous audit.

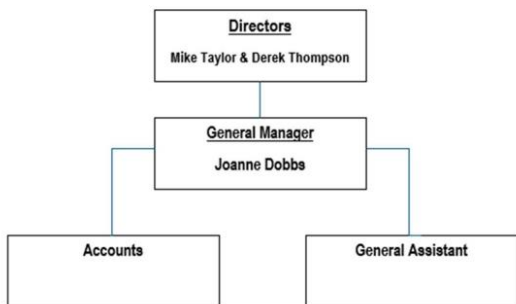
Reviewed previous report. No unusual activities scheduled.

No issues arising with adhering to Audit Plan as prepared.

Findings closed out as per previous page(s).



Process/audit area:	Organisational Context (External / Internal issues /interested parties / boundaries and scope / process identification)
<b>Auditees:</b>	Mike Taylor & Steven Bell
<b>Auditor (if applicable):</b>	Clare Braham
<b>Method of Audit</b>	On-site
<b>Evidence to support audit conclusion:</b>	
<p><b>4.0 Context of the Organisation / 4.1 Understanding the organisation and its context / 4.2 Understanding the needs and expectations of interested parties</b></p> <p>Context is referenced within the Refuels Environmental Management System Manual – Issue 1 dated December 2024. Context is described as - Refuels is the largest mixed fuels recovery company in the United Kingdom, offering solutions to fuel hauliers, retail forecourts, mobile fuel evacuation operators, insurers and the roadside recovery industry. They recover many millions of litres every year.</p> <p>Interested Parties are referenced within the Refuels Environmental Management System Manual – Issue 1 dated December 2024. They are detailed within the Interested Parties Needs and Expectations Register – Issue 1 dated December 2024. Interested Parties include – Sub-Contractors, Employees, Customers, Neighbours, Local &amp; Central Government, Management, Insurance Companies &amp; Banks.</p> <p>External issues – Detailed within EMS Manual (Issue 1 dated December 2024) include:            Political, economic, social, technological, legal and regulatory —            Laws changing, affecting product conformity, minimum wage changing            Overall economic performance in the country            Competitive environment — Cost of entry into the market            Changes in Technology - Introduction of EV's            Regulation and certification within the industry – Changing standards and visibility of the same to ensure compliance            Impact on neighbours – Pollution, (Noise, Waste Streams, Visual) Relationship            Carbon Footprint – Use (direct/indirect) of non-renewal fuels etc            Climate Change</p> <p>Climate Change has been considered within the internal &amp; external issues identified by the company.</p> <p><b>4.3 Determining the scope of the management system</b></p> <p>The scope of the EMS is detailed in Page 5 within the EMS Manual – Issue 1 dated December 2024. Scope determined as “<b>Misfuelling solutions including storage</b>”</p> <p>Refuels is the largest mixed fuels recovery company in the United Kingdom, offering solutions to fuel hauliers, retail forecourts, mobile fuel evacuation operators, insurers and the roadside recovery industry. They recover many millions of litres every year.</p> <p>In addition to their own transport and managed collections they offer national coverage of 'drop off' points to allow their customers to conveniently and safely offload / decant mixed fuels on a 24/7 basis. They also offer a managed emergency fuel contamination re-mediation service for oil storage depots, retail forecourts, fuel bunkering sites and suppliers.</p> <p><b>4.4 Management System</b></p> <p>The Environmental Management System manual details the IMS process diagram within the EMS Manual, which details the inputs &amp; outputs of the system.</p> <p>Director Mike Taylor with assistance from Steven Bell (HSEQ Consultant) have been involved in the developing of this management system and is fully confident that in having a management system that has been certified to ISO14001:2015, is the best way for the company to move forward.</p> <p>Mike Taylor (Director) has overall responsibility for the day to day running of the Environmental Management System.</p>	
<b>Conclusion of the overall effectiveness of the process:</b> Process / Audit Area is satisfactory	

<b>Process/audit area:</b>	<b>Leadership (Process based approach, risk based thinking, policy, identification of roles and responsibilities)</b>
<b>Auditees:</b>	Mike Taylor & Steven Bell
<b>Auditor (if applicable):</b>	Clare Braham
<b>Method of Audit</b>	On-site
<b>Evidence to support audit conclusion:</b>	
<p><b>5.1 Leadership &amp; Commitment</b></p> <p>A leadership interview was conducted with the Director – Mike Taylor. Mike Taylor demonstrated a clear commitment to the Environmental Management System, and to ensuring the system is fully resourced and embedded within the company. Clear consideration has been given to staff competence and critical staff role in delivering quality product to customers. Top management is supportive of ISO audit process as a means for continual improvement. There is a clear commitment to continual improvement within the company. The MD demonstrated that safety, environmental sustainability, and customer focus are at the forefront of the management philosophy, and a clear belief in importance of ISO for keeping the business targeted and focused on improvement.</p> <p>Discussed:</p> <ul style="list-style-type: none"> <li>• Engagement with system and driving Environmental Culture</li> <li>• Risk assessment process</li> <li>• Safety objectives</li> <li>• Environmental Objectives</li> <li>• Climate Change</li> <li>• Communication with Staff</li> <li>• Communication with Sub-Contractors</li> <li>• Incidents – no incidents within the last 12 months; management are committed to investigating and correcting actions</li> <li>• Communications – regular meetings and including an annual management review with worker representation</li> </ul> <p><b>5.2 Policy</b></p> <p>Environmental Policy is referenced within the EMS Manual Issue 1 dated December 2024. Refuels Environmental Policy (Issue 1 dated Dec 2024) is signed by Mike Taylor &amp; Derek Thompson (Directors). IMS Policy is communicated via Employee Induction, Company Noticeboards and Company Internet. The policy is available to interested parties upon request.</p> <p><b>5.3 Organisational roles, responsibilities and authorities</b></p> <p>Referenced on Page 10 of the EMS Manual – Issue 1 dated Dec 2024 and also within QP EMS Responsibilities Procedure, Issue 1 dated 01/12/2024 details an Organisational Structure detailing the lines of management within the company- details;</p>  <pre> graph TD     Directors["<u>Directors</u> Mike Taylor &amp; Derek Thompson"] --&gt; GM["<u>General Manager</u> Joanne Dobbs"]     GM --&gt; Accounts["Accounts"]     GM --&gt; GA["General Assistant"]   </pre> <p>Roles, responsibilities and authorities are defined and communicated and are referenced from the Job Description. These are communicated to all appropriate personnel during company induction and awareness training and also within staff meetings- no issues.</p>	
<b>Conclusion of the overall effectiveness of the process:</b> Process / Audit Area is satisfactory	

Process/audit area:	Planning and Support Processes
Auditees:	Mike Taylor & Steven Bell
Auditor (if applicable):	Clare Braham
Method of Audit	On-site
Evidence to support audit conclusion:	
<p><b>6.0 Planning – actions to address risk and opportunities</b></p> <p>The client has developed a Business Risk Register along with a SWOT / PESTLE Analysis – this is for all sites within the business. This determines the operational risks and opportunities that need to be addressed to give assurance that the Environmental achieves its intended results for enhancing desirable effects while preventing or reducing undesired effects, enabling the client to achieve improvement and customer satisfaction. Actions are planned to address risk and opportunities and how to integrate and implement the actions into its system processes. Effectiveness of these actions is evaluated during the annual management review meeting. The client ensures actions taken to address risk and opportunities are proportionate to the potential impact on the conformity of its products and people.</p> <p>Risks and Opportunities are detailed within the EMS Manual and within the SWOT/PESTLE Analysis (last reviewed and updated in 01/12/2024) which includes the following EMS Risks:</p> <p>Risks include:</p> <ul style="list-style-type: none"> <li>• Poor Environmental reputation.</li> <li>• Prosecutions, Fines, Adverse Publicity</li> <li>• Damage to facilities due to adverse weather conditions.</li> <li>• Increase in energy usage/cost</li> </ul> <p><b>6.1.2 Aspects</b></p> <p>A methodology has been established for the identification environmental aspects and impacts within QP Environmental Aspects Procedure, Issue 1 dated 01/12/2024 and also in the Register of Environmental Aspects dated December 2024. Aspects register has defined considerations to normal, abnormal and emergency conditions. Direct and indirect aspects have been identified, there is currently no significant environmental aspects, reviewed some of the highest rated aspects:</p> <ul style="list-style-type: none"> <li>• Transporting of product to/from storage tanks</li> <li>• Fuel (Diesel)</li> </ul> <p><b>COSHH materials held on site (Detailed within the Operational Site Visit)</b> – main COSHH hazard are cleaning chemicals.</p> <p>Reviewed the following procedure</p> <p>QP COSHH Procedure, Issue 1 dated 01/12/2024</p> <p><b>6.1.3 Compliance obligations:</b></p> <p>The company has identified its compliance obligations within Environmental Manual, Issue 1, dated December 2024</p> <p>Reviewed the following procedure</p> <p>QP Legal &amp; Other Compliance Procedure Issue 1 dated 01/12/2024.</p> <p>A Compliance register is currently at Issue 1 dated 06/01/2025. A sample of compliance obligations was taken:</p> <p><b>Environmental Legislation:</b></p> <p>Control of Pollution (Oil Storage) (England) Regulations 2001, Environmental Damage (Prevention and Remediation) (Amendment) Regulations 2010, Environmental Permitting (England &amp; Wales) (Amendment) (England) Regulations 2016, The Waste (England &amp; Wales) (Amendment) Regulations 2014, Hazardous Waste Regulations (England &amp; Wales) (Amendment) Regulations 2009 – (Amendment 2016) &amp; Environmental Protection Act 1990 Part III/ Noise Emissions in the Environment by Equipment for use Outdoors Regulations 2001</p>	

## 6.2 Objectives and planning to achieve them

The objectives are held within the Environmental Leading & Lagging dated 2024 & 2025 and include annual aims, short term (within a year), Medium aims (1 – 3 years) and Long Term Aims (3 – 5 years) and is updated on a monthly basis. Objectives are monitored and measured on an ongoing basis with formal review and the extent to which they have been achieved documented through annual management review meetings.

They have been designed to align with the company risk profile and cover all locations, they include:

- To monitor and record any environmental damage caused via product spills so as the circumstances can be suitably investigated and where necessary corrective actions put in place
- To ensure suitable preventative/proactive measures are in place to prevent spillages from our storage tanks

Refuels Environmental KPI's - 2025															
Leading & Lagging KPI's			Monthly Performance												
			Leading indicators are pre-incident measurements, as opposed to lagging indicators, which are measurements collected after an incident occurs. A key competent of leading indicators is that they are measurements of safety events or behaviours that precede incidents and have a predictive quality.												
Lagging KPI's			Objectives - To monitor and record any environmental damage caused via product spills so as the circumstances can be suitably investigated and where necessary corrective actions put in place												
Total Product Spillages	Target	Responsible Person	January	February	March	April	May	June	July	August	September	October	November	December	Totals
All Storage Sites	0	Directors	0	0	0	0									0
															0
Total Incidents			0	0	0	0	0	0	0	0	0	0	0	0	0
Leading KPI's			Objectives - To ensure suitable preventative/proactive measures are in place to prevent spillages from our storage tanks												
Storage Tank PM Inspections	Target	Responsible Person	January	February	March	April	May	June	July	August	September	October	November	December	Totals
1 x PM inspection per storage tank annually	27	Directors	0	0	0	0									0
															0
Total			0	0	0	0	0	0	0	0	0	0	0	0	0

## 6.3 Planning of changes

Changes to Management Documentation in detailed in the Environmental Manual & Management review minutes - covers management system change and process changes.

Also managed via management review process and individual product / service changes.

**Conclusion of the overall effectiveness of the process:** Process / Audit Area is satisfactory

Process/audit area:	Support Services
Auditees:	Mike Taylor & Steven Bell
Auditor (if applicable):	Clare Braham
Method of Audit	On-site
Evidence to support audit conclusion:	
<p><b>7.0 Support</b></p> <p>The organisation has determined and provided the resources needed for the establishment, implementation, maintenance and continual improvement of the management system including capabilities internally and what needs to be provided by external providers.</p> <p>The organisation has determined and provides the personnel necessary for the effective implementation of the management system.</p> <p>The organisation provides and maintains the infrastructure necessary for the operation of its processes. This includes buildings and associated utilities, equipment, information and technology.</p> <p>The organisation has provided and maintains the environment necessary for the operation of its processes.</p> <p><b>Building, Plant and Equipment Maintenance</b></p> <p>Reviewed records for the Building, Plant and Equipment as part of the Site Tour for each site individually – Detailed below:</p> <p><b>7.2 / 7.3 Competence / Awareness</b></p> <p>EMS Manual for Refuels details the requirements that the company has with regards to employing competent persons. The use of form Training record and also of document Job description, are used to determine if the potential employee has both the necessary qualifications &amp; where possible the experience to be able to fulfil the role.</p> <p>Upon commencing employment each employee is given an induction, this includes a formal communication and explanation of the key environmental / ISO 14001 elements. Thereafter training needs are monitored by management and addresses where needs are identified. At present all 3 employees are long standing members, no training has been identified or required at present or within the last 12 months.</p> <p><b>7.4 Communication</b></p> <p>Reviewed the following procedure: QP Communication Procedure, Issue 1 dated 01/12/2024</p> <p>External</p> <p>There has been no visits from the Environmental Agency within the last 12 months.</p> <p>The company has recorded no environmental incidents or complaints within the last 12 months.</p> <p>Internal – staff meetings, emails, noticeboards which involves all staff – Recruitment, environmental circulars / emails, management meetings (including Environmental items with minutes circulated to all appropriate staff) regular management review meetings and regular contractor meetings.</p> <p>Effectiveness of participation / consultation reviewed as part of Management Review</p> <p><b>7.5 Documented Information / Control of documents and records:</b></p> <p>A fully documented EMS management system is in place – the structure and interaction of the processes is shown in the manual. The documented system consists of manual, policies, procedures, registers and forms.</p> <p>Reviewed the following as part of the audit:</p> <p>EMS Manual, Issue 1 dated December 2024</p> <p>QP Communication Procedure, Issue 1 dated 01/12/2024</p> <p>QP Control of Records, Issue 1 dated 01/12/2024</p> <p>QP Control of Contractor and Visitor Safety, Issue 1 dated 01/12/2024</p> <p>QP Document Control, Issue 1 dated 01/12/2024</p> <p>QP Objectives &amp; Targets, Issue 1 dated 01/12/2024</p> <p>QP Responsibilities, Issue 1 dated 01/12/2024</p> <p>QP Internal Audits, Issue 1 dated 01/12/2024</p> <p>QP Legal &amp; Other Compliance, Issue 1 dated 01/12/2024</p>	



## AUDIT REPORT PART B – AUDIT REPORT

QP Management Review, Issue 1 dated 01/12/2024  
QP COSHH Procedure, Issue 1 dated 01/12/2024  
QP Fire Safety Procedure, Issue 1 dated 01/12/2024

Environmental Policy is referenced within the EMS Manual Issue 1 dated December 2024. Refuels Environmental Policy (Issue 1 dated Dec 2024) is signed by Mike Taylor & Derek Thompson (Directors). IMS Policy is communicated via Employee Induction, Company Noticeboards and Company Internet. The policy is available to interested parties upon request.

### **Control of Documents / Records**

Management Documentation is detailed in the Environmental Manual, Issue 1 dated December 2024. The documented management system is retained on a shared drive on main computer system which is backed up as part of the main back up routine. All policies & manual are approved and controlled prior to issue. A number of records were reviewed and observed during the audit including for example; training records, internal audit records, meeting minutes, reports, objectives, client enquiry requirements, purchase orders etc. All records were well controlled, authorised and readily retrievable / supplied during the audit. The company keep up to date with all changes within the industries in which they serve by continual updating and checking of external regulations and legislation that is applicable to them – register of external standards & legislation including for example: British standards etc.

**Conclusion of the overall effectiveness of the process:** Process / Audit Area is satisfactory



Process/audit area:	Site Tour (Avonmouth): Operational Controls, Resources and Documented Information
Auditees:	Joanne Dobbs, Mike Taylor & Steven Bell
Auditor (if applicable):	Clare Braham
Method of Audit	On-site
Evidence to support audit conclusion:	

## Site Tour

A site tour was conducted with Mike Taylor & Steven Bell, which included a review of tank, fueling process, - the company do not own any premises and all tanks are located within truckstops (OnRoute Truck Stop which was visited this time), Refuels have no control over emergency equipment, processes or procedures on these sites. AA use the tank at Refuels to empty and store the mix fuel.

## 8.0 Operation



Refuels currently have 24 tanks, over 24 sites, the company use telemetry to monitor the levels in each tank.

Group: Fuel Access				Tank
<input checked="" type="checkbox"/> +All	Name	Address	Fuel Level	
Search for Name/Address				
All Tanks Total: 59445		All Selected Total: 0		
U: 36.42	G: 97.03	D: 47.64	K: 94.45	
RF01		3553	18.2°C 28V	
RF02		293	18.2°C 25.7V	
RF03		5855	19.8°C 27.4V	
RF04 New 2		1980	19.6°C 26.1V	
RF05		2658	17.3°C 25.1V	
RF06		3710	0°C 23.9V	
RF07		1783	19.6°C 25.8V	
RF08		3783	16.7°C 25.9V	
RF09		4097	18.4°C 25.4V	
RF10 New		284	16.2°C 24.4V	
RF11		1104	19.7°C 24.9V	
RF12		4807	18.2°C 25.6V	
RF13 New		5127	16.3°C 25.9V	
RF14		3073	17°C 26.3V	
RF15		914	18.5°C 25V	
RF16		1102	17.5°C 21.2V	
RF17		2110	17.5°C 24.7V	
RF19		1262	57.7°C 25.2V	
RF20		4162	17.9°C 26.3V	
RF21		301	0°C 26V	
RF22		937	15.9°C 25V	
RF23		2065	16.8°C 27.5V	

Loading Plan – Avonmouth RF03 going to Regroup Hull  
5855 litres in Avonmouth Tank  
Safe working load of 13500L with a capacity of 15000L.

## Waste Records & Maintenance Records

The documentation included:

QP Control of Records, Issue 1 dated 01/12/2024

Waste Volumes for each site – updated on a real-time basis

- The only waste is Mix of Fuels (Petrol mixed with Diesel)

Sampled the following waste transfer documentation – All waste removed and managed by 2 sub-contractors (Gary Lodge Tankers and AJAK Energy)

Loading Plan: RFLP19118-BS11  
Consignment Note: REFU01/19118  
Volume: 5000L  
EWC Code: EWC130703  
Description: Petrol mixed with Diesel  
Collected By: Gary Lodge Tankers  
Waste Carrier: CBDU525387  
Taken To: ReGroup (Reclaim) Ltd Refinery

Loading Plan: RFLP19110-BS11  
Consignment Note: REFU03/19100  
Volume: 3000L  
Collected from: Avonmouth RF03  
Collected: 19/05/2025  
EWC Code: EWC130703  
Description: Petrol mixed with Diesel  
Collected By: AJAK Energy Ltd  
Waste Carrier: CBDU522368  
Taken To: ReGroup (Reclaim) Ltd Refinery

Loading Plan: RFLP19072  
Consignment Note: WILLEN/19072  
Volume: 1656L  
Collected from: Willenhall Commercials  
Collected: 13/05/2025  
EWC Code: EWC130703  
Description: Petrol mixed with Diesel  
Collected By: AJAK Energy Ltd  
Waste Carrier: CBDU522368  
Taken To: ReGroup (Reclaim) Ltd Refinery

## 8.4 Control of externally provided process, products and services

Reviewed the following purchase orders & approved supplier list with Steven, Mike & Joanne

QP Control of Contractor and Visitor Safety, Issue 1 dated 01/12/2024

The company only have two contractors. AJAK Energy & Gary Lodge Tankers

AJAK Energy, Waste Carrier License CBDU522368 valid from 14/02/2024 to 14/02/2027

Gary Lodge Tankers, Waste Carrier License CBDU525387 valid from 05/03/2024 to 05/03/2027

ReGroup Permit No EPR/HP3398EQ, Variation V007

**COSHH materials held on site** – The company do not have any chemicals on site except for the fuel itself.  
All tanks are supertanks and are double bunded.

**Conclusion of the overall effectiveness of the process:** Process / Audit Area is satisfactory



Process/audit area:	Performance Evaluation and Improvement Processes														
Auditees:	Mike Taylor & Steven Bell														
Auditor (if applicable):	Clare Braham														
Method of Audit	Blended (on-site and remote)														
Evidence to support audit conclusion:															
9.1 Performance evaluation, monitoring, measurement, analysis and evaluation															
The following are reviewed internally – service conformity, customer satisfaction, performance and effectiveness of the management system, planning, the effectiveness of the actions taken to address risk and opportunities, performance of suppliers and the need for improvements to the health & safety management system.															
The Environmental targets and objectives are monitored for complaints, incidents & volume of fuel - objectives reviewed on a monthly basis but also as part of the management review process for progress / development.															
EMS															
Due to the small number of employees who are home based, associated waste streams and energy use is nominal and justified as not recorded. Power to the Supervault Tankers is solar powered.															
Refuels Environmental KPI's - 2025															
Leading & Lagging KPI's		Monthly Performance													
		Leading indicators are pre-incident measurements, as opposed to lagging indicators, which are measurements collected after an incident occurs. A key component of leading indicators is that they are measurements of safety events or behaviours that precede incidents and have a predictive quality.													
Lagging KPI's															
Objectives - To monitor and record any environmental damage caused via product spills so as the circumstances can be suitably investigated and where necessary corrective actions put in place															
Total Product Spillages	Target	Responsible Person	January	February	March	April	May	June	July	August	September	October	November	December	Totals
All Storage Sites	0	Directors	0	0	0	0									0
															0
Total Incidents			0	0	0	0	0	0	0	0	0	0	0	0	0
Leading KPI's															
Objectives - To ensure suitable preventative/proactive measures are in place to prevent spillages from our storage tanks															
Storage Tank PM Inspections	Target	Responsible Person	January	February	March	April	May	June	July	August	September	October	November	December	Totals
1 x PM Inspection per storage tank annually	27	Directors	0	0	0	0									0
															0
Total			0	0	0	0	0	0	0	0	0	0	0	0	0
Reviewed the Waste Tonnage Return to Environment Agency for Jan – March 2025, Permit Number HWRET00156. Running total of 127.25tonnes															
9.1.2 Evaluation of compliance															
Evidence of compliance is achieved through:															
Internal Audit process Legal Compliance Audit – audit conducted on 6 <sup>th</sup> & 7 <sup>th</sup> May 2025 by Steven Bell															
Annual review of recorded compliance indicators in the registers															
Formal evaluation report recorded on registers dated 06/01/2025															
Results reported to annual management review meeting and recorded in minutes															
Method of evaluation of compliance continues to be considered effective and appropriate															
9.2 Internal Audit															
QP Internal Audit Procedure, Issue 1, last reviewed 01/12/2024															
The 2025 audit schedule is in place and all audits have already been completed as per plan.															
Reviewed the following:															
ISO 14001: 2015 requirements audit of all of the standard was completed between 6 <sup>th</sup> & 7 <sup>th</sup> May 2025 by Steven Bell.															
9.3 Management Review															
QP Management Review, Issue 1, last reviewed 01/12/2024															
A management review meeting was held on 16/05/2025 attended by: M Taylor (Director), J Dobbs (General Manager) & S Bell (QHSE Consultant).															
The minutes were reviewed and indicate that the management review had considered all clause requirements and supports monitoring of the EMS Management System and continual improvement. Key areas covered included for example:															
External & Internal issues															

Interested parties  
 Risk & Opportunities  
 Review of Objectives and planning of new objectives  
 EMS Performance - (N/C & C/A), monitoring & measuring results,  
 Compliance obligations – reviewed and noted as compliant following legal register reviews, inspection results and audit results  
 Complaints & Incidents  
 Strategic Strategy, Leading & Lagging Tables  
 Internal audit results  
 Subcontractors / Suppliers  
 Adequacy of resources - people, equipment, staff competency and training etc.  
 Continual improvement / opportunities

## 10.0 Improvement

Opportunities for improvements are identified through internal audits, review of corrective actions in order to improve the suitability, adequacy and effectiveness of the management system to enhance EMS performance. Where necessary the risks and opportunities are determined during planning that are addressed through continual improvement.

## 10.2 Nonconformity and corrective action

Non-Conformances, Customer Complaints, Corrective Actions:

Any issues raised either at site or in the office are transferred onto a Non-conformance report. This includes sections for:

- Internal Audits
- External Audits
- Customer Complaints
- Environmental Complaints
- Accidents / Incidents / Near Misses
- Environmental Incidents
- Internally triggered Improvements

To date there has been no issues raised.

## 10.3 Continual improvement

Activities for continuous improvement are captured in:

Registers of risks and opportunities / Company objectives & targets / Internal audits / Management review minutes. Some of the main areas of continual improvement include for example:

Continually working with contractors  
 Monitoring Tank Usage

**Conclusion of the overall effectiveness of the process:** Process / Audit Area is satisfactory

## Use of Registration Marks and Logos

Use of Registration Mark (if used) is in accordance with the Rules of Registration	Yes
<i>Detail if required</i> Reviewed website, internal documents & email signatures, logo's are not currently in use. However made client aware of the requirements.	

### Example of the current NQA logos:

ISO 9001 (UKAS Accredited)



ISO 9001 (UKAS Accredited) with 'UKAS Tick and Crown'



More information can be found at: <https://www.nqa.com/en-gb/clients/logo-library>

If there are inaccuracies, errors or queries regarding this report or audit findings, please contact NQA Head Office on 0800 052 2424 within five working days of the closing meeting.

## End of Audit



## AUDIT REPORT PART C – AUDIT PLAN

**Client Name:** Refuels Limited

**Location address or post code:** Bank Chambers, Kent

**This plan relates to the forthcoming:** Surveillance visit

**Applicable standard(s) or supporting criteria:** ISO 14001:2015

**Site Scope:** Misfuelling solutions including storage

Date	Date 14/05/2026		
Role	Lead Auditor Clare Braham	Method	
Time	Location / Department / Function	On-site	Indicative Records / People Required
09.00	Opening Meeting & Review previous report (Head Office)	On-site	
09:15	Leadership & Commitment	On-site	Overview of the Organisation, Changes etc
09.30	Context, interested parties, scope, Policy, H&S, Risks & Opportunities, planning, KPI's, Targets, Objectives, Internal Audits, Management Review, Complaints	On-site	Manual, Policies, SWOT Analysis, Risks & Opportunities Internal Audits Management Review Minutes CAPA KPI's
11:00	Legal & Compliance Checks Environmental Aspects	On-site	Legal Register Compliance Checks Environmental Aspects
13.00	Lunch	On-site	
13.30	Site Tour including COSHH, Control of Contractors,	On-site	COSHH Waste Carrier License
14.30	Follow up records for Waste Consignment Notes & Control of Contractors	On-site	Waste Consignment Notes
16.00	Closing Meeting	On-site	
17.00	Close of Audit		



## AUDIT REPORT PART C – AUDIT PLAN

The objectives of the audit will be:

- To confirm that the management system had been established implemented and maintained in accordance with the requirements of the audit standard.
- To evaluate the ability of the management system to ensure the client organisation meets applicable statutory, regulatory and contractual requirements. Note: A management system certification audit is not a legal compliance audit.
- To evaluate the effectiveness of the management system to ensure it is continually meeting its specified objectives
- To identify as applicable, areas of the management system for potential improvement

The audit scope describes the extent and boundaries of the audit, such as physical locations, organisational units, activities and processes to be audited.

Where the initial or re-certification process consists of more than one audit (e.g. covering different locations), the scope of an individual audit may not cover the full certification scope, but the totality of audits shall be consistent with the scope in the certification document.

### Rescheduling

In the event that rescheduling cannot be avoided, or unforeseen circumstances arise, please contact NQA as soon as possible. Please note that cancellation fees may apply. Rescheduling may also result in the suspension or expiry of certification if audits are not undertaken within prescribed timeframes. Information related to rescheduling is detailed on your audit confirmation and in the NQA Rules Related to Registration available on the NQA website.

### Remote Audits

Where elements of the audit are to be conducted remotely this is detailed on the audit plan. NQA will plan to deliver the audit using the tools outlined below. If you anticipate issues facilitating an audit using the listed tools, please contact your auditor at your soonest convenience.

- Video conferencing via Microsoft Teams (hosted by NQA)
- Document transmittal via email or screen share using Microsoft Teams
- Video calls using either Microsoft Teams or equivalent technology (such as Zoom, WhatsApp, FaceTime)
- Alternative platforms can be supported subject to prior arrangement with the NQA Lead Auditor and technology compatibility



## AUDIT REPORT PART D – AUDIT MATRIX

Relevant Standard/Supporting Documentation:	ISO 14001:2015;				
<ul style="list-style-type: none"> <li>This audit programme is to be prepared by the Lead Auditor at the completion of the Stage 2 audit or the Recertification audit. It should be replicated in all subsequent surveillance visit reports.</li> <li>Where an element(s) of the programme cannot be completed at a given visit the programme shall be amended and up-issued accordingly to ensure coverage at the following visit.</li> <li>Site visits are to be included in the programme with a clear indication as to the processes intended to be sampled.</li> </ul>					
Type of visit	Stage 1	Stage 2	Surveillance 1	Surveillance 2	Recertification
Visit Due Date (MM/YY)	31/01/2025	22/05/2025 23/05/2025	14/05/2026	May 2027	April 2028
Mandatory Elements / Selected Processes	Processes / elements to be audited are to be indicated as to be conducted either Remotely or Onsite. All processes are to be audited during a three-year certification cycle excluding the re-certification visit.				
Context of the organization	Complete, remote	Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
Leadership	Complete, remote	Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
Planning	Complete, remote	Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
Support	Complete, remote	Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
Performance evaluation	Complete, remote	Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
Improvement	Complete, remote	Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
Use of marks and references to certification / Client website	Complete, remote	Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
Site Tour	Complete, remote	Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
Operations Processes (specify detail from scope)					
• Site Tour		Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
• Training & Competence		Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
• Supplier & Sub Contractor Controls		Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
• Waste Consignment Notes		Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
Processes for review at work sites (Specify)					
• N/A					
Non-Core Shifts to be Audited (non-core shifts to be audited minimum of 1 per cycle)					
• N/A					
Client Locations to be visited (Specify)					
• N/A					
Audit trails will be developed based upon identified risk throughout the audit and as such timings and content may be subject to change. Where the client operates shifts, the activities that take place during shift working shall be considered when developing the audit programme					

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APPROVED TRAINING PARTNER



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NQA certified clients are authorized and encouraged to use NQA logos to promote their certification achievements.

**Access all NQA logos here:**

<https://www.nqa.com/en-gb/clients/logo-library>



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