Arlington Fleet Group Ltd

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Environmental input comprises the standard requirements from ISO 14001:2015 which provides Arlington Fleet Services Ltd with a framework to help protect the environment and respond to changing environmental conditions in balance with socio-economic needs.

Environmental Management Systems Manual

ISO 14001:2015 EMS

AFSL-EMS-Manual
2nd Edition Issue 4
31st July 2024

Arlington Fleet Services Limited
Registered in England No. 4979804
Registered Office: Gate 2A, The Rail Works, Campbell Road, Eastleigh, Hampshire, SO50 5AD

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Preliminary pages

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1.0 Contents

Contents

2.0 Revisions
document is reviewed to ensure its continuing relevance to the systems and processes that it describes.

A record of contextual additions or omissions is given below:

Version	Date	Reason for Change	Name	Authorised By
1st Edition Issue 1	30/4/2020	Initial issue	Ryan Fox	Directors
2nd Edition Issue 1	5/6/2021	New Edition Issue 1	Ryan Fox	Directors
2nd Edition Issue 2	30/6/2022	Yearly review	Chad Padda	Directors
2nd Edition Issue 3	31/7/2023	Yearly review	Chad Padda	Directors
2nd Edition Issue 4	31/7/2024	Yearly review	Chad Padda	Directors

3.0 Authorisations

Name			Date
Barry Stephens		Managing Director	31/7/2024
John Campbell		Systems Director	31/7/2024

Environmental Management System

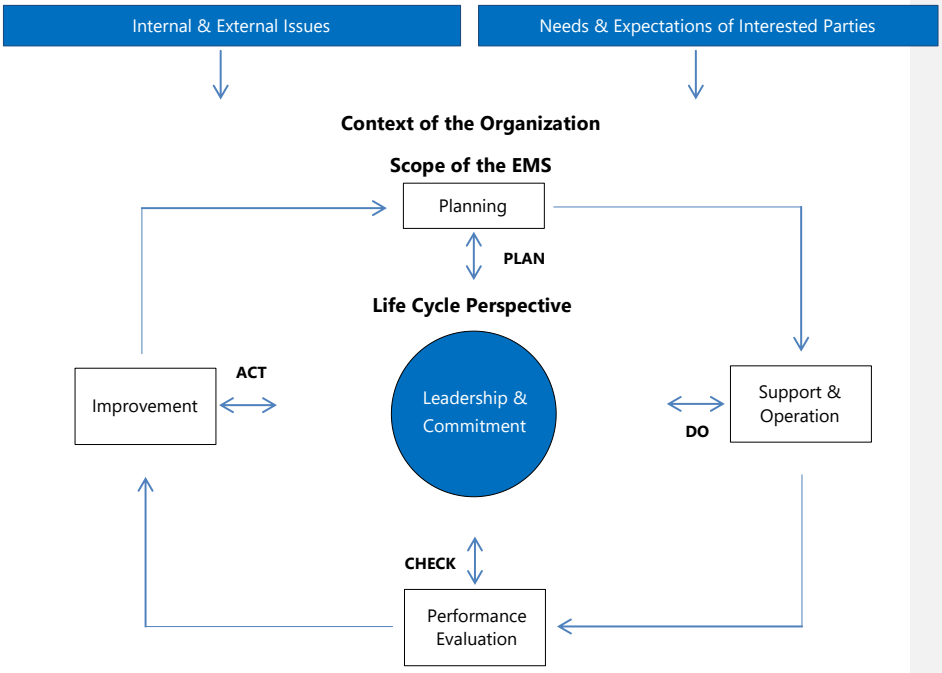
1.0 Introduction

Arlington Fleet Services Ltd (AFSL) has developed and implemented an Environmental Management System (EMS), which uses ISO 14001:2015 as a framework that allows our organization to document and improve our environmental practices in order to satisfy better the needs and expectations of our customers, stakeholders and interested parties. Arlington Fleet Services Ltd is committed, through our environmental policies, to the operation of an EMS that elicits the following intended outcomes:

1. Enhance environmental performance by protecting the environment by preventing or mitigating adverse environmental impacts;
2. Fulfil compliance obligations by mitigating potential adverse effects of environmental conditions;
3. Achieve environmental objectives by controlling or influencing the way our organization's products and services are designed, manufactured, distributed, consumed and disposed.

The figure below illustrates our methodology for the development of our EMS, using the plan, do, check and act process approach, to implement and deliver management system objectives, stakeholder requirements and environmental compliance.

Figure 1: ISO 14001:2015 EMS & PDCA Interaction



Certification to the international standard ISO 14001:2015 will help achieve these intended outcomes and its interested parties. Our EMS demonstrates that the EMS is effective, provides value for the environment, Arlington Fleet Services Ltd and addresses and supports our wider strategies for the design, development, manufacturing, installation and service of our products. Arlington Fleet Services Ltd, Rail Works, Campbell Road, Eastleigh, Hampshire. SO50 5AD.

Arlington Fleet Services Ltd provides the provision of repair and maintenance of railway traction and rolling stock. We also facilitate the storage and disposal of traction and rolling stock.

The company comprises a grouping of experienced, technical, railway professionals and operates a philosophy of offering timely, innovative and practical solutions and assistance to its customers. While safety will, of course, always be the final arbiter, the company is always willing to tailor its services to each customer's individual requirements and to consider or suggest novel or unusual approaches and solutions to customers' problems.

The company mainly operates within the Rail Works in Eastleigh. This is a 46 acre site and the main building dates back to 1909, when it was constructed by London & South Western Railway Company Limited for the purpose of manufacturing and overhauling steam locomotives. The site is connected by rail to the national network and can receive and despatch trains 24/7, 365 days per year, except when Network Rail shut lines down for engineering work and most Christmas days.

The workshops are designed to receive rail vehicles singly or in train formation, and have the facilities for lifting rail vehicles complete and also for inspecting beneath and above vehicles. Surrounding these facilities are support services for general engineering of components such as welding bays, lathes, grinding machines, electrical supplies, compressed air, etc. There are also three body and paint refinishing workshops specifically designed and built by Arlington to provide superior external finishing and branding.

One of the primary services that AFSL provides is overhaul. This may be an overhaul of complete vehicles or parts thereof. Overhaul specifications vary between clients as the level of work is directed by the usage of the vehicle and the aspirations of longevity and reliability.

AFSL became operational in January 2004 and currently employs 118 employees.

This EMS manual is used to familiarise our customers, interested parties, or individuals with the controls that have been implemented and to assure them that the integrity of our EMS is maintained and is focused on meeting its intended outcomes.

This manual also describes the structure and interactions of our EMS, delineates authorities, inter-relationships and responsibilities of personnel who operate within the boundaries of Arlington Fleet Services Ltd.'s Environmental Management System. The manual also references procedures, processes and activities that comprise our EMS.

2.0 References

In addition to ISO 14001:2015 we also make reference to other relevant British and/or international standards as well as customer specifications appropriate to our products and market.

Standards	Title	Description
BS EN ISO 14004:2016	Environmental management systems	Guidelines for implementation
BS EN ISO 19011:2018	Auditing management systems	Guidelines for auditing

3.0 Definitions

This document does not introduce any new definitions but rather relies on the following:

a. Terms typically used in standards and regulations as they relate to our EMS or products;
b. Standard business terminology and terms and vocabulary commonly used in our industry.

4.0 About Our Organization

4.1 Organizational Context

Arlington Fleet Services Ltd is committed to defining our position in the marketplace and understanding how relevant factors arising from internal and external issues influence our strategic direction, our organizational context, or the ability of our EMS to achieve its intended outcomes. Such issues include factors that are capable of being affected by, or capable of affecting our organization. Broadly, these issues are defined as:

4.1.1 **Internal issues** – conditions related to our organizational activities, products, services, strategic direction, culture, people, knowledge, processes and systems. Using SWOT analysis provides our organization with a framework for reviewing and evaluating our strategies, the position and direction of our organization, business propositions and other ideas;

4.1.2 **External issues** – conditions related to cultural, social, political, legal, regulatory, financial, technological, economic, and competition at local, national or international levels. Using PESTLE analysis provides our organization with a framework for measuring our market and growth potential according to external political, economic, social, technological, legal and environmental factors;

4.1.3 **Environmental issues** – conditions related to climate, air quality, water quality, land use, natural resource availability or biodiversity that can either affect our organization's purpose or be affected by our environmental aspects and impacts, which Arlington Fleet Services Ltd must manage.

Although we acknowledge that ISO 14001:2015 does not require our organizational context to be maintained as documented information, we maintain and retain, in addition to this document, the following documented information that

describes our organizational context:

1. *SWOT Analysis Templates* for **internal issues**;
2. *PESTLE Analysis Templates* for **external issues**;
3. *Environmental Aspects & Impacts Registers* for **environmental issues**;
4. Business plans, strategy documents, operational procedures;
5. Analysis of technology and competitors;
6. Technical reports from experts and/or consultants;
7. Minutes of meetings, process maps and reports, etc.

Arlington Fleet Services Ltd collates and assesses information about these influential factors to ensure that a continual understanding of the relevance of each factor is derived and maintained. To facilitate the understanding of our context, we regularly. consider issues that influence our business during management review meetings, the results of which are conveyed via minutes and business planning documents.

The output from this activity is evident as an input to determining the scope of our EMS (Refer to Section 4.3) and its processes (Refer to Section 4.4), as well as, the consideration of risks and opportunities that may affect our EMS, and the resulting actions that we take to address them (Refer to Section 6.1).

4.2 Relevant Interested Parties

Arlington Fleet Services recognises that we have a unique set of interested parties whose needs and expectations (requirements) change and develop over time. Only a limited set of requirements are relevant to our EMS and are considered and managed as a compliance obligation. The criteria for Arlington Fleet Services Ltd.'s compliance obligations include the following parameters:

1. All relevant legal requirements;
2. All corporate requirements imposed by upper levels of our organization;
3. All relevant requirements of relevant interested parties that our organization decides to comply with. These may either be contractual (customers) or voluntary (environmental commitments).

By asking 'how the interested party (or their requirements) might affect AFSL's ability to achieve the intended outcomes of our environmental management system?' we are able to determine and document the relevant interested party requirements.

Figure 2: Types of Interested Party

Although not specifically required by ISO 14001:2015,
Arlington Fleet Services Ltd maintains an Interested Party Matrix that aligns a list of relevant interested parties to their corresponding needs and expectations;
with an indication of which of these has been accepted by AFSL as a compliance obligation. Such needs and expectations, and whether they are critical to the success of our EMS, broadly include the examples shown in the table below.

The outputs from this process are typically used to inform the following sections and processes of the EMS:

1. 4.3 Management system scope;
2. 4.4 Management system processes;
3. 6.1.1 Actions to address risk and opportunities that affect the EMS;
4. 6.1.2 Environmental aspect and impacts;
5. 6.1.3 Compliance obligations;
6. 7.4 Communications.

Interested Party	Requirements	EMS Critical Yes / No	Compliance Obligation
Customers	Supply of goods and services to specification	Yes	Contractual N/A
Employees	Continued employment Safe working environment	Yes	Contractual
Regulatory	Compliance with the law and regulatory reporting	Yes	Legal
Community	Social responsibility	Yes	Voluntary

4.3 Management System Scope

Based on the scope of our activities described in Section 1 - Introduction and the analysis of the issues and requirements identified in Sections 4.1 and 4.2, AFSL has established the scope of our environmental management system in order the implement the objectives and policies that are relevant to our context, physical and organizational boundaries, product life-cycles and any interested parties.
Arlington Fleet Services Ltd is able to exert authority and differing levels of control and influence over our activities as they relate to our products and services, as performed at our facilities. The functional and organizational boundaries for the different physical locations (where applicable) and the level of control and influence are summarised below:

Physical Boundary	Functional Boundary	Organizational Boundary	Authority to Control or Influence
Our facilities at the following address: Rail Works, Campbell Road, Eastleigh, Hampshire.SO50 5AD	All activities performed and managed by our organization which result in product or service outputs	Complete organizational control over current activities	We have a high degree of authority in order to control or influence related processes. 3rd. Parties are controlled and influenced through contractual mechanisms
External process performed by 3rd. parties	Undertaking process as per our specifications	Purchasing and contractual controls	

In order for our EMS to be robust, all the activities, products and services undertaken at the facilities at Campbell Road are included within the scope of the EMS. In this way, we are able to control and influence our activities and services.

The scope of this document describes our EMS, delineates authorities, inter-relationships and responsibilities of process owners and personnel that operate within the management system and the sequence and interaction of our processes. Conformance to ISO 14001:2015 has been verified utilizing a formal assessment and review process undertaken by Lloyds Register.

Although we recognize that ISO 14001:2015 does not require a formal manual, we have decided to retain and update our EMS manual, as our employees, customers, suppliers and other stakeholders perceive it to add value to our operations.

4.4 Management System Processes

Arlington Fleet Services Ltd EMS and its processes are designed around the principle of continual improvement and adoption of the process approach methodology, using the Plan, Do, Check and Act cycle. The EMS manual generally follows the layout and high-level structure of ISO 14001:2015 In order to achieve our intended outcomes, AFSL has implemented an environmental management system; based upon sound management principles, which is integrated with the key day-to-day management activities that our organization undertakes. It also exists as part of a larger strategy to establish, document and communicate our processes, their interactions, our policies and objectives; whilst satisfying the requirements of ISO 14001:2015.

EMS processes are defined to address:

1. Supplier, manufacturer, internal and external issues;
2. Material, resource and energy usage;
3. Waste and emissions generation;
4. Design, operation, production and logistics;
5. Activities, products, and services;
6. Customers and end-users.

An environmental review is conducted every three years ahead of re-certification to determine any changes to Arlington Fleet Services Ltd which may affect the intended outcomes of our EMS. In addition, to meet the requirements of ISO14001:2015, AFSL also determines any changes to our internal and external context in which we operate (Refer to Section 4.1) and the changing needs and expectations of interested parties (Refer to Section 4.2).

Process controls are defined by tools and documents, such as; documented procedures, process maps, flow diagrams, matrices, schedules, and charts, etc. Refer to the EMS Process Map located in Appendix A.2 that shows the processes and the interactions that allow our organization to establish, implement, maintain and continually improve our management system.

The effectiveness and integration of each process and its subsequent output is measured and evaluated through regular internal audits, inspections and data analysis. The monitoring of key performance indicators (KPIs) which are linked to our objectives is used to measure and communicate process performance. This approach allows Top management to regularly review the EMS to ensure its ongoing integration within the business.

As part of the decision-making process, we use trends and statistical data related to non-conformities, environmental aspects, obligations, targets, objectives and corrective actions, as well as monitoring and measurement results, audit results and compliance data, to ensure that objective and responsible management decisions are made.

5.0 Leadership & Governance

5.1 Leadership & Commitment

The Company directors provide positive leadership for implementing and maintaining our EMS, including the development and deployment of our business strategies, our corporate policies, objectives, targets, and product or project-specific plans. The Company directors provide accountability and governance to all activities related to the lifecycle of our processes and products. This includes defining the appropriate responsibilities, authorities, and methods of communication to ensure the safe and effective performance.

The Company Directors ensure that all necessary PDCA Cycle resources, responsibilities and accountabilities are allocated for the continual improvement of the EMS.
Refer to Appendix A.3 for a copy of our Organization Chart.
The Company Directors have appointed a Safety, Health, Environmental and Quality Manager (HSQE) to ensure that the necessary financial, technological and organisational resources, including the services of specialists and competent Environmental Advisors, are available to implement, monitor and maintain the EMS as required.
A Cross-functional committee has been established that comprises personnel from all organizational levels, functions and work areas to support the management of the EMS. The Cross-functional committee oversees the development of objectives and the implementation of improvement plans. The Cross-functional committee reports to the HSQE Manager. Arlington Fleet Services Ltd.'s governance structure

Figure 3: Leadership

Provides the necessary support for creating and establishing processes that are important for achieving our EMS objectives, targets and policies by using the PDCA approach shown in Figure 3 opposite.

Governance activities include the systematic verification of EMS effectiveness by undertaking internal audits and analysing performance data, reviewing trends and KPIs. Regular reviews and data reporting ensure that our EMS is effective and has the ability to react to emerging issues. The Company directors are committed to implementing and developing the EMS and this commitment is defined by our corporate policies and objectives. Evidence of Top management's involvement and commitment may be found in:

1. Business strategy plans and meetings;
2. Environmental goals and their communications and their incentivisation;
3. Information provided on our website or social media channels;
4. Annual reports;
5. Management meeting minutes.

Company Directors, General Manager and Senior Production Manager ensure that our corporate policies are understood, implemented and maintained throughout at all levels of the organisation through printed distribution of policy statements and through periodic management reviews of the policy statements, functional objectives, and corporate level improvement objectives. Arlington Fleet Services Ltd communicates our mission, vision, strategy, policies and processes to all employees in order to:

1. Create and sustain shared values of fairness and ethical behaviour;
2. Establish a culture of trust and integrity;
3. Encourage commitment to environmental issues;
4. Provide people with the required resources, training and authority to act with accountability;
5. Inspire, encourage and recognise people's contribution.

In addition, our corporate policies, objectives and targets are communicated and deployed throughout the business via individual, team and department performance objectives, which are established and discussed during employee performance reviews.

5.2 Environmental Policy

The environmental policy acts as a compass by providing the direction and framework for establishing key corporate-level performance measures, as well as related objectives and targets. Top management ensures that our corporate policies are established and documented and that the policies are available to all interested parties via our website.

The HSQE Manager, in conjunction with the Systems Director, has overall responsibility for defining, documenting, implementing and reviewing our environmental policy in consultation with the management teams and other personnel or their representatives. The policy is reviewed at least annually, as part of the management review programme or at a frequency determined by:

1. Changes in organisational context (Refer to Section 4.1);

2. Changing needs and expectations of relevant interested parties (Refer to Section 4.2);
3. Environmental aspects that are presented through the planning process (Refer Section 6.1.2);
4. Compliance obligations that are presented through the planning process (Refer Section 6.1.3).

AFSL's environmental policy is communicated to all employees at all levels throughout our organization via training, regular internal communications and reinforcement during annual employee performance reviews. Employee understanding of our policies and objectives is determined during internal audits and other methods deemed appropriate.

Arlington Fleet Services Ltd is committed to an operating philosophy based on openness in communication, integrity in serving our customers, fairness and concern for our employees and responsibility to the communities within which we operate. Our vision is to exceed customer expectations for environmental, safety, sustainability, cost, delivery and value.

Although the activities contained with our environmental policy are centrally coordinated from our facilities, success of the policy relies on the participation of everyone, and as such, the policy's aims are embedded into our processes.

ARLINGTON FLEET SERVICES LTD EMS POLICY

It is the policy of Arlington Fleet Services to provide services that consistently fulfil and meet the requirements of its customers whilst safeguarding the safety of the railway and the environment.

To demonstrate to our customers, and our staff, our commitment to this policy, the company shall achieve and maintain recognition as an organisation of assessed capability. The company operates an environmental management system which follows the principles of EN ISO 14001:2015 as described in this manual.

This will involve:

- Compliance with all environmental legal requirements, regulations and guidance.
- Integration of environmental factors into business decisions.
- Planning work systems and practices so as to give due consideration as to the potential environmental impact and the prevention of pollution.
- So far as is possible prevent the illegal deposits, disposal or treatment of controlled waste by any person where that waste has been, or will be under the control of the company.
- Where possible seek to influence the design and specification of projects so as to ensure that environmental impact is minimised as far as is reasonably practical.
- Ensuring considered use of resources of all kinds, including the promotion of recycled and recyclable materials wherever possible.
- Establishing company procedures to ensure that waste is managed in line with legislation and that all parties involved in the waste production, transportation, transfer and disposal process comply with their Duty of Care regarding waste control.
- The company's environmental performance will be assessed annually through management review to ensure continued improvement and compliance with both the letter and spirit of legislation. Protecting the environment not only makes good commercial sense but is also an investment in our future, both short term and long term.

The company's key objective is to be known throughout the industry for its provision of quality services with a 'high calibre' back-up from its directors and employees.

AFSL therefore is firmly committed to adopting this policy as a means to achieving this.

Barry Stephens John Campbell

Directors, Arlington Fleet Services Limited

5.3 Role, Responsibilities & Authorities

Our organizational structure is defined in Appendix A.3. The organization chart shows the interrelation of personnel within Arlington Fleet Services L t d , whilst job descriptions define the responsibilities, authorities and requirements of each role. Job descriptions and the organizational structure are reviewed and approved by the Company Directors for adequacy as determined by the changing needs and expectations of the interested parties identified in Section 4.2. All roles with EMS accountability and responsibilities (including compliance and legislative requirements) are:

1. Documented in job descriptions
2. Documented in responsibility matrices;
3. Included in the EMS organization chart specific to the business;
4. Organizational charts are available to all employees;
5. Where contractors are involved, areas of accountability and responsibility are clarified.

5.3.1 Top Management

The Company Directors are responsible for business planning, development and the communication of our policies, environmental management system planning, the establishment and deployment of objectives, the provision of resources needed to implement and improve the EMS (Refer to Section 7.1) and for undertaking management reviews (Refer to Section 9.3). Company Directors and managers are also responsible for:

1. Effective implementation and ongoing operation of the Environmental Management System to maintain ISO 14001 certification;
2. Ensuring resources are available for staff to obtain or update specialized skills to manage and mitigate our environmental impacts that arise from the work of Facilities Management;
3. Allocating resources to ensure that continual improvements can be achieved;
4. Chairing the Environmental Management Review to ensure that the EMS remains effective, suitable and adequate.

5.3.2 Health, Safety, Quality and Environmental (HSQE) Manager

The HSQE Manager is responsible, as delegated by the Company Directors, for ensuring that any identified risks to the environment are eliminated or reduced at source to As-Low-As-Reasonably-Practicable (ALARP) and that our organization's strategic development does not compromise the intended outcomes of our EMS by:

1. Maintaining a specialist level of knowledge of relevant environmental legislation to advise on compliance with statutory responsibilities.
2. Providing advice, information, instruction, and training on environmental management matters to employees and others as applicable.
3. Ensuring that the EMS is established, implemented and maintained in accordance with the requirements of ISO14001:2015.
4. Contributing to the annual (publicly available) reports.
5. Coordinating the identification and review of relevant environmental compliance and best practice updates.
6. Ensuring document control of EMS-controlled documents.
7. Representation at EMS Improvement Groups.

8. Coordinating and completion of audits according to the internal audit programme.
9. Reporting on the environmental performance of the EMS, progress against objectives and make recommendations for improvement to Top management via the agreed governance structure.
10. Increasing the environmental competence and awareness of staff at all levels through the development of training and awareness initiatives and sharing of best practices.

5.3.3 Department Managers

All department managers demonstrate their commitment to the development and improvement of the EMS through the provision of necessary resources, through their involvement in the internal audit process and through their proactive involvement in continual improvement activities. Emphasis is placed on improving both the effectiveness and efficiency of key system processes.

All department managers are responsible for the execution of the business plan and the implementation of our policies, processes and systems described in this EMS manual. All managers are responsible for planning and controlling the management system processes within their area of responsibility, including the establishment and deployment of operational-level objectives and the provision of resources needed to implement and improve these processes.

5.3.4 Employees

All employees are responsible for actioning our policies and procedures applicable to the processes that they perform. Personnel responsible for product and service quality have the authority to stop production to correct environmental problems. Employees are motivated and empowered to identify and report any known or potential problems, and to recommend solutions to aid subsequent risk management and corrective action activities.

6.0 Management System Planning

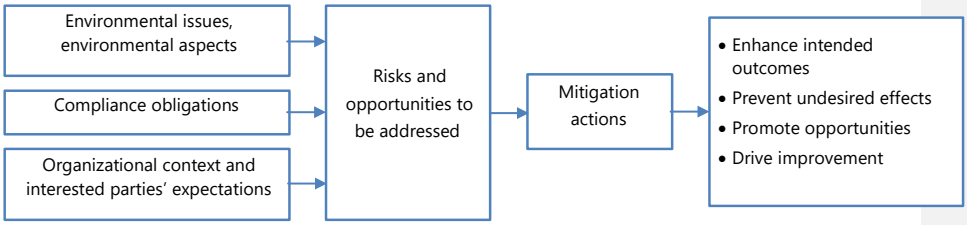
6.1 Addressing Risks & Opportunities

6.1.1 General

In order for our organization to have a successful EMS, we consider and manage the risks and opportunities relating to our stakeholders, and our external and internal context. This process uses the information collected during context and strategy evaluations (via SWOT & PESTLE analysis) and stakeholder and interested party analysis.

Using *Risk & Opportunity Registers* the Company Directors and other responsible managers consider relevant risks and opportunities in order to help determine any necessary action that ensures our EMS meets its intended outcomes; manages external environmental conditions and achieves continual improvement.

Figure 4: Sources of Risk & Opportunity



Once the significant or material risks and opportunities are identified; from the activities and outputs undertaken in Sections 6.1.1 to 6.1.4, our organization plans actions to avoid or mitigate perceived risks, or to take advantage of opportunities. Action is taken in a variety of ways using our EMS system processes via management reviews, setting objectives, targets and policies, operational control or emergency preparedness planning, supplier evaluation, and other appropriate processes.

Management from the top down are responsible for incorporating risk-based thinking into our organization's culture. This includes the establishment of risk management procedures and processes to ensure that effective risk and opportunity management principles are undertaken throughout the lifecycle of our EMS, our products, services, and activities by:

1. Providing sufficient resources to carry out risk and opportunity management activities;
2. Assigning responsibilities and authorities for risk and opportunity management activities;
3. Reviewing information and results from audits and risk and opportunity management activities.

The scope of AFSL's risk and opportunity management process is communicated by the *Control of Risks & Opportunities Procedure* which includes a methodology for the assessment of the internal and external issues identified in Section 4.1, and the assessment of the needs and the expectations of any interested parties identified in Section 4.2. Risk and opportunity management is undertaken as part of Arlington Fleet Services Ltd day-to-day operations and is captured in the hierarchy shown in Figure 5; and ensures that each issue is managed at the most appropriate level within our organization.

Typically, the following categories shown below are assigned to each level in the hierarchy. AFSL has classified its 'risk appetite' as the amount of risk that we are willing to accept in pursuit of an opportunity or the avoidance or mitigation of risk; where each pertains to the conformity of our products, processes, and EMS, and which reflect the following considerations:

1. Risk management philosophy per product or process and tolerance for failures;
2. Capacity to take on and mitigate risk, or ability to avoid risk;

3. Our policies, objectives, business plans and respective stakeholder demands;

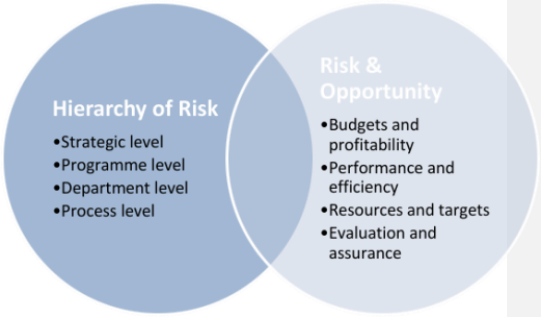
4. Evolving industry, market, and other macro or microenvironmental conditions.

Arlington Fleet Services L t d uses the *Risk and Opportunity Register* to help record, assess, respond, review, report, monitor and plan for the risks and opportunities that we perceive to be relevant.

The register allows our organization to methodically assess each risk and to study.

each opportunity associated with our organizational context, strategy and compliance obligations that relate to the needs and expectations of our customers and interested parties.

Figure 5: Management of Risk & Opportunity



The register also records the control and treatment method for risk or opportunity in order to preserve this knowledge; risk registers are retained as documented information.

Supporting documentation:

Ref.	Title & Description
01	Control of Risks & Opportunities

6.1.2 Environmental Aspects

Arlington Fleet Services L t d identifies relevant environmental aspects and their subsequent impacts that pertain to our business operations, obligations and customer requirements. Environmental aspects and impacts are recorded within the *Environmental Aspects & Impacts Register*. For each identified aspect, the operating conditions, environmental impacts and perceived significance are summarized without the need to provide an exhaustive list of all activities where there may be a number of generic and specialist impacts.

Within the *Environmental Aspects & Impacts Register*, an assessment of the potential environmental impact of each aspect is assessed and recorded, along with related targets and objectives. A scoring system is used to identify the significance of each environmental aspect with regard to relevant current and past activities, products, services and planned or new system or process developments.

The scoring process allows consideration of normal, abnormal and emergency

operating conditions where applicable. The risks and opportunities encountered during the life cycle of our environmental aspects are considered when determining the significance of each impact. This process is controlled and communicated using the *Control of Environmental Aspects & Impacts Procedure*.

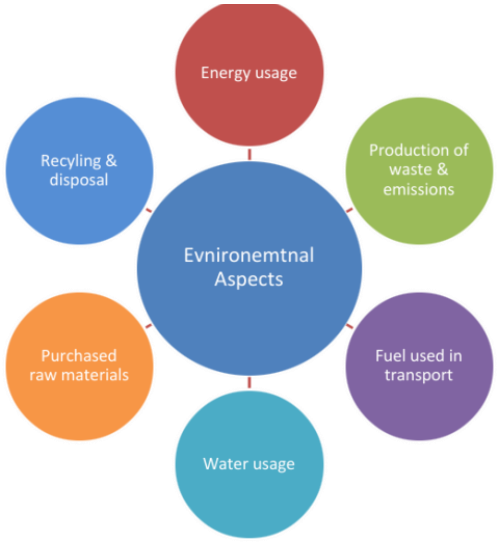
The subsequent output from this identification process takes account of the severity of pertinent environmental aspects and our organization's ability to influence them in order to determine key issues and requirements that pose adverse or beneficial effects in a prioritized way to:

1. Ensure that the EMS can achieve its intended outcomes;
2. Prevent or reduce undesired effects;
3. Achieve continual improvement.

Environmentalaspects that we address include:

1. Those with significant environmental impacts;
2. Those that affect compliance with our obligations;
3. Those which are priority issues for the organization (e.g., which affect strategy, policy or objectives).

Figure 6: Types of Environmental Aspect



Environmental aspects which pose a significant impact are subject to risk management, corrective action, and monitoring and measurement as appropriate. The EMS is structured to identify and manage these aspects in order to control or limit potential impacts and risks that may affect our organization or EMS conformity.

The significance of our organization's aspects is reviewed bi-annually, including proposals for new processes, services or developments and environmental aspects arising are also considered and assessed for significance by the HSQE Manager. New aspects are added to the *Environmental Aspects & Impacts Register* as necessary and operational control is altered accordingly.

Supporting documentation:

Ref.	Title & Description
02	Control of Environmental Aspects & Impacts

6.1.3 Compliance Obligations

The Company Directors and the HSQE Manager review all relevant environmental legislation directly related to our identified environmental aspects and impacts using the UK Environment Agency website. Legal and compliance obligations are reviewed on a regular basis. The process by which we manage our compliance obligations is communicated using the *Control of Compliance Obligations Procedure*.

All relevant legislation and other requirements applicable to Arlington Fleet Services Ltd.'s environmental aspects and impacts are compiled into a *Register of Compliance Obligations*. The introduction of new legislation and changes to current legislation is monitored through: http://www.legislation.gov.uk. This is checked monthly by the HSQE Manager.

We also use guidance provided by the Environment Agency that breaks down the requirements of common legislation: https://www.gov.uk/government/organisations/environment-agency/services-information. The HSQE Manager ensures that applicable environmental aspects and impacts are identified and understood in terms of customer requirements and current legislation.

Similarly, the HSQE Manager reviews any relevant health and safety-related legal requirements, obligations, regulations and Approved Codes of Practice (A Cops) using the Health and Safety Executive's website www.hse.gov.uk/guidance/index.htm and ensures that all applicable health and safety hazards are identified, evaluated and understood in terms of current legislation, including, as appropriate:

1. The Regulatory Reform (Fire Safety) Order 2005.
2. Reporting Hazards and Dangerous Conditions or Incidents (Near Misses).
3. Health and Safety (First Aid) Regulations 1981.
4. COSHH Regulations 2002.
5. Health & Safety at Work Act 1974.

It is the responsibility of the HSQE Manager to maintain, review and update the *Register of Compliance Obligations* monthly in order to:

1. Determine whether legislation, amended, current or new legislation is 'relevant' or 'irrelevant';
2. Determine whether our organization is compliant with the legislation.
3. Describe how the requirements apply and what controls are in place.
4. Determine other relevant compliance obligations and those that we should adopt.
5. Describe how the requirements apply and what controls are in place to remain compliant.
6. Update and communicate the compliance obligations register to relevant staff.
7. Maintain records or periodic compliance reviews.

Supporting documentation:

Ref.	Title & Description
03	Control of Compliance Obligations

6.1.4 Planning Action

Our EMS is planned and implemented in order to meet our corporate objectives as well as the requirements of ISO 14001:2015. The planning process involves establishing and communicating our corporate policies, objectives and associated operational procedures.

This document constitutes our overall plan for establishing, maintaining and improving our EMS. For each instance of management system planning, the output is documented and retained accordingly. Any changes are conducted in a controlled manner to ensure there that no unintended threats affect the EMS and are documented using the *Risk & Opportunity Register*.
Whenever management system changes are planned, The Directors and General Manager ensures that all personnel are made aware of any changes which affect their process and that subsequent monitoring is undertaken to ensure that EMS changes are effectively implemented and that they do not adversely impact other processes.

All identified significant environmental aspects and associated risks and opportunities that need to be addressed are used to prioritise action in our action planning in order to manage and mitigate these aspects. In order to manage the risks associated with any change, the HSQE Manager identifies and assesses each change to any business processes that might impact the performance of the EMS. These types of change may be:

1. Planned or unplanned; 2. Sudden or gradual;
3. Temporary or permanent.

The HSQE Manager analyses the risks associated with each change and presents the assessment to the Company Directors and General Manager for consideration. The change process applies to the following activities or items which may foreseeably undergo change:

1. Plant and equipment;
2. Materials used, their composition and properties; 3. By-products/wastes generated;
4. Drawings and engineered processes;
5. Operating and maintenance procedures;
6. Emergency procedures or changes to business resilience; 7. Electronic system software;
8. Organizational structures and responsibilities;
9. Personnel changes, training or competency requirements; 10. Individual roles and responsibilities;
11. Regulatory and statutory requirements; 12. Activities, products and services.

The management review process, change control process, and the internal audit process ensure that the integrity of our EMS is maintained when significant changes

affect key processes. The management review makes recommendations to ensure that risks and opportunities that could affect the intended outcomes of our EMS are taken into account and planned for via the most appropriate business processes.

6.2 EMS Objectives

6.2.1 Environmental Objectives

Arlington Fleet Services Ltd sets out its objectives and targets on a regular basis within the management review minutes where details of programme dates and responsibilities are defined. Improvements in environmental performance are incremental and are in keeping with the size and complexity of our organization. The process for determining our objectives is communicated by the *Control of Objectives, Targets & Programmes Procedure*. Objectives and targets are established for the management of EMS performance. Each measurable objective:

1. Is consistent with our established strategies, policies and context;
2. Contributes to the prevention of incidents and to reduce their impact(s); 3. Contributes to the prevention of pollution;
4. Provides a basis for continual improvement;

EMS objectives are set in association with the HSQE Manager which are based on reported compliance levels, audited deficiencies and legislative requirements and agreed by the Directors and General Manager. The HSQE Manager then monitors and reports progress at six monthly review meetings. To enable objectives and targets to be met, annual improvement plans are developed, documented and integrated into our overall annual business planning process and which:

1. Specify the required resources (both human and financial) needed to meet the objectives;
2. Specify the roles and responsibilities for implementing improvement plans and actions;
3. Establish the timeframes for the completion of improvement plans and achievement of objectives.

6.2.2 Planning Actions to Achieve Environmental Objectives

When setting objectives and targets, Directors and Managers ensure that they are consistent with the needs and expectations of our interested parties, as defined in Section 4.2, and with our corporate targets, programmes and policies. In addition, technological options, financial, operational and business requirements are considered.

Progress is reviewed routinely by Company Directors as part of the management review and reporting activities, and incorporates any proposed developments for modified activities, products or services. Management programmes are modified to account for any changes that affect the achievement of our objectives and targets. All proceedings and decisions are recorded in the management review meeting minutes.

In order to determine whether or not our objectives and targets are being met, their

related metrics are reported visually as a set of key performance indicators (KPIs). This allows progress over time to be monitored as the metrics are gathered and the data is analysed. KPIs and objectives for our organization include the following aspects:

1. Energy and carbon reduction;
2. Potable water reduction;
3. Land development and refurbishments (including Biodiversity);
4. Pollution prevention and waste management;
5. Sustainable procurement;
6. Commuting and business travel;
7. Environmental Management System.

On the basis of our policies, and in connection with the application of the ISO 14001:2015, Arlington Fleet Services Ltd sets objectives that are specified in the *Register of EMS Objectives*. All employees are aware of and, responsible, for the fulfilment of our policies and their subsequent objectives. Managers of all departments are obliged to develop high level objectives into objectives applicable to their departments and employees.

Supporting documentation:

Ref.	Title & Description
04	Control of Objectives, Targets & Programmes

7.0 Support

7.1 Resources

Resources at AFSL include human resources and specialized skills, infrastructure, technology, work environment and financial resources and include the requirements for the establishment, implementation, maintenance and continual improvement of the environmental management system.

Resource allocation is undertaken in consideration of the capability and constraints on existing internal resources, as well as needs related to supplier or interested party expectations. Resources and resource allocation are assessed during management reviews and include the following as required:

1. People;
2. Infrastructure;
3. Work environment;
4. Information;
5. Suppliers and partners;
6. Natural and financial resources.

The Systems Director is responsible for planning, providing and maintaining the infrastructure and resources needed to achieve product and process conformance, including buildings, workspace and associated utilities; process equipment (hardware and software); and supporting services (such as internal transportation, material handling systems, and communications systems). The General Manager, supported by the HSQE Manager, has overall responsibility for managing the related environmental impacts present at our facilities or which exist intrinsically within our equipment and

process or maintenance programmes, including:

1. Transportation and material handling;
2. Equipment management, maintenance and repair;
3. Process and production equipment management, maintenance and repair;
4. Facilities management, maintenance and repair.

The General Manager, in conjunction with the HSQE Manager, has overall responsibility for managing and mitigating our organisation's use of natural resources (non-renewable electricity, natural gas, and water), which is identified and managed as a significant environmental aspect and for ensuring that our operations remain compliant.

1. Our corporate policies and objectives;
2. EMS management plans.
3. Local Authority conditions.
4. Compliance obligations and other requirements.

The list below is for reference only in regard to energy efficiency:

a. The Climate Change Act 2008.
b. The Energy Performance of Buildings (England and Wales) Regulations 2012.
c. The Renewable Heat Incentive Scheme Regulations 2011.
d. Water Resources Act 1991.
e. Building Regulations 2000.
f. BREEAM.
g. COSHH Regulations.
h. CRC Energy Efficiency Commitment Scheme.
i. Climate Change Levy Regulations.

The operation and maintenance of plant and equipment that have the potential to impact EHQMS performance, as defined through risk analysis, is maintained, inspected and tested to ensure it meets design descriptions and specifications. Documentation for critical processes, plant, and equipment is retained and made available and includes as applicable:

1. Codes and relevant legislation;
2. Hazard assessment reports;
3. Operating procedures and operating criteria;
4. Engineering drawings, specifications and engineering standards;
5. Maintenance, inspection and testing strategies;
6. The characteristics of the product or materials essential for safe and proper use.

Supporting documentation:

Ref.	Title & Description
05	Control of Infrastructure & Natural Resources

7.2 Competence

Directors, General Manager and Production Managers identify emerging competency needs during management reviews. Emergent competency needs are converted into job descriptions for the type and number of positions that need to be filled through internal or external recruitment.

To ensure competence of our personnel, job descriptions have been prepared identifying the qualifications, experience and responsibilities that are required for each position that affects product and system conformity. Qualifications include desired requirements for education, skills and experience. Appropriate qualifications, along with the provision of any required training, provide the competence required for each position.

Qualifications are reviewed upon hire, when an employee changes positions or the requirements for a position change. The Human Resources Manager maintains records of employee qualifications. If any differences between the employee's qualifications and the requirements for the job are found, training or other action is taken to provide the employee with the necessary competence. The results of training are then evaluated to determine if it was effective.

All employees are made aware of the relevance and importance of their activities and how they contribute to the achievement of our policies and objectives. The company operates a formal system to ensure that all employees within the organization are adequately trained to enable them to perform their assigned duties.

Staff training records are maintained to demonstrate competency and experience. The Human Resources and HSQE Manager in conjunction with the General Manager maintains and reviews the training records to ensure completeness and to identify possible future training needs. Training records are maintained and include as a minimum; copies of certificates for any training undertaken to date, current job description and curriculum vitae.

Where required; competency training and monitoring is conducted in-house, although for more specialist skills, external courses are utilized. The effectiveness of training is evaluated and recorded. The company induction includes an introduction to our policies and objectives. Future competency training needs are identified as part of the Management Review process.

7.3 Awareness

All employees are trained on the relevance and importance of their activities and how they contribute to the achievement of our policies and objectives. The company operates a formal system to ensure that all employees within the organization are adequately trained to enable them to perform their assigned duties.

Where required; awareness training and monitoring is conducted in-house, although for more specialist skills, external courses are utilized. The effectiveness of awareness training is evaluated and recorded. The company induction includes an introduction to our organization's policy statements and objectives. Future training needs are identified as part of the management review process.

Supporting documentation:

Ref.	Title & Description
06	Control of Competence & Awareness

7.4 Communication

7.4.1 General

Arlington Fleet Services Ltd communicates information internally regarding our QMS and its effectiveness through documented training, internal audit reports and continual

improvement processes. All managers and supervisors are responsible for establishing regular formal and informal communications as needed to convey to their employees the relevance and importance of their activities; typically, this information is conveyed through team meetings and cross-functional improvement projects.

7.4.2 Internal Communication

Communications regarding how employees contribute to the achievement of objectives are also conveyed and reinforced during employee performance reviews. Issues pertaining to our QMS that may be communicated internally include:

1. Day-to-day operations and general awareness.
2. Environmental policy.
3. Information on achieving objectives and targets.
4. Risk and opportunities.

Top management and their direct reports are responsible for communicating the corporate policies as well as the importance of meeting customer, statutory and regulatory requirements to employees within their respective departments. They ensure that environmental policy is understood and applied to the daily work of the organization through the establishment of measurable goals and objectives. Internal communication occurs on an ongoing basis and is achieved through various mechanisms as appropriate:

1. Regular meetings and briefings;
2. Training sessions and training material;
3. Display boards, memorandums, and letters;
4. Website, intranet, internal e-mails;
5. Product and process performance data analysis and audit results;
6. Targets, objectives, scorecards, KPIs, management system manual and procedures;
7. Corrective action and non-conformance reports;
8. Minutes of ad-hoc and scheduled meetings.

7.4.3 External Communication

Arlington Fleet Services Ltd determines the need to communicate information externally to our interested parties, as defined in Section 4.2, regarding the effectiveness of our QMS. In most instances, external interested parties (such as consumers, stockholders, neighbouring communities, etc.) are the main driving force for our organization to implement our QMS. The various processes or means of external communication may include, as appropriate:

Interested Parties	Needs & Expectations	Possible modes of Communication
Customers	Price, reliability & value	Publications in the media and focus groups
Distributors & retailers	Environmental, price & logistics	Industry association publications and press releases
Owners/shareholders	Profitability & growth	Annual reports or newsletters of performance
Suppliers	Beneficial relationships	Publications on our website, meetings or questionnaires
Regulatory & statutory	Compliance & reporting	Regulatory compliance submissions or results of audits

AFSL ensures that all external communications are authorized prior to release. Where required, advice appropriate to the context of the communication may be sought concerning the content and dissemination of certain external communications.

Internet - Information on our EMS, the identified significant environmental aspects and an overview of the sustainability-related activity is will be communicated externally to interested parties via our website.

Enquiries – Arlington Fleet Services Ltd is subject to both the Freedom of Information Act and Environmental Information Regulations both of which require a response to external requests for information within specific timescales.

Social Media – Arlington Fleet Services Ltd will in the future manage a Twitter and Facebook account to share information, encourage behavioural change and promote events. Similarly, AFSL will utilize an official LinkedIn page. All social media is coordinated by our Human Resources Manager.

Responses to external communications are recorded if they are transmitted by email or letter. In each case, the response is retained and controlled in accordance with the requirements for documented information.

7.5 Documented Information

7.5.1 Management System Documents

Arlington Fleet Services Ltd ensures that our EMS includes the documented information that is required to be maintained and retained by ISO 14001:2015, and additionally, any documented information identified by our organization that demonstrates the effective operation of our EMS. Refer to the *Register of Documented Information*.

Arlington Fleet Services Ltd applies the following criteria to all types of documented information in order to assess whether the information is necessary for demonstrating the effectiveness of our EMS, and whether it should be formally controlled.

1. Communicates a message internally or externally;
2. Provides evidence of process and product conformity; 3. Provides evidence that planned outputs were achieved; 4. Provides knowledge sharing.

Should any of the above criteria apply, AFSL ensures that this information is retained and/or maintained as a form of 'documented information'

7.5.2 Creating & Updating

Arlington Fleet Services Ltd ensures that when we create documented information it is appropriately identified and described (e.g., title, date, author, reference number) and is available in an appropriate format (e.g., language, software version, graphics, etc.) and on appropriate media (e.g., paper, electronic). All documented information is reviewed and approved for suitability and adequacy. Where permanent changes to a document are required, a *Document Change Request* form is completed and submitted to the document owner for consideration and implementation.

7.5.3 Controlling Documented Information

Arlington Fleet Services Ltd uses standard forms and templates that are accessed via a local area network computer system. An electronic document management system, which is backed up and updated as required, is used to retain documented information ensuring only the current versions are available to users. All management system documents are controlled and communicated according to the *Control of Documented Information* procedure which defines our process for:

1. Approving documents for adequacy prior to issue;
2. Reviewing and revising as necessary and re-approving documents;
3. Ensuring that changes and current revision status of documents are identified;
4. Ensuring that relevant versions of applicable documents are available at points of use; 5. Ensuring that documents remain legible and readily identifiable;
6. Ensuring that documents of external origin are identified and their distribution controlled; 7. Preventing the unintended use of obsolete documents;
8. Ensuring that documents of external origin are identified and their distribution controlled.

Supporting documentation:

Ref.	Title & Description
07	Control of Documented Information

8.0 Operation

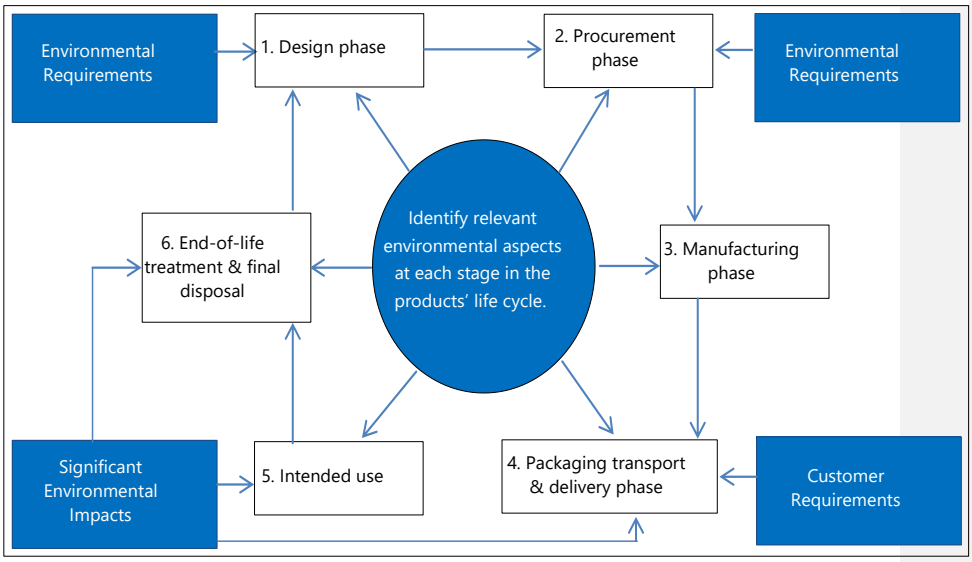
8.1 Operational Planning & Control

Arlington Fleet Services Ltd considers the environmental requirements and impacts that can be controlled and influenced during each phase of the product lifecycle:

1. Design phase;
2. Procurement phase;
3. Manufacturing phase;
4. Packaging, transport and delivery phase;
5. Intended use;
6. End-of-life treatment and final disposal.

AFSL undertakes analysis in order to map out the high-level life cycle of our organization's products and services, using the *Life Cycle Analysis Template*. Figure 7 provides an example of a life cycle and gives an overview of what ISO 14001:2015 requires in relation to environmental aspects, and operational control. By identifying and documenting information about the relevant environmental aspects, we are able to prevent or mitigate adverse environmental impacts during each life cycle phase.

Figure 7: The Lifecycle & Environmental Requirements



The relevant environmental management operational procedures are also applicable to outsourced processes including those undertaken by contractors, the level and extent of control or influence is defined. The controls identified do not absolve us of the responsibility to conform to client, statutory and regulatory requirements but instead they enhance our capacity to effectively manage our supply chain.

Outsourced processes are controlled and influenced via purchasing and contractual agreements, documented procedures, contracts, supplier agreements and other Quality Management System (QMS) requirements, 2nd party audits, and performance reviews as appropriate. Where applicable a life cycle approach is taken within the operational controls so that the environmental impacts at each stage can be controlled or influenced.

Our organization does not control or influence all of the activities of each outsourced process. Only those where our organization has responsibility for conforming to environmental requirements, in accordance with our aspects, impacts and compliance obligations, are controlled or influenced.

Arlington Fleet Services Ltd establishes and implements documented plans and procedures that describe the processes (Refer to Section 4.3) and the controls required for the provision of products and services in cognizance to the objectives, the potential for planned or unintended change, and the risks and opportunities identified in Section 6.1. During this planning phase, management or other responsible personnel identify the following parameters:

1. Objectives and requirements for the product or service;
2. Verification, validation, monitoring, inspection and test requirements;
3. Documented information to demonstrate conformity;
4. Document information to demonstrate process effectiveness;
5. Necessary resources; or outsourced processes and their controls;
6. Criteria for process performance and product/service acceptance;
7. Potential consequences and mitigation to change affecting input requirements;
8. Resources necessary to support the ongoing operation and maintenance of the product.

The output of planning activity includes documented plans, resource schedules, processes, equipment requirements, procedures and design outputs.

8.2 Environmental Emergency Situations

Arlington Fleet Services L t d has identified potential emergency situations pertaining to our business operations which may lead to an undesired environmental impact or health and safety risk. HSQE Manager and the General Manager are responsible for ensuring that procedures and practices are established for preventing and responding to emergency situations.

The Emergency Management Plan is jointly owned by the HSQE Manager with responsibilities assigned to all Production Managers and Team leaders, and is periodically tested by during regular drills. The Emergency Management Plan is

initiated in the event of an emergency arising from the following environmental hazards:

1. Flood, fire, natural disaster;
2. Accident, incident or near miss;
3. Release of chemical substances;

The *Control of Emergency Situations Procedure* and related documents address the following:

1. Identification of potential and actual accidents and emergency situations;
2. Proper response to emergencies and prevention or mitigation of serious environmental impacts; 3. Provisions for periodic reviews and revisions of the procedures;
4. Such reviews are always initiated after the occurrence of such events;
5. Periodic drills to test the effectiveness of emergency preparedness and response procedures;

Records of environmental incidents, near-misses and non-conformities with EMS procedures are documented. In the event of an incident, non-conformity, or near miss, members of staff involved or those witnessing the incident are responsible for reporting the event to the HSQE Manager who is responsible for investigating the issue to establish the root cause.

Supporting documentation:

Ref.	Title & Description
08	Control of Environmental Emergency Situations

9.0 Performance Evaluation

9.1 Monitoring, Measurement, Analysis & Evaluation

9.1.1 General

Arlington Fleet Services Ltd applies suitable methods for determining which aspects of the environmental management system and its processes are to be monitored, measured and evaluated. The frequency and methods by which our processes are monitored, measured and evaluated are determined and informed by:

1. Statutory and regulatory requirements;
2. Customer feedback and specification requirements;
3. Process and EMS requirements;
4. Process performance and audit results;
5. Level of risk and types of control measure;
6. Trends in non-conformities or corrective actions;
7. Criticality for product conformity.

All monitoring, measuring and evaluation outputs are documented and analysed to determine process effectiveness to ensure their effectiveness in achieving in-tolerance results, and to identify opportunities for improvement.

1. In-process checks relate to both environmental control and productivity checks.
2. Provision is made for the identification and resolution of non-conformances;
3. The emphasis is to prevent any problems which might affect customer satisfaction;

4. In-process checks are performed and documented;
5. Where specific inspection points are required, these are identified at the contract planning phase.

Where applicable, test and inspection records are retained as documented information for a minimum of three years. This documented information includes details of the final inspection authority to confirm that all critical parameters were in accordance with established requirements and specifications. Additionally, product samples are stored for a minimum of five years.

To ensure compliance with our obligations and the continual improvement of Arlington's EMS the following will be monitored so that the HSQE manager can identify shortcomings in AFSL's performance:

- VOC/Paint fume Extraction will be monitored and tested by qualified technicians as per legislation – annually for VOC and extraction. HSQE manager to record results and upload test cert to the environmental folder.
- Electrical usage shall be monitored quarterly, bills to be analysed by the systems manager / HSQE manager any increase in usage will be investigated and faults rectified.
- Water usage shall be monitored quarterly; bills will be analysed by the systems manager/HSQE manager. Any significant increase in usage will be investigated, and the relevant authority will be informed.
- Contamination of Land, Site husbandry is to be monitored weekly by production managers. The HSQE manger will conduct site inspections on a monthly basis and results recorded in the environmental folder on the tech drive.
- Waste generation, hazardous and non-hazardous. Waste transfer notes are to be uploaded to the Environmental folder. HSQE manager to carry out monthly trend analysis. If a large increase is detected or a considerable lack of waste generated the HSQE manger is to investigate further, and bring to the attention of senior management.
- Discharge to sewer/drains. All drains shall be clearly marked as either storm or foul water and monitored monthly by the HSQE manager or a nominated person.

The trend analysis will be conducted by the HSQE Manager and KPI's recorded and reported to senior management.

The HSQE Manager determines the frequency of monitoring and measuring activities and the types of tools and devices we use to provide evidence of valid measurements and verify specified tolerances and measurement ranges.

The frequency of cleaning, maintenance and calibration is considered with reference to the risks associated with the failure of the device upon the process and its output. The methodology for controlling monitoring and measuring tools is communicated by the Control of Calibrated Equipment Procedure. Where necessary, to ensure the validity of results, measuring and monitoring equipment is:

1. Calibrated or verified at specified intervals or prior to use;
2. Calibrated against measurement standards traceable to appropriate measurement standards;
3. Software used for monitoring and measurement is validated using defined parameters prior to use;
4. Protected from damage and deterioration during handling, maintenance and storage;

5. Safeguarded from adjustments that would invalidate the measurement result;
6. Identified to enable the unit's calibration status to be determined;
7. Safeguarded from use when a unit is found to be out of calibration and the results revalidated;
8. Adjusted or re-adjusted as necessary.

In addition, the HSQE Manager re-assesses and records the validity of previous measurement results when a tool or device is subsequently found not to conform to requirements. The HSQE Manager takes appropriate action on any equipment, product or process that may be affected.

Where equipment is found to be out of calibration, the significance of the error is reviewed, its extent is traced and the results are re-verified. Records of the results of calibration and validation are maintained using the Controlled Equipment Log, the Calibration Log, and the Software Validation Log as documented information.

Supporting documentation:

Ref.	Title & Description
09	Control of Calibrated Equipment

9.1.2 Evaluation of Compliance

Conformance with legislation is reviewed and evidence of evaluation is maintained through the management review process. In addition to monitoring and measurement of operational activities, HSQE Manager periodically evaluates our compliance with all applicable legal requirements, obligations including other requirements to which we subscribe and reports directly to the company directors of any new compliance obligations and or non-conformities.

In most cases, monitoring and measurement is an on-going process intended to collect data required by legal and other requirements. The evaluation of compliance analyses and compares the data collected over a period of time in comparison with our stated compliance obligations and legal requirements as defined in the Control of Compliance Obligations Procedure.

Supporting documentation:

Ref.	Title & Description
03	Control of Compliance Obligations

9.2 Internal Audit

9.2.1 General

Internal audit results are critical inputs that help to assess the effectiveness of our EMS. Arlington Fleet Services Ltd internal audits use risk-based thinking and the notion of continual improvement as the main drivers. Internal audits are conducted at planned intervals to determine whether the management system conforms our organization's planned arrangements and to the requirements of ISO 14001:2015. This activity is defined by the **Control of Internal Audits Procedure**.

9.2.2 Internal Audit Programme

Arlington Fleet Services Ltd internal audit programme is based upon a strategy that considers the status and importance of each process that comprises our EMS. The

audit frequency is based upon process performance trends, results from previous audits, levels of customer satisfaction, rates of non-conformity and corrective action, etc. to ensure that our organization focuses on the aspects that affect product and process conformity the most.

The EHQMS audit programme is coordinated by the HSQE Manager and details the frequency and general focus of each audit. The internal audit programme is recorded within the **EMS Action Tracker**. The schedule may be altered at any time as necessary to ensure all areas are audited at a frequency determined by the associated risk of non-compliance.

The criteria, scope, frequency and methods of each audit are defined in our audit plan. The selection of auditors and their subsequent impartial conduct ensures objectivity throughout the audit process, Each Auditor ensures that:

1. The results of each are reported to the HSQE Manager;
2. That timely appropriate corrective action undertaken where required;
3. They retain documented information such as audit checklists and audit reports as evidence of the effective implementation of the audit programme in respect of each audit.

All internal audits are conducted by individuals who have undertaken 'Lead Auditor' training or 'Internal Auditor' as a minimum, and who therefore are aware of the benefits of building their own scope for each audit by referring to:

1. Related previous internal and external audit actions;
2. Relevant parts of the Environmental Aspects & Impacts Register;
3. Relevant parts of the Compliance Obligations Register;
4. Relevant parts of the Risk & Opportunities Register;
5. The relevant EMS management procedures;
6. The EMS manual and relevant clause requirements of ISO 14001:2015;
7. Non-conformities and related corrective actions that are recorded within the EMS Action Tracker.

Auditors are not permitted to audit area's they control themselves to ensure objectivity and impartiality.

Supporting documentation:

Ref.	Title & Description
10	Control of Internal Audits

9.3 Management Review

9.3.1 General

Commented [CP1]:

To ensure the continuing suitability, adequacy and effectiveness of our EMS in meeting our organization's strategies, Company Directors and senior management conduct formal management review meetings at planned internals. The requirements for conducting a management review are defined and communicated using the Control of Management Reviews Procedure.

In summary; a nominated Manager chairs the Management Review Meeting. The review group is coordinated and recorded by the HSQE Manager. To ensure that the review group includes each of the requirements of ISO 14001:2015; the Management Review Agenda & Minutes are prepared issued by the HSQE Manager to the appropriate attendees.

9.3.2 Inputs

The primary management review inputs comprise data from conformance and performance measurements that are gathered at key environmental data points from various processes and activities. Subsequent reported recommendations for improvement are based on the evaluation of such measurements.

Conformance is primarily assured through internal audits and demonstrated through a review of audit results and our demonstrated ability to detect, correct and to prevent problems. Performance is primarily assured through the deployment of corporate and operational level objectives, and through the review of our demonstrated ability to achieve desired results. The management review evaluates the need for change and to establish actions to improve our EMS, its processes and resource needs. The management review is led by senior management and considers the following:

1. The suitability of our EMS policies;
2. The impact of changes in compliance obligations;
3. The management of risk and opportunity;
4. EMS objectives, targets and performance indicators;
5. Changing expectations and requirements of relevant interested parties;
6. Changes in the products or organizational activities;
7. Changes to the organizational structure or change management effectiveness;
8. Communication and feedback from stakeholders;
9. Workplace, environmental, and health and safety monitoring;
10. The status of non-conformities and corrective actions;
11. Follow up on actions from previous management reviews;
12. Recommendations and opportunities for improving the effectiveness of the EMS.

The primary inputs that are reviewed comprise data from conformance and performance measurements that are gathered at key environmental data points from various processes. Subsequent recommendations for improvement are based on the evaluation of such measurements.

Conformance is primarily assured through internal audits and demonstrated through a review of audit results and our demonstrated ability to detect, correct and to prevent problems. Performance is primarily assured through the deployment of corporate and operational level objectives and through the review of our demonstrated ability to achieve desired results.

9.3.3 Outputs

Company Directors and senior management identify appropriate actions to be taken regarding the following issues:

1. Improvement of the effectiveness of the EMS and its processes;
2. Improvement of product related to customer requirements;
3. Opportunities and risks;
4. Significant environmental aspects;
5. Resource needs.

The primary outputs of management review meetings are the actions necessary to make changes or improvements to our EMS. Responsibilities for required actions are assigned to members of the management review team. Any decisions made during the meeting, assigned actions and their due dates are recorded in the management review minutes. Management review minutes are retained and include:

1. Decisions and actions relating to possible changes to policies, objectives and targets;
2. Information relating to revised risks and any proposed treatment and controls;
3. Improvement suggestions for inclusion into future management plans;
4. Any other alternation, modification and improvement to the EMS that demonstrates a commitment to continual improvement.

Relevant outputs from the management reviews are made available for communication and consultation throughout our organization.

Supporting documentation:

Ref.	Title & Description
11	Control of Management Reviews

10.0 Improvement

10.1 General

The HSQE Manager uses a range of the performance evaluation tools highlighted in Section 9 to make recommendations for improvement and to achieve the intended outcomes of our EMS. For example, recommendations may emerge from the review groups and from findings raised in internal audits.

In order to determine and select opportunities for improvement or to implement any necessary actions to meet the requirements of customers and relevant interested parties, or to enhance customer satisfaction, Arlington Fleet Services Ltd drives improvement via the analysis of relevant data. The data inputs for the improvement process include:

1. Risk and opportunity evaluations;
2. Assessment of the changing needs and expectations of interested parties;
3. The conformity of existing products and services;
4. The effectiveness of our EMS;
5. Supplier performance;
6. Environmental performance;
7. Reducing adverse environmental impacts;
8. Increasing beneficial impacts and opportunities;
9. Levels of customer satisfaction, including complaints and feedback;
10. Internal and external audit results;
11. Corrective action and non-conformance rates;
12. Data from process and product characteristics and their trends.

Arlington Fleet Services Ltd also ensures that opportunities for improvement from daily feedback on operational performance are evaluated by the HSQE Manager

as appropriate. Changes are typically implemented through the corrective action system. Opportunities for improvement from the analysis of longer-term data and trends are evaluated and implemented through the management review process and are prioritized with respect to their relevance for achieving our quality and environmental objectives.

The overall effectiveness of continual improvement program (including corrective actions taken as well as the overall progress towards achieving corporate level improvement objectives) is assessed through our management review process.

10.2 Non-conformity & Corrective Action

All non-conformities are reported to the HSQE Manager in order that an investigation can be initiated using the *Control of Non-conformity & Corrective Action Procedure*. The appropriate manager documents the non-conformity using the *Non-conformance Report* and together with process owners, they consider the root-cause of the non-conformity.

Where necessary, other competent parties are consulted to identify the root cause and plan appropriate action. The HSQE Manager records the non-conformance together with any agreed corrective action within the *EMS Action Tracker*. The results of the corrective action are recorded within the *Corrective Action Report*.
The appropriateness and effectiveness of any corrective action is reviewed during documented reviews, and via the internal audit process, and reported as necessary to The Company Directors/General Manager. Evidence of non-conformity, customer dissatisfaction or process weakness is used to drive our continual improvement system. Since problems may already exist, they require immediate correction and possible additional action aimed at eliminating or reducing the likelihood of its recurrence.

Management with responsibility and authority for implementing corrective action are notified promptly of product or process non-conformities. Investigating and eliminating the root cause of these failures is a critical part of our continual improvement process.

Arlington Fleet Services Ltd takes action to eliminate the cause of non-conformities in order to prevent their recurrence. Corrective actions are appropriate to the effects of the non-conformities encountered. The Non-conformity & Corrective Action Procedure defines the requirements for:

1. Reviewing non-conformities, including customer complaints and product returns;
2. Determining the causes of product non-conformities and process deficiencies;
3. Evaluating the need for action to ensure that non-conformities do not recur;
4. Determining and implementing action needed;
5. Recording and reviewing the results of actions taken.

Follow-up audits are conducted in accordance with the internal audit process to ensure that effective corrective action is taken and that the action is appropriate to the impact and nature of the problem encountered. In addition, the HSQE Manager summarizes and analyses corrective action data to identify trends in order to assess the overall effectiveness of the corrective action system and to develop related recommendations for improvement.

The resulting corrective actions are reviewed for effectiveness and are reported to Top management in order to determine if changes to the EMS are required, or whether any new risks or opportunities need to be considered during planning. Documented information concerning the nature of any non-conformances and their resulting corrective actions is retained.

The corrective actions are considered effective if the specific problem was corrected and data indicates that the same or similar problems have not recurred. Results of data analysis and subsequent recommendations are presented to top management for review.

Supporting documentation:

Ref.	Title & Description
12	Control of Non-conformity & Corrective Action

10.3 Improvement

Arlington Fleet Services Ltd continually improves the effectiveness of its environmental management system through the effective application of the corporate policies, objectives, auditing and data analysis, corrective and preventive actions and management reviews.

The continual improvement process begins with the establishment of our corporate policies and objectives for improvement, based on objectives contained in our business plan and customer targets and goals. Customer satisfaction, internal audit data, process and product performance data, and the cost of poor environmental or risk control are then compared against objectives or KPIs to identify additional opportunities for improvement.

The overall effectiveness of continual improvement program, including corrective actions taken, as well as the overall progress towards achieving corporate level improvement objectives, is assessed through our management review process.

Appendices

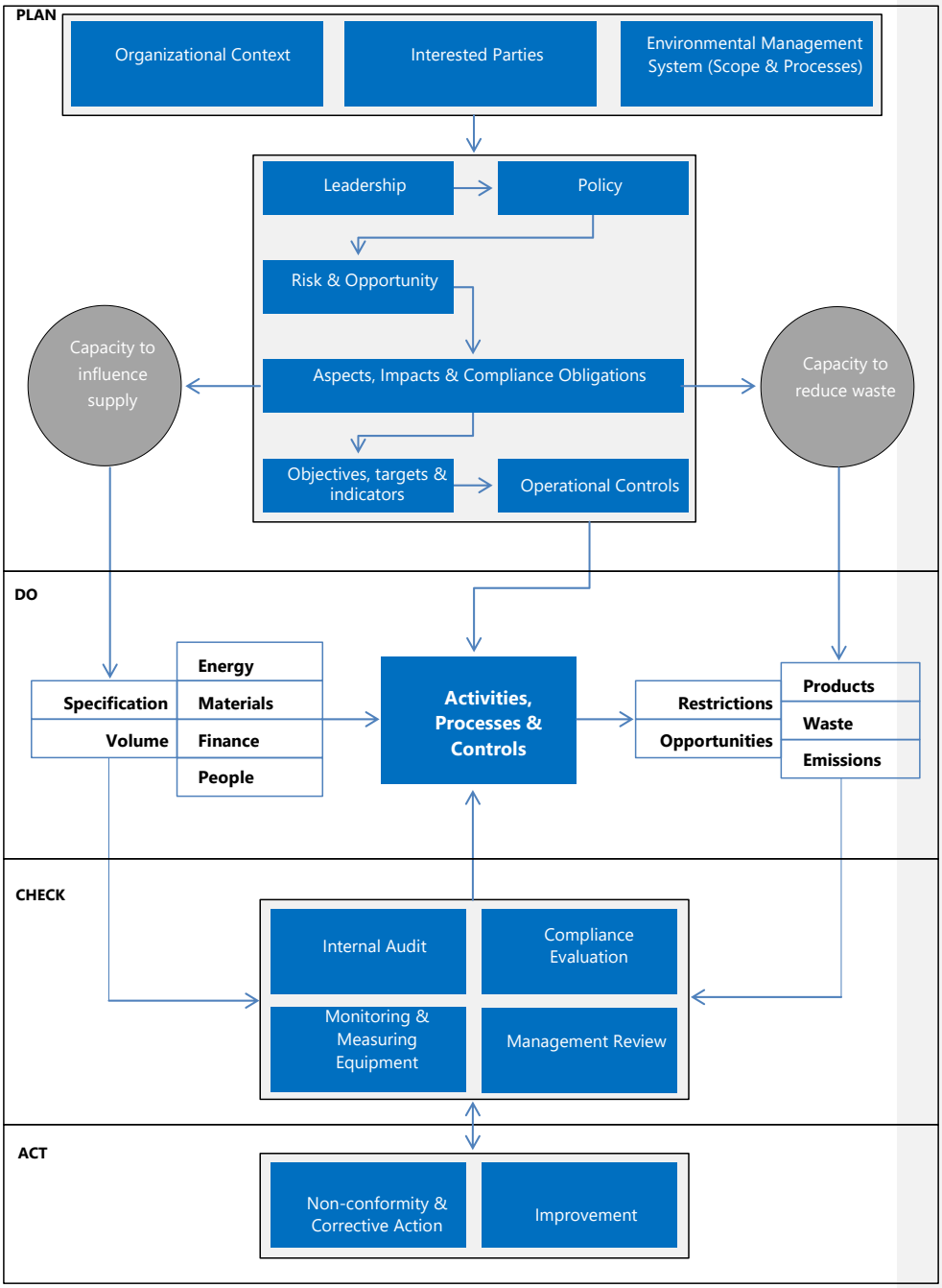
A.1 Correlation Matrix

This section provides a matrix to correlate the requirements of ISO 14001:2015 against the relevant sections in this document and should be used to determine where the new and amended clauses are located.

ISO 14001:2015		This Document	
4	Context of the Organization	4	About our Organization
4.1	Understanding the Organization and its Context	4.1	Organizational Context
4.2	Understanding the Needs and Expectations of Interested Parties	4.2	Relevant Interested Parties
4.3	Determining the Scope of the EMS	4.3	Management System Scope
4.4	Environmental Management System	4.4	Management System Processes
5	Leadership	5	Leadership & Governance
5.1	Leadership and Commitment	5.1	Leadership and Commitment
5.2	Environmental Policy	5.2	Environmental Policy
5.3	Organizational Roles, Responsibilities & Authorities	5.3	Roles, Responsibilities & Authorities
6	Planning	6	Management System Planning
6.1	Actions to Address Risks & Opportunities	6.1	Addressing Risk & Opportunities
6.1.1	General	6.1.1	General
6.1.2	Environmental Aspects	6.1.2	Environmental Aspects
6.1.3	Compliance Obligations	6.1.3	Compliance Obligations
6.1.4	Planning Action	6.1.4	Planning Action
6.2	Environmental Objectives & Plans to Achieve Them	6.2	EMS Objectives
6.2.1	Environmental Objectives	6.2.1	Environmental Objectives
6.2.2	Planning Actions to Achieve Environmental Objectives	6.2.2	Planning Actions to Achieve Environmental Objectives
7	Support	7	Support
7.1	Resources	7.1	Resources
7.2	Competence	7.2	Competence
7.3	Awareness	7.3	Awareness
7.4	Communication	7.4	Communication
7.4.1	General	7.4.1	General
7.4.2	Internal Communication	7.4.2	Internal Communication
7.4.3	External Communication	7.4.3	External Communication
7.5	Documented Information	7.5	Documented Information
7.5.1	General	7.5.1	General
7.5.2	Creating and Updating	7.5.2	Creating and Updating
7.5.3	Control of Documented Information	7.5.3	Control of Documented Information
8	Operation	8	Operation
8.1	Operational Planning and Control	8.1	Operational Planning & Control
8.2	Emergency Preparedness and Response	8.2	Environmental Emergency Situations
9	Performance Evaluation	9	Performance Evaluation
9.1	Monitoring, Measurement, Analysis & Evaluation	9.1	Monitoring, Measurement, Analysis & Evaluation

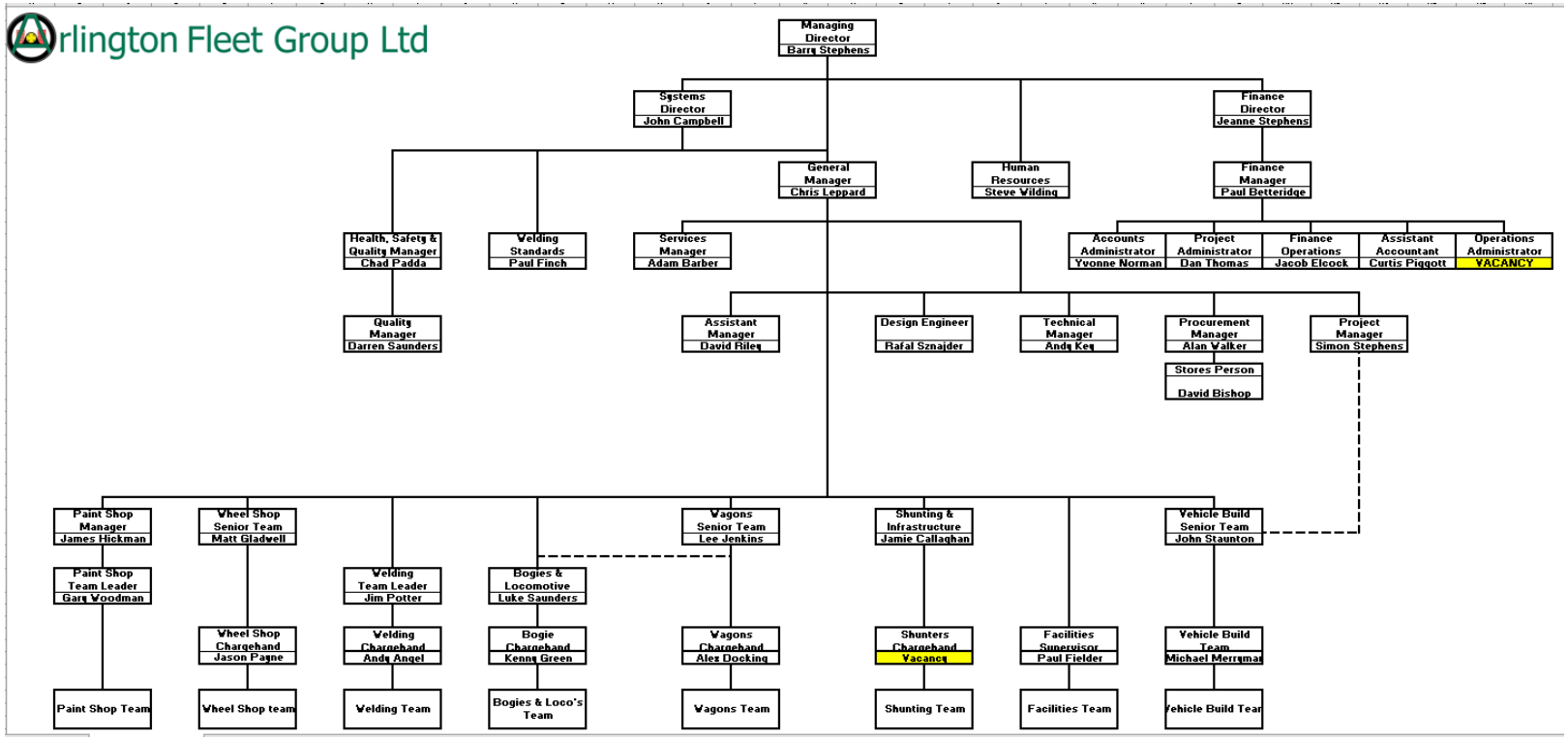
ISO 14001:2015		This Document	
9.1.1	General	9.1.1	General
9.1.2	Evaluation of Compliance	9.1.2	Evaluation of Compliance
9.2	Internal Audit	9.2	Internal Audit
9.2.1	General	9.2.1	General
9.2.2	Internal Audit Programme	9.2.2	Internal Audit Programme
9.3	Management Review	9.3	Management Review
9.3.1	General	9.3.1	General
9.3.2	Management Review Inputs	9.3.2	Inputs
9.3.3	Management Review Outputs	9.3.3	Outputs
10	Improvement	10	Improvement
10.1	General	10.1	General
10.2	Non-Conformity and Corrective Action	10.2	Non-Conformity and Corrective Action
10.3	Continual Improvement	10.3	Continual Improvement

A.2 EMS Process Map



A.3

Organisation Chart.



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