

INTERNAL AUDIT PROCEDURE

STRAVIK Construction Group · Controlled Document

Document No.	Revision	Effective Date	Document Owner	Status
STV-CIP-PRO-008	00 (Initial Issue)	2026-10-24	[QUALITY / HSE MANAGER]	Issued for review / pending approval

Management system alignment: This document is aligned with ISO 9001:2015, ISO 14001:2015 and ISO 45001:2018 requirements as applicable. STRAVIK Construction Group does not claim third-party certification to these standards. Florida Certified General Contractor License No. [FL LICENSE NO.].

REVISION HISTORY

Rev.	Date	Description of Change	Prepared By	Approved By
00	2026-10-24	Initial issue for STRAVIK Construction Group	[PREPARED BY]	Michael Gaya, President

1. PURPOSE

To define how STRAVIK Construction Group plans, conducts, reports and follows up internal audits of its integrated management system, aligned with ISO 9001/14001/45001 Clause 9.2 and the guidance of ISO 19011:2018.

2. SCOPE

Covers all management system processes, corporate departments, divisions and projects.

3. AUDIT PROGRAM

- An annual audit program is approved by the President and covers every process at least once per year, with frequency based on importance, risk and previous results.
- The program is maintained in the QA/QC audit workbook (STV-QMS-REG-012).

4. AUDITOR COMPETENCE & INDEPENDENCE

Auditors are trained in ISO 19011 principles and the relevant standards, and do not audit their own work.

5. AUDIT PROCESS

Step	Activity	Output
1	Plan: scope, criteria, auditee, schedule	Audit plan
2	Opening meeting	Confirmed scope and logistics
3	Collect evidence: interviews, records, site observation	Audit checklist / notes

Step	Activity	Output
4	Evaluate findings: conformity, nonconformity (major/minor), opportunity for improvement	Findings
5	Closing meeting	Agreed findings
6	Report within [NUMBER] working days	Audit report
7	Corrective action per STV-CIP-PRO-003; verification of effectiveness	Closed CAPA

6. GRADING

Grade	Definition
Major nonconformity	Absence or breakdown of a required process, or a finding that puts safety, compliance or product conformity at risk
Minor nonconformity	Isolated lapse not affecting system effectiveness
Opportunity for improvement	Potential enhancement; no requirement breached

7. REPORTING

Audit results are reported to management and summarized at management review (STV-CIP-PRO-001).

DOCUMENT CONTROL

- Controlled under the Records Management & Document Control Policy (STV-GOV-POL-011) and the Document Control Procedure (STV-GOV-PRO-015).
- Reviewed at least annually, or after an incident, audit finding, regulatory change or significant change in operations.
- Records generated under this document are retained per the retention schedule in STV-GOV-POL-011.

APPROVAL

Role	Name	Title	Signature	Date
Prepared By	[PREPARED BY]	[TITLE]		
Reviewed By	[QUALITY / HSE MANAGER]	[TITLE]		
Approved By	Michael Gaya	President		

This document is reviewed at least annually, or upon significant organizational, legal or operational change, and re-issued under document control per STV-GOV-POL-011.