Public Summary Report for Forest Management
2016 Annual audit
Report for:

Syndicat des Producteurs Forestiers du Sud du Québec
in Sherbrooke, Quebec, Canada

Audit Dates: Nov. 30 - Dec. 4, 2015
Audit Team: Nicolas Blanchette

Certificate code(s): RA-FM/COC-004614
Certificate issued: January 15, 2015
Certificate expiration: January 14, 2020

Organization Contact: Olivier Côté
Address: 4300, boul. Bourque
Sherbrooke, Québec J1N 2A6

The only official version of this report is the French version. The report below is a translation of the required portions of the French report.

NOTE: More detailed public summary available in French at http://info.fsc.org/
1. AUDIT PROCESS

1.1. Auditors and qualifications

<table>
<thead>
<tr>
<th>Auditor Name</th>
<th>Nicolas Blanchette</th>
<th>Auditor role</th>
<th>Lead Auditor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Qualifications:</td>
<td>Forest engineer since 1996, Nicolas was introduced to forest certification as part of his undergraduate training in Canada and Central America. He acquired a thorough knowledge of the FSC certification program through his involvement in this organization in New Brunswick, at the office of FSC International in Mexico, as coordinator of the Quebec Development Initiative of the FSC standard and as consultant for FSC Canada in Toronto. He actively participated in the development of the Boreal and Great Lakes St-Lawrence standards. He is a certified Lead Auditor according to the ISO 14001 standard as well as for FSC by the Rainforest Alliance Registrar. His many years of experience with the FSC certification program make Nicolas a versatile auditor. He also supports companies to move toward or to maintain certification of forest management and chain of custody through his INCOS Stratégies business.</td>
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<td></td>
</tr>
</tbody>
</table>

1.2. Overview of sites visited

<table>
<thead>
<tr>
<th>Type of site</th>
<th># of Sites Visited</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Head office</td>
<td></td>
</tr>
<tr>
<td>□ Forest districts</td>
<td></td>
</tr>
<tr>
<td>✓ Forest sites</td>
<td>GFStF; AFCW; Forêt Hereford inc.; AFAS; AFAA</td>
</tr>
<tr>
<td>□ Other sites:</td>
<td></td>
</tr>
</tbody>
</table>
## 2. AUDIT FINDINGS AND RESULTS

### 2.1. Changes in the forest management of the Forest Management Enterprise (FME) and/or standard and stakeholder issues

<table>
<thead>
<tr>
<th>Issue</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Changes in the forest management of the FME have occurred since the last audit</td>
<td>In total at the time of the audit, the group consisted of 2,356 MUs for a total certified area of 170,358.30 ha. Since the last reassessment audit, new MUs have been added to the scope of the certificate: • 152 new MUs less than 100 ha • 4 new MUs of 100-1,000 ha • 1 new MU of 1,000-10,000 ha. Forêt Hereford inc. (FHI) Forêt Hereford inc. (FHI), with an area of 5,298 ha, was founded in 2012. FHI is responsible for managing Neil and Louise Tillotson’s donation of more than 5,000 ha. In addition, a forest conservation easement on approximately 95% of the territory transferred to FHI has been signed with the Nature Conservancy of Canada to assist in the preservation of ecologically valuable elements contained therein while retaining its productive forest’s primary purpose. As forest of only one tenant of over 1000ha, all requirements of the standard applies with the exception of those related to public forests and SLIMF forests. The SPSFQ conducted an internal audit before including the territory within the scope of its certificate. Territory management is the responsibility of FHI and forestry operations are under the leadership of the group entitled “Aménagement forestier et agricole des Sommets inc.” involved since the initial issuance of the SPSFQ certificate.</td>
</tr>
</tbody>
</table>
| Updates to group member list (if yes, see section 2.5 below) | 1. Total # members in the certified pool: 2356 MUs 2. Total area in Current Pool (ha. or acres): 170,358 ha  
See “SPSFQ FSC FM audit group member list Oct15.xlsx” document |
| Changes in the forest management standard used for audit have occurred since the last audit |  |
| Stakeholder comments on the forest management of the FME were received | Comment summary and RA response: See below |

<table>
<thead>
<tr>
<th>Stakeholder Comment</th>
<th>RA Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>P1 A forest engineer pointed out the forestry groups’ forestry practices’ improvement in recent years.</td>
<td>No comment needed.</td>
</tr>
<tr>
<td>P3 Two indigenous communities reported not</td>
<td>Observation 01/16 is issued to advise the certificate</td>
</tr>
</tbody>
</table>
having been joined in the last twelve months and they had not been informed of the addition of *Forêt Hereford inc.* to the scope of the certificate. holder to check with these communities if they have special interests in the territory of the FHI.

A third party said it was satisfied with the compliance of hiking trails during forest operations on owners’ lots, while learning about the exact requirements of the standard on the protection of others uses on private property. The standard requires, among other things NGOs and the public affected by the forest management have opportunities to participate in the planning of this management. The manager must demonstrate that it has considered all comments and he followed up.

**Pesticide Use**

☒ FME does not use pesticides. (delete rows below)

### 2.2. Excision of areas from the scope of certificate

☒ Not applicable. Check this box if the FME has not excised areas from the FMU(s) included in the certificate scope as defined by FSC-POL-20-003. (*delete the rows below if not applicable*)

### 2.3. Conformance with applicable nonconformity reports

The section below describes the activities of the certificate holder to address each applicable non-conformity report (NCR) issued during previous evaluations. For each NCR a finding is presented along with a description of its current status using the following categories. Failure to meet NCRs will result in non-conformances being upgraded from minor to major status with conformance required within 3 months with risk of suspension or termination of the Rainforest Alliance certificate if Major NCRs are not met. The following classification is used to indicate the status of the NCR:

<table>
<thead>
<tr>
<th>Status Categories</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Closed</td>
<td>Operation has successfully met the NCR.</td>
</tr>
<tr>
<td>Open</td>
<td>Operation has either <em>not met</em> or has <em>partially met</em> the NCR.</td>
</tr>
</tbody>
</table>
## Description of Nonconformance and Related Evidence:

**Standard Requirement:**
Disturbance to seasonal watercourses should be avoided and temporary crossings must be restored so as to avoid damage to seasonal watercourses.

**Finding:**
Field visits have shown non-conforming practices on the protection of watercourses. Fording by machinery in a stream was observed. Rut runoff causing sedimentation in rivers was also observed when visiting a site in operation. Finally, a temporary watercourse crossing has not been restored to good practices.

**Evidence:**
- Auditor witnessed fording a by machinery in a watercourse
- Auditor witnessed sedimentation in a watercourse during operations
- Auditor witness of a bad restoration of a temporary crossing.

**Corrective action request:**
Organization shall implement corrective actions to demonstrate conformance with the requirement(s) referenced above.

**Timeline for conformance:**
By the next annual audit.

**Evidence provided by organization:**
- FERIC document on watercourse
- Interviews
- Field visit
- SPFSQ memo

**Finding after reviewing evidence:**
Documentation (e.g. memo, FERIC sheet) was distributed to the OGCs (organisme de gestion en commun or name translated: joint management group) which explains how to properly plan cutting sites especially to correctly choose temporary crossings and avoid impacts to watercourses. Active and restored temporary crossings were observed during the audit. They were well located and properly restored. No sedimentation problem was observed. Interviews with technicians and forest engineers have shown that steps were known for the site installation and restoration.

The NCR is closed.

**NCR Status:**
CLOSED

**Comments (optional):**
**Standard Requirement:**
Rutting related site damage does not exceed provincial acceptable levels.

**Finding:**
Although OGCs plan their work according to the sensitivity of soil rutting (winter intervention for sensitive sites), cases of severe rutting were observed during field visits. Some OGCs do not seem to apply their shutdown procedure / work postponement in case of excessive rutting. Furthermore, the quantification method used to quantify rutting (visual assessment), and the scale on which this assessment is done does not draw a realistic picture of the severity of the problem.

**Evidence:**
- Field visits
- Interview with machine operators
- Interviews with foremen and technicians responsible for the site evaluation
- Complaints received by third parties

**Corrective action request:**
Organization shall implement corrective actions to demonstrate conformance with the requirement(s) referenced above. Note: Effective corrective actions focus on addressing the specific occurrence described in evidence above, as well as the root cause to eliminate and prevent recurrence of the nonconformance.

**Timeline for conformance:**
By the next annual audit.

**Evidence provided by organization:**
- Field visits
- Interviews
- Memo: watercourse crossing site decommissioning and shutdown order/ work postponement
- General documentation on provincial rutting management
- ENR-08-01
- ENR-08-03
- FOR-08-03
- ENR-09-01

**Finding after reviewing evidence:**
The OGCs have a 20% maximum rutting target, with a threshold of 15% for rutting field measurement. Foremen are monitoring execution every 2-3 days. The operations monitoring frequency enables a quick reaction to avoid site damage. Field interviews and observations have shown that the procedures and the knowledge of professionals and forest workers are adequate to meet the 15% trail rutting target. The work shutdown procedure is known and applied by forestry workers. Rutting related site damage does not exceed provincial acceptable levels.

The NCR is closed.

**NCR Status:**
CLOSED

**Comments (optional):**

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**NCR #** 03/15  **Classification of NC :** Major Minor X

**Standard & indicator:** Rainforest Alliance Locally adapted Standards for Assessing Forest Management in the Great Lakes/Saint-Lawrence region with modifications to accommodate the Small and Low Intensity Forests (SLIMF) – April 2014, indicator 8.1.2

**Report section:** Appendix IV

**Description of Nonconformance and Related Evidence:**

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Rainforest Alliance Forest Management Annual Audit Report - this version is a translation. The official version of this report is the French version.
Standard requirement:
The monitoring program has been designed to see if the results of management activities conform to the stated objectives, and provide the information required to allow the necessary adaptations if the objectives are not met.

Finding:
Evaluate treatment effectiveness to achieve the stated objectives requires knowledge of existing conditions before intervention. However, the applicant’s current means do not make it possible to accurately decide on the conformity of the work once done, especially with regard to achieving its management objectives with respect to the structural attributes of the natural forest and old forest. This compromises the reliability of the monitoring results and results in the issuance of the non-conformance.

Evidence:
- Interviews with union employees
- Field visits
- Documentation Review

Corrective action request: Organization shall implement corrective actions to demonstrate conformance with the requirement(s) referenced above.
Note: Effective corrective actions focus on addressing the specific occurrence described in evidence above, as well as the root cause to eliminate and prevent recurrence of the nonconformance.

Timeline for conformance: By the next annual audit.

Evidence provided by organization:
- INS-08-02
- FOR-08-02
- INS-07-10
- Interviews with forest workers and OGC staff
- Field visits

Finding after reviewing evidence:
The new procedures plan to validate to the forest certification manager the preferred treatment in old forests considered HCVs. The manager may use external resources to confirm the treatment to prescribe. The HCV characteristics are highlighted so that the treatment monitoring can compare the intervention results after cutting with the data taken before the start of operations.

Despite efforts to improve data collection before and after cutting, there remains a lot of heterogeneity between OGCs including what information is collected (i.e. certain OGC collect the number of snags per hectare before and after cutting, while others only note it pre-intervention) and how they are registered (e.g. stems per hectare or stem classes per hectare).

During the field audit, Resamf seemed on the verge of integrating new fields to collect the information required by the FSC standard. However, the relevant information to be collected according to the stands and the types of intervention to comply with the indicator are still to be determined by the applicant. The heterogeneity of the data obtained in the field by the different OGCs does not allow the applicant to draw a similar picture of management activities across the certified territory.

For these reasons, the NCR is upgraded to Major.

NCR Status: OPEN

Comments (optional): NCR 03/15 is upgraded to Major. See section 2.6 of this report. The audit for the assessment of Major NCR 03/15 must take place within 3 months.
<table>
<thead>
<tr>
<th>NCR #</th>
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<th>Standard &amp; indicator</th>
<th>Report section</th>
<th>Description of Nonconformance and Related Evidence</th>
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| 04/15  | Major                | Rainforest Alliance Locally adapted Standards for Assessing Forest Management in the Great Lakes/Saint-Lawrence region with modifications to accommodate the Small and Low Intensity Forests (SLIMF) – April 2014, indicator 9.1.1b | Appendix IV | “…If HCVs or HCVF are present, manager shall take all reasonable steps to protect these values and/or reduce threats.”

**Finding:**

The Certification Manager maintains a geomatics tool locating all sensitive items (including species at risk) known on the certified territory, but interviews with employees of some OGCs revealed that they still use older versions of this database to perform their planning. In addition, verifications of the applicant's management system as well as interviews with employees have shown that HCVs newly identified on the field are not reported to the certification manager and then stored in the database provided for this effect. Digital transmission of information on the presence of HCVs on the certified territory is therefore not done so to plan adjustments to unforeseen impacts on sensitive elements in forestry operations, hence the issuance of this NCR.

**Evidence:**

- Documentation Review
- Interviews with workers of joint management bodies.

**Corrective action request:**

Organization shall implement corrective actions to demonstrate conformance with the requirement(s) referenced above. Note: Effective corrective actions focus on addressing the specific occurrence described in evidence above, as well as the root cause to eliminate and prevent recurrence of the nonconformance.

**Timeline for conformance:**

By the next annual audit.

**Evidence provided by organization:**

- Resamf
- FOR-08-02
- INS-08-02
- ENR-08-02
- Interviews

**Finding after reviewing evidence:**

The SPFSQ and OGCs have adopted new procedures to ensure that the shape files used are as up-to-date as possible. The Agence de mise en valeur de la forêt privée de l’Estrie is responsible for notifying the SPSFQ prior to the end of winter of the new CDPNQ data regarding endangered and vulnerable species. The auditor observed the updated versions used by the OGCs.

**NCR Status:**

CLOSED

**Comments (optional):**

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<table>
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<th>Standard &amp; indicator</th>
<th>Report section</th>
<th>Description of Nonconformance and Related Evidence</th>
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</thead>
</table>
| 05/15  | Major                | Rainforest Alliance Locally adapted Standards for Assessing Forest Management in the Great Lakes/Saint-Lawrence region with modifications to accommodate the Small and Low Intensity Forests | Appendix IV | "...If HCVs or HCVF are present, manager shall take all reasonable steps to protect these values and/or reduce threats."

**Finding:**

The Certification Manager maintains a geomatics tool locating all sensitive items (including species at risk) known on the certified territory, but interviews with employees of some OGCs revealed that they still use older versions of this database to perform their planning. In addition, verifications of the applicant's management system as well as interviews with employees have shown that HCVs newly identified on the field are not reported to the certification manager and then stored in the database provided for this effect. Digital transmission of information on the presence of HCVs on the certified territory is therefore not done so to plan adjustments to unforeseen impacts on sensitive elements in forestry operations, hence the issuance of this NCR.

**Evidence:**

- Documentation Review
- Interviews with workers of joint management bodies.

**Corrective action request:**

Organization shall implement corrective actions to demonstrate conformance with the requirement(s) referenced above. Note: Effective corrective actions focus on addressing the specific occurrence described in evidence above, as well as the root cause to eliminate and prevent recurrence of the nonconformance.

**Timeline for conformance:**

By the next annual audit.

**Evidence provided by organization:**

- Resamf
- FOR-08-02
- INS-08-02
- ENR-08-02
- Interviews

**Finding after reviewing evidence:**

The SPFSQ and OGCs have adopted new procedures to ensure that the shape files used are as up-to-date as possible. The Agence de mise en valeur de la forêt privée de l’Estrie is responsible for notifying the SPSFQ prior to the end of winter of the new CDPNQ data regarding endangered and vulnerable species. The auditor observed the updated versions used by the OGCs.

**NCR Status:**

CLOSED

**Comments (optional):**

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### Description of Nonconformance and Related Evidence:

#### Standard Requirement:
The manager demonstrates that the management strategies and measures selected to maintain or restore High Conservation Values are consistent with a precautionary approach, and with respect to each conservation attribute:

- Will create conditions with a very high probability of securing the long-term maintenance or the restoration of the applicable conservation attribute;
- Are being implemented; and
- Are proving effective (or are adapted as required) based on the results of monitoring.

#### Finding:
The markers which frame the forestry activity types permitted in an old forest stand are not clearly defined by the applicant and the effectiveness of the existing measures is not demonstrated among others regarding the maintenance or restoration a) of an irregular structure at the stand level and b) a diversity of tree species including long-lived species. For example, in one of two interventions that took place in an HCVF on the certified territory, 100% of the merchantable volume of two companion species (HEG, CET) was harvested. In the other HCVF, 100% of the merchantable volume of three tree species were collected from two harvest sites.

Furthermore, the effectiveness of protective measures granted to exceptional forest ecosystems (EFE) HCVs of “rare” and “refuge” type by the applicant are not sufficiently supported by evidence and are below what is required in this sense by scientific experts, the standard requiring that measures selected for the HCV maintenance or restoration comply with the precautionary principle and guaranteeing success.

#### Evidence:
- Documentation Review
- Interviews with union employees

#### Corrective action request:
Organization shall implement corrective actions to demonstrate conformance with the requirement(s) referenced above. Note: Effective corrective actions focus on addressing the specific occurrence described in evidence above, as well as the root cause to eliminate and prevent recurrence of the nonconformance.

#### Timeline for conformance:
By the next annual audit.

#### Evidence provided by organization:
- Interviews
- FO-08-02
- EN-08-02

#### Finding after reviewing evidence:
The INS-08-02 instruction, FO-08-02 form and EN-08-02 registration document have been updated following a meeting with the OGCs to ensure that the requirements and operations are adapted to HCVFs. The INS-08-02 describes the procedures to be undertaken before, during and after the intervention. No operation can be undertaken by an OGC unless the head of the SPFSQ grants its approval to the project. Stakeholders must now agree before working on features or high conservation values to keep in the stand. The update helped to clarify the guideline and the implementation of conservation measures and monitoring strategies. Consultations with external resources can take place to prescribe the most appropriate treatment to stands. The INS-08-02 describes the monitoring required after intervention that helps confirm that the planned terms and conditions were in compliance and how to proceed to assess the effectiveness of applied procedures. The ENR-08-02-register allows...
the recording of HCV interventions and meet planned timelines to evaluate their effectiveness.

**NCR Status:** CLOSED

**Comments (optional):**

<table>
<thead>
<tr>
<th>NCR #</th>
<th>06/15</th>
<th>Classification of NC :</th>
<th>Major</th>
<th>Minor X</th>
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</thead>
<tbody>
<tr>
<td>Standard &amp; indicator:</td>
<td>Rainforest Alliance Locally adapted Standards for Assessing Forest Management in the Great Lakes/Saint-Lawrence region with modifications to accommodate the Small and Low Intensity Forests (SLIMF) – April 2014, indicator 10.5.1</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Report section:</td>
<td>Appendix IV</td>
<td></td>
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</tbody>
</table>

**Description of Nonconformance and Related Evidence:**

**Standard Requirement:**
The total area of plantations established on natural forests shall not exceed 10% of the management unit.

**Finding:**
According to the applicant’s plantation register (ENR-08-04), the area occupied by plantations (13 301 ha) in the territory certified in 2014 represent 10.14% of the management unit. This goes beyond what is allowed by the standard. The SPFSQ proposes to develop a restoration plan to fill that gap. The contents of this plan will be evaluated by RA when it is submitted.

**Evidence:**
- Plantation register (ENR-08-04)
- Interview with certification manager

**Corrective action request:**
Organization shall implement corrective actions to demonstrate conformance with the requirement(s) referenced above. Note: Effective corrective actions focus on addressing the specific occurrence described in evidence above, as well as the root cause to eliminate and prevent recurrence of the nonconformance.

**Timeline for conformance:**
By the next annual audit.

**Evidence provided by organization:**
- Excel Sheet - Calculation of plantation areas in the scope of the certificate
- Interviews

**Finding after reviewing evidence:**
Interviews and calculations have shown that plantation areas occupied less than 10% of the areas included in the scope of the certificate. The reforested fallow areas had been included in the calculation of last year overestimated the plantation proportion in the territory.

The NCR is closed.

**NCR Status:** CLOSED

**Comments (optional):**
2.4. New nonconformity reports issued as a result of this audit

<table>
<thead>
<tr>
<th>MAJOR NCR #</th>
<th>Classification of NC</th>
<th>Major X</th>
<th>Minor</th>
</tr>
</thead>
<tbody>
<tr>
<td>03/15</td>
<td>Rainforest Alliance Locally adapted Standards for Assessing Forest Management in the Great Lakes/Saint-Lawrence region with modifications to accommodate the Small and Low Intensity Forests (SLIMF) – April 2014, indicator 8.1.2</td>
<td></td>
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</tr>
</tbody>
</table>

Report section: Appendix IV

**Description of Nonconformance and Related Evidence:**

**Standard Requirement:**
The monitoring program has been designed to see if the results of management activities conform to the stated objectives, and provide the information required to allow the necessary adaptations if the objectives are not met.

**2015 finding:**
Evaluate treatment effectiveness to achieve the stated objectives requires knowledge of existing conditions before intervention. However, the applicant’s current means do not make it possible to accurately decide on the conformity of the work once done, especially with regard to achieving its management objectives with respect to the structural attributes of the natural forest and old forest. This compromises the reliability of the monitoring results and results in the issuance of the non-conformance.

**2016 finding:**
The new procedures provide validation to the manager of forest certification for preferred treatment in old forests considered HCVs. The manager may use external resources to confirm the treatment to prescribe. The HCV characteristics are highlighted so that the treatment monitoring can compare the intervention results after cutting with the data taken before the start of operations.

Despite efforts to improve data collection before and after cutting, there remains a lot of heterogeneity between OGCs including what information is collected (i.e. certain OGC collect the number of snags per hectare before and after cutting, while others only note it pre-intervention) and how they are registered (e.g. stems per hectare or stem classes per hectare).

During the field audit, Resamf seemed on the verge of integrating new fields to collect the information required by the FSC standard. However, the relevant information to be collected according to the stands and the types of intervention to comply with the indicator are still to be determined by the applicant. The heterogeneity of the data obtained in the field by the different OGCs does not allow the applicant to draw a similar picture of management activities across the certified territory.

For these reasons, the NCR is upgraded to Major.

**Evidence:**
- INS-08-02
- FOR-08-02
- INS-07-10
- Interviews with forest workers and OGC staff
- Field visits

**Corrective action request:** Organization shall implement corrective actions to demonstrate conformance with the requirement(s) referenced above.
Note: Effective corrective actions focus on addressing the specific occurrence described in evidence above, as well as the root cause to eliminate and prevent recurrence of the nonconformance.

**Timeline for conformance:** Within 3 months of the report finalization (02.05.2016).

**Evidence provided by** PENDING
## Finding after reviewing evidence:
PENDING

## NCR Status:
OPEN

## Comments (optional):

### NCR # 01/16
#### Classification of NC:
Major | Minor X
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#### Standard & Indicator:
Rainforest Alliance Locally adapted Standards for Assessing Forest Management in the Great Lakes/Saint-Lawrence region with modifications to accommodate the Small and Low Intensity Forests (SLIMF) – April 2014, indicator 6.2.5

#### Report Section:
Appendix IV

### Description of Nonconformance and Related Evidence:

#### Standard Requirement:
Special guidelines are applied to protect rare and unusual species.

#### Finding:
Hemlock is considered a rare and unusual species in the FHI. However, no evidence was presented to show how the species will be protected or can be protected during harvesting.

#### Evidence:
- Forest landscape historical development information sheet of Forêt communautaire Hereford
- Forest mosaic and wildlife habitats’ analysis document, version 2.1
- FHI 2013 Forest Management Plan

#### Corrective action request:
Organization shall implement corrective actions to demonstrate conformance with the requirement(s) referenced above. Note: Effective corrective actions focus on addressing the specific occurrence described in evidence above, as well as the root cause to eliminate and prevent recurrence of the nonconformance.

#### Timeline for conformance:
By the next annual audit

#### Evidence provided by organization:
PENDING

#### Finding after reviewing evidence:
PENDING

## NCR Status:
OPEN

## Comments (optional):

### NCR # 02/16
#### Classification of NC:
Major | Minor X
--- | ---

#### Standard & Indicator:
Rainforest Alliance Locally adapted Standards for Assessing Forest Management in the Great Lakes/Saint-Lawrence region with modifications to accommodate the Small and Low Intensity Forests (SLIMF) – April 2014, indicator 9.1.2

#### Report Section:
Appendix IV

### Description of Nonconformance and Related Evidence:

#### Standard Requirement:
The manager ensures that a credible external review is undertaken of the HCVF assessment.

#### Finding:
The HCVF assessment for Forêt Hereford inc. was conducted by the Appalachian Corridor (ACA). The
work carried out helped draft the conservation easement. However, there is no external review of the work performed by CA for the FHI.

**Evidence:**
- Conservation Easement

<table>
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<td>Finding after reviewing evidence:</td>
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<td><strong>Comments (optional):</strong></td>
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<tr>
<td>03/16</td>
<td>Rainforest Alliance Locally adapted Standards for Assessing Forest Management in the Great Lakes/Saint-Lawrence region with modifications to accommodate the Small and Low Intensity Forests (SLIMF) – April 2014, indicator 9.1.3</td>
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</tbody>
</table>

**Description of Nonconformance and Related Evidence:**

**Standard Requirement:**
A public summary of how concerns raised during the consultation and review process have been addressed.

**Finding:**
No HCVF assessment comment summary for the Forêt Hereford Inc. presenting the issues raised in the consultation and how they were considered is available to the public.

**Evidence:**
- Conservation easement summary

<table>
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<tr>
<td><strong>Comments (optional):</strong></td>
<td></td>
</tr>
</tbody>
</table>
2.5. Audit decision

The table below gives an overview of the NCRs status after the current audit.

<table>
<thead>
<tr>
<th>NCR type</th>
<th>#</th>
</tr>
</thead>
<tbody>
<tr>
<td>Open before current audit</td>
<td>6</td>
</tr>
<tr>
<td>Closed</td>
<td>5</td>
</tr>
<tr>
<td>Upgraded to Major</td>
<td>1</td>
</tr>
<tr>
<td>New NCRs</td>
<td>5</td>
</tr>
<tr>
<td>New Major NCRs</td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Certification Recommendation</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>✅ Certification requirement met:</td>
<td>client approved for certificate maintenance: Minor NCR(s) upgraded to Major(s)</td>
</tr>
<tr>
<td>☐ Certification requirements not met:</td>
<td>major non conformance identified that need to be addressed during 3 months after the final report date</td>
</tr>
<tr>
<td>Certification Suspension required: major non-conformance not addressed.</td>
<td></td>
</tr>
</tbody>
</table>