Audit Announcement (Form 3)

Please note that all data entered in this audit ann			enter transcription and a second					
SiteID(s) is/are provided by ASC in the confirmat	ouncement sheet will be as	of this Form 7	helds in the sheets of the audit repr	rt itself.				
	on email or the publication	or this Form 3.						
eneral, client/CAB Information								
1.1 Document Type		Audit announcement						
1.2 Document language		Fnelish						
13 Second document language		Japanese						
1.4 Unit of certification type		Single Site						
1.4.1 Company name		Dainichi Corporation 株式会社	V/-a					
1.4.2 UoC Name		Uchiumi Suisan Co., Ltd. 株式会社	t内海水產					
1.5 Country where UoC is located		Janan						
1 s ASC Standard		Seabass, Seabream, Meas						
1.7 Standard version		11						
1.8 Certification process is subject to CAR version		2.2						
1.6 Certification process is subject to CAR version								
1.9 Name of the Conformity assessment body (CAB)		AMITA Corporation		1				
1.9 Name or the Conformity assessment body (CAB)				,				
Client contact person - from the UoC								
1.15 First name		Yuta 男太		1				
116 Surname		Yuta 湯田						
1.17 Position in the UoC (Job title)		Aquaculture Technical Division \$	(四事某節					
1.18 Fmail address		vutatidainichi-ff co in						
1.19 Phone number		(+81)-895-27-3200						
120 Other means of contact e.e. Skype		1.017 035 27-3200						
udit Information					_		_	
*								
2 1 ASC standard principles covered by the audit		standard principles						
2	I.1 Principle 1	Covered						
2	2 Principle 2	Occupand	1					
2	3 Principle 3	Covered						
2	A Principle 4	Covered	1					
	5 Principle 5	Onvered	1					
,	.6 Principle 6	Not Governd	1					
2	1.7 Principle 7	Not Governd						
z z	8 Principle 8	Onvered Onvered						
,	X Principle X	I CONVERME						
2.2 Activities covered under the scope of the	Authory	Under ecope of sertification	Under Scope of this sudit	Medical				
2.2 Activities covered under the scope of the certification and under the scope of the audit.	Assessed	Caron Totale of Caronical	Chicago en chicago	No.				
certification and under the scope of the audit. Activities in the table apply to final product only								
Antiother in the false and/o to final rendert new	2.1 Stocking	Governed	Covered					
	2 Nursing	Not Coursed	Not Coursed					
2	7.7 Growing Out	Covered	Countred					
2	2.4 Transferring	Not Covered	Not Covered					
z z	2.5 Harvest	Covered	Covered					
	2.5 Harvest	Covered	Covered					
	7 Fallowing	Counted	Coursed					
2	2.7 Fallowing 2.8 Transportation	Covered	Covered					
2	(% Transportation		Not Covered					
,	9 Storage (if present at farm) 10 Processing (if present at fa	Met Coursed	Not Covered Not Covered					
2.2	10 Processing (if present at fa 11 Packing (if present at farm)	rmy new Coveres	Not Covered Not Covered					
		Not Govered Not Govered	Not Covered Not Covered					
**	12 Other (Please describe)	Not Covered	Not Governed					
2.3 Certification cycle		urveillance audit						
2.4 Audit type	۰	urveillance abort						
2.5 Audit number in certification cycle		2						
2 fi Will harvesting he witnessed during audit?		Yes						
2 6 1 If harvest is NOT witnessed clease justify:	-							
2.7 Audit conducted (On-site/Remote):		On-site						
Please indicate the hours assigned to the different aud	t activities in the table below.	separated by the hours spend on the ac	ivities by the environmental- and social	auditor(s):				
2.8	2.9	2 10	J					
Time assisted to scall antidities	Social Auditor(s)	Environmental auditor(s)						
Off-site activities	0	24						
On-site activities	0	8						
Total man days	0	4	1					
Audit teem and other involved paragra								
211	2 12	2 13	214	2.15	1			
Surname	First name	Role	Expertise needed for the audit	Person on-site or	i			
Surname	Pirat name	Note	Commend for technical assesses	remote?				
Ozawa /NII	Naova III ft.	Audit team leader	-	On-site				
Koketsu 2000	Waters IR	Technical Auditor		On-site	•			
KOKECSU MEME	Watani 26	Lectrical Auditor	-	Lin-site	1			
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. Site information								
Control and Contro								
	Ta a							
	13.3	3.4	3.6	3.13	3.14	3.15	3.16	3.17 3.18
								Start date of audit End date of

Stakeholder	eng	memega

41	4.2		4.4	4.5		4.7		49	
Name of Company/ Organisation if applicable	Contact person – First name	Contact person - Surname	Country where stakeholder is	Email address of contact person/ stakeholder	Stakeholder type	If stakeholder type "other" was selected what type?	Contact date stakeholder	Did the stakeholder submit comments?	Stakeholder comments relate to what ASC standard indicator
									indicator