



Management System Certification Audit Summary Report

Organization:	Jabatan Perpaduan Negara dan Integrasi Nasional				
Address:	Aras 7-10 Blok E2, Kompleks E, Pusat Pentadbiran Kerajaan Persekutuan 62502 Putrajaya				
Standard(s):	ISO 9001:2008	Accreditation Body(s): UKAS & Standards Malaysia			
Representative:	Mr. Ho Khok Hua / Zarina bt. Zakaria				
Site(s) audited:	As per address above	Date(s) of audit(s):	27/8/13 – JPNIN WP 28/8/13 – JPNIN Kuching 30/8/13 – JPNIN Pekan 6/9/13 – JPNIN Kangar 6/9/13 – JPNIN Melaka 6/9/13 – Head Office, Putrajaya		
EAC Code:	36	NACE Code:	75.12, DSM – 84.12	Technical Area code:	QM36.1
Effective No. of Personnel:	920	No. of Shifts:	Normal		
Lead auditor:	Samsuddin b. Mustahkim (JPNIN Wilayah Persekutuan & HQ, Putrajaya)	Additional team member(s):	- Michael Chia (JPNIN Kuching, Sarawak) - Ahmad Amin b. Isa (JPNIN Pekan, Pahang) - Eddie Fuad b. Samin (JPNIN Kangar, Perlis) - Normalis bt. Ali (JPNIN Melaka) - Quek Chee Hock (JPNIN HQ, Putrajaya)		
This report is confidential and distribution is limited to the audit team, client representative and the SGS office.					

1. Audit objectives

The objectives of this audit were:

- to confirm that the management system conforms with all the requirements of the audit standard;
- to confirm that the organization has effectively implemented the planned management system;
- to confirm that the management system is capable of achieving the organization's policy objectives.

2. Scope of certification

The audit covered 6 sites (including Head Office) performing the following certification scope:

Management of National Unity, 'Rukun Tetangga' and Unity Kindergarten (Pengurusan Perpaduan Negara, Rukun Tetangga dan Tabika Perpaduan)

The audit covered all the ISO 9001:2008 requirements with exclusion made to Standard clause 7.3 (Design & Development), 7.5.2 (validation of process), 7.5.4 (customer property) and 7.6 (control of measuring devices) as justified in Quality Manual.

[Note: The detail audit scope, particularly identification of the organizational or functional units or processes audited

Job n°:	MY00986	Report date:	6 th September 2013	Visit Type:	Renewal	Visit n°:	1R
CONFIDENTIAL		Document:	GS0304	Issue n°:	13	Page n°:	1 of 12



and the time of the audit (including the dates and places where the audit activities (on site or offsite) were conducted) can be found in the Audit Planning Matrix and Audit Plan documents]

Has this scope been amended as a result of this audit? Yes No

This is a multi-site audit and an Appendix listing all relevant sites and/or remote locations has been established (attached) and agreed with the client Yes No

3. Current audit findings and conclusions

The audit team conducted a process-based audit focusing on significant aspects/risks/objectives required by the standard(s). The audit methods used were interviews, observation of activities and review of documentation and records.

The structure of the audit was in accordance with the audit plan and audit planning matrix included as annexes to this summary report.

The audit team concludes that the organization has has not established and maintained its management system in line with the requirements of the standard and demonstrated the ability of the system to systematically achieve agreed requirements for products or services within the scope and the organization's policy and objectives.

Number of nonconformities identified: 0 Major 3 Minor

Therefore the audit team recommends that, based on the results of this audit and the system's demonstrated state of development and maturity, management system certification be:

Granted / Continued / Withheld / Suspended until satisfactory corrective action is completed.

4. Previous Audit Results

The results of the last audit of this system have been reviewed, in particular to assure appropriate correction and corrective action has been implemented to address any nonconformity identified. This review has concluded that:

- Any nonconformity identified during previous audits has been corrected and the corrective action continues to be effective.
- The management system has not adequately addressed nonconformity identified during previous audit activities and the specific issue has been re-defined in the nonconformity section of this report.

5. Audit Findings

The audit team conducted a process-based audit focusing on significant aspects/risks/objectives. The audit methods used were interviews, observation of activities and review of documentation and records.

The management system documentation demonstrated conformity with the requirements of the audit standard and provided sufficient structure to support implementation and maintenance of the management system. Yes No

The organization has demonstrated effective implementation and maintenance / improvement of its management system. Yes No

The organization has demonstrated the establishment and tracking of appropriate key performance objectives and targets and monitored progress towards their achievement. Yes No

Job n°: MY00986	Report date: 6 th September 2013	Visit Type: Renewal	Visit n°: 1R
CONFIDENTIAL	Document: GS0304	Issue n°: 13	Page n°: 2 of 12

The internal audit program has been fully implemented and demonstrates effectiveness as a tool for maintaining and improving the management system. Yes No

The management review process demonstrated capability to ensure the continuing suitability, adequacy and effectiveness of the management system. Yes No

Throughout the audit process, the management system demonstrated overall conformance with the requirements of the audit standard. Yes No

Certification claims are accurate and in accordance with SGS guidance N/A Yes No

6. Significant Audit Trails Followed

The specific processes, activities and functions reviewed are detailed in the Audit Planning Matrix and the Audit Plan. In performing the audit, various audit trails and linkages were developed, including the following primary audit trails, followed throughout:

- Relating to Previous Audit Results:

NC N°	Maj/Min	Non-conformity description	Results of action taken against previous audit NC
1, 2 & 3	Minor	Refer to closed out CAR appended to this report.	Actions taken were detailed out in the CAR issued. These were reviewed and were found satisfactorily addressing the cause of the non-conformance being raised. Evidence was verified and no recurrence was sighted during the course of audit, hence, the non-conformance was closed out accordingly.
Observation N°		Improvement/observation description	Results of action taken against previous audit improvement / observations
N° 1 to 10		The organization had reviewed all the observations raised and took necessary actions. Actions taken were appropriately reviewed and were found sufficient and accepted.	

- Relating to this Audit;

System document	System document comprises of Quality Manual, Quality Procedure and interaction with related work instructions. Few new procedures had been established for extension of Unity Management Division (PP and PMIN sections).
Result of document review	Brief documentation review had verified that the current implemented documentation system is sufficiently addressing the requirements of ISO 9001:2008.
Record of management review	Planned once a year. The latest Management Review Meeting was conducted on the 24 th July 2012, chaired by Director General. All required agenda were adequately covered. This appears to represent a satisfactory review by the Top Management to review and confirm the suitability and effectiveness of the QMS system implementation.

Record of internal audit	The internal audit frequency is yearly. Year 2013 internal audit planned on the 13 th May to 7 th June 2013 covering the Head Office and all districts of 13 States. Reviewed several audit summary reports for example Batu Pahat, Tuaran etc. and found all were in order. For year 2013, a total of 13 major and 86 minor non-conformities were raised with 138 observations highlighted. The results of audit were compiled and presented in management review meeting for management comment sighted. The results and internal audit done appears to represent a reliable tool that the QMS has been implemented and properly maintained by internal resources.		
Compliance evaluation	Akta Rukun Tetangga 2012		
Comments on:			
1. Corrective and preventive action	Corrective & preventive action are registered via organization's CAR or NCR formats for customer complaint and internal related non-conformity. Corrective action on internal audit findings and customer complaints were appropriately reviewed. Cause of non-conformity/potential non-conformity, investigation and effectiveness of action taken were addressed accordingly. Preventive action is recorded as part of organization's improvement activity.		
2. Complaints and appeals	Reviewed direct complaint cases received from external interested parties and internal staffs for period of January 2013 till times of audit with a total of 48 cases. There are 10 pending cases still in progress, e.g. complaint # 28/2013, 27/2013, 33/2013, 35/2013, etc.) and 38 closed out cases, e.g. as reviewed on complaint # 16/2013, 30/2013, 23/2013. Found customers were responded and evidences kept as required.		
3. Product Re-call	NA		
4. Customer Satisfaction records	Customer satisfaction level is measured through surveys conducted twice a year at districts and states levels. Districts and states levels surveys were reviewed at all the 5 sites audited. Surveys were feedback, compiled and analysed by the Head Offices. Response from surveys were encouraging with positive & negative responses were gathered and planned for necessary improvement.		
5. Progress of planned activities aimed at continual improvement	Overall summary of continual improvement through the used of the quality policy, objectives monitoring, audit results, analysis of data, corrective & preventive actions and management review were found in place.		
In summary, based on files reviewed and access to records of complaints, the organization has investigated its own systems and procedures and taken appropriate corrective action which include measures for but not limited to the followings: <i>(tick where appropriate)</i> :			
Notification to appropriate authorities if required by regulation	<input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Restoring conformity as quickly as practicable	<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Preventing recurrence	<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Evaluating and mitigating any adverse product quality risks	<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Ensuring satisfactory interaction with other components of the ISO 9001 based system	<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Assessing the effectiveness of the corrective measures adopted	<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Comment on key processes and major product requirements.			

Comment on key processes and major product requirements.

- **Unity Management Division** – This was the new division established and included under the new scope extension. The division comprised of two sections i.e. Administration of Social Harmony Issue (*Pengurusan Perpaduan*) – PP and Administration of Unity Activities (*Perpaduan Masyarakat & Integrasi Nasional*) – PMIN. Establishment of PP was with the objective of monitoring & intervention of any potential incident that could adversely affect national harmony whereas PMIN main goal was managing nationwide activities for the purpose of creating and enhancing community cohesion & national integration. Activities of PP and PMIN sections were limited to Head Office at the moment. However, execution of PP activities is expected to be fully in place by next year where yearly activities planning by the PP section in Head Office will be realised i.e. through all districts or states levels. PMIN processes were verified through the established web-based system e-SEPAKAT, e.g. 1) issue on use of kalimah Allah demonstration at Dataran Retal, Kota Baharu Kelantan dated 3/2/13 and 2) civilian protest on construction of Hindu temple narby surau Al-Husna PJS dated 29/9/12. PP processes were trailed i.e. via the Activities Calender, its planning and implementation, e.g. activities on Debat Perpaduan antara IPT dated 28/6/13 – 2/7/13 and Program Integrasi Ilmu & Budaya dated 23-25/5/13.
- **Tabika Perpaduan (TP)** – Covering processes of Unity Kindergarten opening, application/removal & approval, appointment of administration members, operations, distribution & allocation of food & drinks budgets and relevant collection & TP analysis of data. For all audited sites (JPNIN Kuching, Kuantan, Kangar, Melaka, Wilayah Persekutuan Kuala Lumpur and Head Office, Putrajaya) audit sampled were checked for several TP, e.g. for TP Callalily, TP Kenanga, TP Carnation, TP Bougainville, TP Taman Kubong Jaya Fasa 2, TP Tabuan Melayu Kemboja, TP Taman Heng Guan Kenanga, TP Bandar Baru Semariang Ros and TP Pangsapuri Teratak Muhibbah 2B. Relevant records were trailed accordingly including necessary trails to be confirmed at Head Office.
- **Rukun Tetangga (RT)** – Covering processs of establishment of RT areas, appointment of administration members, distribution & allocation of grants, training of administration members, relevant collection & analysis of RT data and application of administration of Skim Rondaan Sukarela (SRS). For all audited sites (JPNIN Kuching, Kuantan, Kangar, Melaka, Wilayah Persekutuan Kuala Lumpur and Head Office, Putrajaya) audit sampled were verified for several RT, e.g. KRT Kubang Gajah, Padang Melangit, Pekan Kuala Sanglang, KRT Taman Bertam Impian, KRT Kampung Kandang, KRT Taman Desa Taming Sari, KRT Taman Seri Gamelan, KRT Pusat Komuniti Perumahan Bersepadu Bukit Kenau, KRT Kg. Pinggan Jaya, KRT PPD Telaga Air, KRT Taman Matang Ville, KRT Matang Jaya and KRT Taman Melati Kawasan 8 (Block F). Relevant records were trailed accordingly including trails to be confirmed at Head Office, where necessary.
- **Training & Competency** – Verified for several staffs e.g. for Noryati Din, Che Kamariah, Nurul Huda Yusof, Zarida Yunus, Nur Hidayah, Siti Munirah, Fauziah Mohd Ali, Norshahanis Sidek, Siti Mariam Norfariza Binti Nakim, Norazelinawati, Siti Noryani, Polly Banja, Siti Jainab, Seniorita Thomas, Khumairah Ali Omar from several positions and job responsibilities. Other relevant trails including training calenders and respective training & training effectiveness evaluation records.

Job n°:	MY00986	Report date:	6 th September 2013	Visit Type:	Renewal	Visit n°:	1R
CONFIDENTIAL		Document:	GS0304	Issue n°:	13	Page n°:	5 of 12

Other legible, identifiable and traceable records to the activities audited based on random sampling process were:

- Quality Objectives, Continual Improvement and Analysis of Data – Reviewed respective sections/areas quality objectives accordingly. Monitoring of objectives, analysis of data and continual improvement were verified as well.
- Document and Record Control – The documentation structure & control is adequate and compliance with the standard. The approval, amendment, identification, issuance & obsolete of documents found to be appropriate and accordance to documented procedure. Documents are accessible to all states offices via the internal internet system. Record control, storage, retrieval, identification and retention period are adequately addressed as trail throughout the audit process.

Others secondary interaction processes as per the audit plan was followed through and where appropriate the activities and functions were reviewed and highlighted as either as non-conformities and/or opportunities for improvement points.

7. Nonconformities

Non-Conformity	N° <u>1</u> of <u>3</u>	<input type="checkbox"/> Major	<input checked="" type="checkbox"/> Minor
Department / Function:	Tabika Perpaduan – HQ	Standard Ref.:	ISO 9001:2008 (7.5.1)
Document Ref.:	JPNIN/TP/01	Issue / Rev. Status:	0
Details of Nonconformity:	Acknowledgement receipt of application of new kindergarten class (<i>Perakuan Penerimaan Permohonan pembukaan kelas tabika</i>) was issued more than 14 days as per in-house procedure requirement. The acknowledgement was found issued on the 25 th August 2011 upon receipt on the 1 st July 2011.		

Non-Conformity	N° <u>2</u> of <u>3</u>	<input type="checkbox"/> Major	<input checked="" type="checkbox"/> Minor
Department / Function:	Administration of social harmony issue – PP, HQ	Standard Ref.:	ISO 9001:2008 (7.5.1)
Document Ref.:	JPNIN/PP/01	Issue / Rev. Status:	0
Details of Nonconformity:	Weaknesses were noted within the administration of social harmony issues (<i>pengurusan isu keharmonian</i>), i.e. on racial clashes issue at Taman Medan Petaling Jaya dated 13/2/12 as evidenced below; <ul style="list-style-type: none"> i) i-kes system was not reporting on number of person been injured as required, and ii) no evidence was noted within the i-kes reporting system that mediator report had been established and/or made available as to significantly justify the consequent action taken (<i>arahanTindakan</i>). 		

Non-Conformity	N° <u>3</u> of <u>3</u>	<input type="checkbox"/> Major	<input checked="" type="checkbox"/> Minor
Department / Function:	Administration of <i>Rukun Tetangga</i> – RT, HQ	Standard Ref.:	ISO 9001:2008 (7.5.1)
Document Ref.:	JPNIN/RT/02	Issue / Rev. Status:	2
Details of Nonconformity:	For newly established <i>Rukun Tetangga</i> , JPNIN's web-site was not updated with the committee members' (<i>ahli jawatankuasa, AJK</i>) information within the designated one		

Job n°:	MY00986	Report date:	6 th September 2013	Visit Type:	Renewal	Visit n°:	1R
CONFIDENTIAL		Document:	GS0304	Issue n°:	13	Page n°:	6 of 12

month time-frame as required by in-house procedure, e.g. for KRT Alam D'16 Seksyen 16, Shah Alam (approval date 9th April 2013), KRT Rumah Berangkai Dua Tingkat, Seksyen 24A, Shah Alam (approval date 8th January 2013) and KRT Pandamaran (approval date 29th January 2013).

- Client Proposed Action to Address Minor Non-Conformances Raised at this Audit:

NC N ^o	Maj / Min	Non conformity description	Comments on proposed corrective action
1 - 3	Minor	Refer to section 7 for details (as above).	The organization has analyzed the causes to the non-conformities listed in section 7 above and has proposed appropriate corrective actions to improve effectiveness of its management system and prevent recurrence. Details on the cause of the nonconformities and corrective actions can be referred to organization's corrective action record appended to this report. The auditor has reviewed the submitted action plan for the minor non-conformity and found it was acceptable. Verification of the improvement action plan taken shall take place in the next renewal visit.

Nonconformities detailed here shall be addressed through the organization's corrective action process, in accordance with the relevant corrective action requirements of the audit standard, including actions to analyse the cause of the nonconformity and prevent recurrence, and complete records maintained.

- Corrective actions to address identified major nonconformities shall be carried out immediately and SGS notified of the actions taken within 30 days. An SGS auditor will perform a **follow up visit** within 90 days to confirm the actions taken, evaluate their effectiveness, and determine whether certification can be granted or continued.
- Corrective actions to address identified major nonconformities shall be carried out immediately and **records with supporting evidence sent to the SGS auditor** for close-out within 90 days.
- Corrective Actions to address identified minor non conformities shall be documented on a action plan and sent by the client to the auditor within 90 days for review. If the actions are deemed to be satisfactory they will be followed up at the next scheduled visit.
- Corrective Actions to address identified minor non-conformities have been detailed on an action plan and the intended action reviewed by the Auditor, deemed to be satisfactory and will be followed up at the next scheduled visit.
- Appropriate immediate action taken in response to each non-conformance as required.

Note:- Initial, Re-certification and Extension audits – recommendation for certification cannot be made unless check box 4 is completed. For re-certification audits the time scales indicated may need to be reduced in order to ensure re-certification prior to expiry of current certification.

Note: At the next scheduled audit visit, the SGS audit team will follow up on *all* identified nonconformities to confirm the effectiveness of the corrective actions taken.

Job n ^o :	MY00986	Report date:	6 th September 2013	Visit Type:	Renewal	Visit n ^o :	1R
CONFIDENTIAL		Document:	GS0304	Issue n ^o :	13	Page n ^o :	7 of 12

8. General Observations & Opportunities for Improvement

JPNIN HQ Putrajaya

1. Letter or instruction to follow specific Pekeliling which may bypass any reference SOP could be drafted prior to implementation. Such letter needs to specify validity period of its implementation and endorsed by the top management or by the *Ketua Pengarah*. This could avoid any potential misunderstanding among state & district levels on its implementation.
2. Category of non-quantitative training could be gradually quantify to reflect KPI (objectives) of *peraksanaan aktiviti perpaduan* (unity activity implementation). (PMIN)
3. *Lampiran 2 senarai semak* of *peraksanaan aktiviti perpaduan* (attachment 2 checklist of unity activity implementation) to be signed appropriately. (PMIN)
4. i-kes file dated 3/2/13 on *kalimah Allah protes* (kalimah Allah protest) at Dataran Rehal, Kota Baharu referred. Status of action which was wrongly reported or logged as 'action taken' is to be corrected as 'no action'. (PP)
5. The issues found during KPI achievement / evaluation at various states referred. It would be better that these issues to be included in the summary report with actions taken as reported. (TP)

JPNIN WILAYAH PERSEKUTUAN

6. Justification on allowing opening of new kindergarten (*Tabika Perpaduan*) where within 3 km there is a kindergarten could be appropriately justified elsewhere within the request form.
7. Establishment of *Tabika Perpaduan* managing committee (*jawatankuasa penyelarasan*) for Pangsapuri Teratak Muhibbah 2 'B' referred.
 - a) Signature of setiausaha for in the meeting meeting recommended in the meeting minute to show genuity
 - b) Penasihat position could be appropriately noted within the minutes.

JPNIN Kuching, Sarawak

8. For improvement, the registration for application of new opening of kindergarten log book (*Buku Daftar Permohonan Pembukaan Kelas Tabika Perpaduan*) could be periodically review for completeness, e.g. completeness of application date. (7.5.1)

JPNIN Kangar, Perlis

9. File for Application for new Tabika could be recorded as 'No Application' if there is none received for that particular year. [7.5.1]
10. Filling of records could be enhanced, e.g. records on registration of kindergarten students (*Pengambilan Kanak-kanak Tabika Perpaduan*) and attachments (*lampiran*) 6,7,8 and 9. (4.2.3)

JPNIN Pekan, Pahang

11. Pekan's performance in term of achieving 85% of active KRT is very low (3 over 29). Therefore, current practise on focusing on non achieve KRT need to be further enhanced and expended to create awareness as well as monitor closely by outline the proper mitigation plan for district level as well as state level. (8.2.3)
12. State or HQ personnel was encouraged to explain the action plan to achieve target especially area of improvement or unachieved target i.e. 85% of active KRT. (5.5.3)

Job n°:	MY00986	Report date:	6 th September 2013	Visit Type:	Renewal	Visit n°:	1R
CONFIDENTIAL		Document:	GS0304	Issue n°:	13	Page n°:	8 of 12

JPNIN Ayer Keroh, Melaka

13. During site audit at TP Taman Kerubong Jaya Fasa 2, few issues could be appropriately addressed; (7.2.1)
- a) Some furniture are yet to be tagged with its registration number.
 - b) Emergency Drill is yet to be performed.
 - c) Takwim Tabika (kindergarten's Calendar) is yet to be updated.
14. Verification of the Corrective action implemented following a customer complaint could be further improved by attaching related records as evidence. (8.5.2)

Any unresolved issues identified?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If yes, please provide details here:		

9. Opening and Closing Meeting Attendance Record

Name	Position	Opening	Closing
		✓	✓
		✓	
		✓	✓
		✓	
		✓	

Appendix 1
Multi-site address list (list all sites audited)

Site Name / Address	Audit Dates	Activities at this site
<p>Head Office:</p> <p>Aras 7-10 Blok E2, Kompleks E, Pusat Pentadbiran Kerajaan Persekutuan 62502 Putrajaya</p>	<p>12/9/08 7/8/09 12/10/10 17/8/11 25/9/12 6/9/13 (V1R)</p>	<p>Management review, Internal Quality Audit, customer complaint and satisfaction, corrective & preventive action, data analysis, document & record control, human resources, purchasing.</p> <p>Rukun Tetangga : approval process for determining locality, members appointment, grant allotment, members training, data collection, maintenance, locality revision and cancellation.</p> <p>Tabika Perpaduan (unity kindergarten): initiation of classes, pupils intake, institution of committee purchasing of furniture & tools, appointment of teacher, teacher's training, class shifting, grant allocation for meal, data collection and maintenance</p> <p>Unity Management Division</p> <ul style="list-style-type: none"> - Administration of Social Harmony Issue (<i>Pengurusan Perpaduan</i>) – PP - Administration of Unity Activities (<i>Perpaduan Masyarakat & Integrasi Nasional</i>) - PMIN
<p>Site 1 – Kuala Lumpur</p> <p>Suite 105, Tingkat 1, Wisma Mirama, Jalan Wisma Putra 50460 Kuala Lumpur.</p>	<p>11/9/08 27/8/13 (V1R)</p>	<p>Administration of Rukun Tetangga and Tabika Perpaduan at state level (processing application, review, submission to HQ for approval, co-ordination of HQ training and monthly data/report analysis) Handing of customer complaint, satisfaction, correction and preventive action.</p>
<p>Site 2 – Penang</p> <p>Aras 5, Bangunan Persekutuan, Jalan Anson, 10400 Pulau Pinang</p>	<p>8/9/08 3/9/12 (Seberang perai)</p>	<p>- as above -</p>

Site 3 – Sabah Aras 3, Blok A, WDT 433, Kompleks Pentadbiran Kerajaan Persekutuan, Jalan UMS Sulaman Likas, 88400 Kota Kinabalu, Sabah	10/9/08 5/9/12 (Ranau)	- as above -
Site 4 – Selangor Tingkat 9, Wisma PKPS, Persiaran Perbandaran, Seksyen 14, 40517 Shah Alam, Selangor	15/8/11 (PPD K.Selangor)	- as above -
Site 5 – Johor Tingkat 20, Bangunan KWSP, Jalan Dato' Dalam, 80000 Johor Bahru Johor		- as above -
Site 6 – Melaka Tingkat 3, Blok Podium, Menara Persekutuan, Jalan Persekutuan MITC, Hang Tuah Jaya, 75450 Ayer Keroh, Melaka	6/8/09 6/9/13	- as above -
Site 7 – Labuan No. 4A1, Blok 4, Tingkat 4, Kompleks Ujana Kewangan, Peti Surat 81279 87022 Wilayah Persekutuan Labuan.	19/9/12	- as above -
Site 8 – Kedah Aras 3 Zon B, Wisma Persekutuan, Pusat Pentadbiran Kerajaan Persekutuan 06550 Bandar Muadzam Shah, Kedah	15/8/2011 (PPD Baling)	- as above -
Site 9 – Terengganu Tingkat 12, Wisma Persekutuan, Jalan Sultan Ismail, 20200 Kuala Terengganu, Terengganu	11/10/10	- as above -
Site 10 – Sarawak Tingkat 9, Bangunan Sultan Iskandar, Jalan Simpang Tiga, Peti Surat 2384, 93250 Kuching, Sarawak	7/10/10 28/8/13 (V1R)	- as above -
Site 11 – Perlis Tingkat 2, Bangunan Tun Abd Razak, 01000 Kangar, Perlis	4/8/09 6/9/13 (V1R)	- as above -
Site 12 – Pahang Tingkat 2, Blok A-B, No. 211, 213, 217 & 218, Bangunan Centre Point, Jln Haji Abdul Rahman, 25000 Kuantan, Pahang	6/10/10 30/8/13 (V1R)	- as above -
Site 13 – Kelantan Tingkat 7, Wisma Persekutuan Jalan Bayam, 15200 Kota Bharu Kelantan	7/10/10	- as above -

<p>Site 14 – Perak Aras 3, Block C, Bangunan Persekutuan Ipoh, Jalan Dato' Ahmad Said, 30450 Ipoh Perak</p>	<p>3/8/09 16/8/11(PPD Larut Matang/ Selama/Kerian)</p>	- as above -
<p>Site 15 – Negeri Sembilan Tingkat 12, Wisma Persekutuan, Jalan Dato' Abdul Kadir 70000 Seremban, N. Sembilan.</p>	<p>16/8/11 (PPD Kuala Pilah)</p>	- as above -
<p>Site 16 – WP Putrajaya Aras 8, Blok E2, Kompleks E, Pusat Pentadbiran Kerajaan Persekutuan, 62502 Putrajaya</p>	<p>24/9/12</p>	- as above -