

## Compliance & Oversight Policy

### 1. Purpose

This policy establishes guidelines for conducting periodic audits, addressing identified deficiencies, and maintaining accurate records to ensure compliance with regulatory, contractual, and company standards.

### 2. Scope

This policy applies to all employees, contractors, representatives, and business partners who interact with IGO Life Limited's internal processes, regulatory requirements, or confidential information.

### 3. Audits and Assessments

#### 3.1 Compliance Audits

- Internal audits shall be conducted annually to evaluate compliance with company policies, regulatory obligations, and industry best practices.
- IGO Life Limited may appoint external audits to be conducted by independent third-party auditors to validate adherence to legal and contractual requirements.
- Areas covered may include data protection, financial compliance, environmental impact, business integrity, and risk management.

#### 3.2 Responsibilities

- William Buxton is responsible for planning and executing audits.
- Department heads and managers must cooperate by providing necessary documentation and access.

#### 3.3 Audit Reporting & Review

- Findings will be documented in an audit report and shared with senior management.
- Identified risks or non-compliance issues will be categorized based on severity and impact.

#### 3.4 Environmental & WEEE Compliance

IGO Life Limited is committed to meeting all environmental obligations, including compliance with the Waste Electrical and Electronic Equipment (WEEE) Regulations 2013 (as amended). These regulations require responsible management of electrical and electronic equipment throughout its lifecycle, including disposal, recycling, and recovery.

##### 3.4.1 Responsibilities

- The Compliance Lead (William Buxton) is responsible for ensuring WEEE obligations are understood and upheld across the organisation.
- Department heads must ensure all electrical and electronic equipment under their control is handled, stored, and disposed of in accordance with this policy and applicable regulations.

##### 3.4.2 WEEE Handling & Disposal

- All electrical and electronic equipment designated as waste must be processed through approved WEEE-certified disposal partners.
- Equipment must not be disposed of via general waste streams.
- Data-bearing devices must undergo secure data erasure prior to disposal or recycling.

##### 3.4.3 Procurement & Record Keeping

- Procurement teams must ensure any new equipment purchases meet environmental and WEEE labelling requirements.
- Records of electrical equipment disposal, recycling certificates, and waste transfer notes must be retained for a minimum of 5 years in accordance with Section 5 of this policy.

##### 3.4.4 Compliance Monitoring

## Compliance & Oversight Policy

- WEEE compliance will be included in the annual audit schedule.
- Any non-compliance or improper disposal practices will be documented and addressed through the Corrective Action Process set out in Section 4.

### 4. Corrective Action Process

#### 4.1 Identification & Reporting

- Any deficiencies, non-compliance issues, or process weaknesses discovered during audits or assessments must be documented and reported to the William Buxton.
- Employees may also report concerns in line with our door policy.

#### 4.2 Corrective Action Plan (CAP)

- A Corrective Action Plan (CAP) must be developed within 14 days of issue identification.
- The CAP must outline:
  - The nature of the deficiency.
  - Root cause analysis.
  - Required corrective actions.
  - Responsible party and deadline for resolution.

#### 4.3 Implementation & Follow-Up

- Corrective actions must be implemented within 14 days of approval.
- A follow-up audit or review will be conducted to verify resolution.
- Unresolved or recurring issues will be escalated to senior leadership.

### 5. Documentation and Record Keeping

#### 5.1 Compliance Documentation

- All compliance activities, policies, and regulatory filings must be documented and securely stored.
- Documents include:
  - Audit reports and assessments.
  - Corrective action records.
  - Compliance training records.
  - Regulatory filings and certifications.

#### 5.2 Confidentiality & Security

- All records must be stored securely, following data protection regulations.
- Access to sensitive compliance records will be restricted based on role and necessity.

#### 5.3 Retention Period

- Compliance records will be retained for a minimum of 5 years or in accordance with legal/regulatory requirements.
- Expired records must be securely archived or disposed of per company guidelines.

#### 5.4 Annual Attestation

- Employees and relevant stakeholders must complete an annual attestation confirming adherence to compliance policies and proper record-keeping practices.
- Non-compliance with documentation policies may result in disciplinary action.

## Compliance & Oversight Policy

### 6. Review and Amendments

- This policy will be reviewed annually and updated as necessary to reflect changes in regulations or operational requirements.
- Amendments must be approved by William Buxton.

### 7. Enforcement & Consequences of Non-Compliance

- Failure to comply with audit, corrective action, or documentation requirements may result in:
  - Internal disciplinary action.
  - Legal or regulatory penalties.
  - Termination of contracts or employment.

This policy ensures that compliance is monitored, deficiencies are addressed promptly, and records are maintained to uphold legal and operational integrity.