

## NON-CONFORMITY REPORT

Audit No.  
Date of Audit

Report No.  
Dept./Location

Document used for audit:  
(ISO-9000 Standard, Manual, Procedure, Work Instruction, Specification etc.)

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### Non-compliance

CLAUSE NO.	4	5	6	7	8
SUB-CLAUSE NO.					

Sign: \_\_\_\_\_ Signature

Name of Auditor: \_\_\_\_\_ Auditee

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Corrective Action Planned \_\_\_\_\_ target date

Preventive Action Planned \_\_\_\_\_ Target date

Signature

Auditee

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Corrective and Preventive action verified \_\_\_\_\_ Yes/No

Comments (if any) \_\_\_\_\_ Signature

Date: \_\_\_\_\_ Auditor

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Management Representative observation:

Management Representative  
Date \_\_\_\_\_

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