

**ISSUER NAME**Address  
email, phone

# Non Conformance Report

Form  
ID  
Revision

## PROJECT NAME

Project address, project/contract number, project reference

Employer:	Emp Developers		Consultant:	LTD Engineers	
Main Contractor:	Main Contractor LTD		Sub Contractor:	Sub Contractor LTD	

NCR-ID: Trade/DIV: Date: Status: OPEN

**A) NCR IDENTIFICATION**

Location: Subcontractor (If any):

Element / Activity: Severity:

WIR / Inspection / Test: Package / Lot

**B) NON-CONFORMANCE DESCRIPTION / FACTS**

Extend / Quality Affected:	Attachment List:
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**C) REQUIREMENT REFERENCES (SPEC / DRAWING / ITP / STANDARD)**

Specification Clause: Drawing No. / Rev:

Submittal / Shop Drawing: Method Statement Ref:

ITP Hold Point Reference: Code / Standard Ref (if any):

**D) IMMEDIATE ACTION / CONTAINMENT**Stop affected activity:  Quarantine material: 

Other Immediate Action (If any):

Raised By:  Signature: **E) CONTRACTOR RESPONSE**

Root Cause of Non Conformity:

Corrective Actions:  Target Date: Preventive Actions:  Target Date: Contractor Representative:  Signature **F) ENGINEER / CONSULTANT DISPOSITION**Disposition:  Notes / Conditions: **G) VERIFICATION & CLOSURE**Re-Inspection Date:  Re-Test Ref (if any): Closed By (Company/Name):  Closure Evidence Ref: Consultant Representative:  Signature: