|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **NCR Number:** |  | **Person dealing with this issue:** |  | **Date:** |  |

|  |  |
| --- | --- |
| **Source of issue****(audit/product/supplier/installation/preventive/other):** |  |
| **Description of the issue** **What's wrong?** |  |
| **Details of investigation****How did it happen?** |  |
| **Corrective and Preventive Action****What did we do to fix the problem and prevent it happening again? These actions to be transferred to****R02 – Corrective and Preventive Actions Record.** |  |
| **Confirmation that action was effective. Has it been fixed?** |  |
| **Non-Conformity closed by:** |  | **Close Date:**  |  |
| **Signature:** |  |