

**[CompanyName]**

**Quality System**

**Standard Operating Procedures**

## **Quality Management System Forms**

- Project License and Qualifications
- Project Organization Chart
- Quality Manager Appointment Letter
- Project Manager Appointment Letter
- Superintendent Appointment Letter
- Design Manager Appointment Letter
- Qualified QC Inspector List
- Project Personnel Qualification Form
- Construction Personnel Certifications and Licenses
- Quality Controlled Work Task List
- Quality Inspection and Test Plan
- Project Quality Communications Plan
- Subcontractor and Supplier Quality Communications Plan
- Point of Contact List
- Project Quality Training Plan
- Training Plan
- Training Log
- Project Quality Records Plan
- Project Submittals Schedule and Log
- Change Order Form
- Project Submittal Form
- Project Design Review Plan
- Design Review Meeting Participant Form
- Design Review Form
- Project Regulatory Building Codes
- Controlled Materials Form
- Metals Material Receiving Inspection Report
- Material Inspection and Receiving Report
- Test Equipment Calibration Plan and Log
- Laboratory Qualification Form
- Subcontractor and Supplier Qualification Form
- Subcontractor and Supplier Certifications and Licenses
- Project Subcontractor and Supplier List
- Subcontractor and Supplier Quality Control Policy Requirements
- Project Startup and Quality Control Coordination Meeting
- Project Startup Meeting Form
- Work Task Quality Assurance/Quality Control Plan for Work Task Requirements Review
- USACE Preparatory Phase Checklist
- Work Task Quality Control Planning Meeting Form
- USACE Contractor Quality Control Report
- Daily Quality Control Report
- Monthly Quality Control Report
- Inspection and Test Report
- USACE Initial Phase Checklist
- Work Task Inspection Form
- Punch List
- Project Completion Inspection Form
- Nonconformance Report
- Nonconformance Report Control Log
- Corrective Action Report
- Training Record
- Project Quality System Audit Form
- Jobsite Quality Review Planning and Log Sheet
- Quality System Audit Form
- System Document Control Form
- Project Records Control Form

# **STANDARD OPERATING PROCEDURES**

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QUALITY SYSTEM SOP	
3.3 [COMPANYNAME] PROJECT LICENSE AND QUALIFICATION REQUIREMENTS	
Version	Approved by:
	Quality Manager

**Purpose:**

To assess and record the qualification of subcontractors and suppliers, and company departments to meet the quality requirements of the company and/or project and to keep a record of their licenses and certifications

**Scope:**

All projects

**Definitions:**

None:

**Responsible Person(s):**

Project Manager has overall responsibility

Quality Manager

**References:**

Quality Manual Section 3.3

Quality Manual Section 13.4.2 Project Records Control

**Procedure:**

1. Use the Subcontractor and Supplier Qualification Form and Project Subcontractor and Supplier List Form contained in this procedure unless the customer contract or Project Quality Assurance/Quality Control Plan specifies the use of a modified or customer supplied form. In that case, the specified form replaces the standard form for that contract.
2. The Responsible Person identifies subcontractor and suppliers that require qualification as required by the Quality Manual.
3. Records the subcontractor's or supplier's company name on a Subcontractor and Supplier Qualification Form.
4. When no qualifications are required "none required" is entered and then this procedure is regarded as complete.
5. The Responsible Person assesses the subcontractor or supplier and records the qualifications on the Subcontractor and Supplier Qualification Form.
6. When all qualification requirements are met, the Project Manager signs the form.
7. When the subcontractor qualification assessment identifies minor nonconformances to the subcontract requirements, the Project Manager may approve a provisional subcontract. The provisional subcontract lists requirements for actions that address correction of the nonconformances. All nonconformances must be corrected and verification recorded on the form before the company can commence work affected by the provisional requirements.
8. The Responsible Person lists critical materials required by specific work task and suppliers qualified to provide the materials on the Project Subcontractor and Supplier List form.

## Questions? Call First Time Quality 410-451-8006

9. The Responsible Person stores the completed form in the field office as required by Quality Manual Section 13.4.2 Project Records Control

Selected Pages

[CompanyName] Project License and Qualifications			
Project ID	Project Name	Approval	Approved By
[ProjectNumber]	[ProjectName]	<input type="checkbox"/> Yes <input type="checkbox"/> Conditional <input type="checkbox"/> No	
Review Topics	<b>Project quality–related credential requirements</b>		
	Licenses required:	License and expiration dates:	
	Certification required:	Certifications and expiration dates:	
	Training required:	Training completed and expiration date:	
	Type and length of experience required:	Certifications and expiration dates:	
	Personnel license, certification, and training required:	List each person’s credentials on the Subcontractor and Supplier Certifications and Licenses form.	
	Qualifications		
	QUALIFICATION NOTES:		

QUALITY SYSTEM SOP	
6.7 CONTROLLED MATERIAL IDENTIFICATION AND TRACEABILITY	
Version	Approved by:
	Quality Manager

**Purpose:**

To specify which project materials are subject to lot control

**Scope:**

All projects

**Definitions:**

None:

**Responsible Person(s):**

Quality Manager has overall responsibility

Project Manager

**References:**

Quality Manual Section 6.7 Controlled Material Identification and Traceability

Quality Manual Section 13.4.2 Project Records Control

**Procedure:**

1. The Responsible Person identifies if lot traceable materials are necessary to supplement the contract as required by the Quality Manual.
2. The Responsible Person records types of controlled materials and equipment on the Controlled Materials form as required by Quality Manual. When no controlled materials are required to supplement contract requirements, "none required" is recorded.
3. The Responsible Person records specifications that apply to each type of controlled material and equipment as required by Quality Manual.
4. The Responsible Person updates the Controlled Materials Form as necessary during the project.
5. When a material is listed on the Controlled Materials Form, only that material may be purchased for the intended purpose.
6. The Responsible Person stores the completed form in the field office as required by Quality Manual Section 13.4.2 Project Records Control.

[CompanyName] Controlled Materials Form				
Contract ID	Contract Name	Preparer	Date	
[ProjectNumber]	[ProjectName]			

Contract Section/ Activity ID	Material	Intended Use (if description is necessary)	Lot Traceability Requirements	Method for identification of Approved Inspection Status



[CompanyName] Metals Material Receiving Inspection Report				
Project ID	Project Name	P.O.#	Supplier	Receipt Date
[ProjectNumber]	[ProjectName]			
Type of Material (i.e., steel plate)	Material Description (nominal dimensions)	Heat Number/ Serial Number/Markings	Condition / Damage	Color Code Marking
Receiving Inspector Approval Signature / Date		Government Representative Name/Approval Date		
			<input type="checkbox"/> Material Receiving Inspection Passed	

<b>[CompanyName]</b> <b>Material Inspection and Receiving Report</b>								
Contract ID	Contract Name	Purchase Order No.	Supplier			Bill of Lading No.	Date	
[ProjectNumber]	[ProjectName]							
Item No.	Stock/Part No.	Description	Quantity Received	Condition	Marking	Accept	Conditional Use	Reject
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Receiving Quality Control								
<p>ACCEPTANCE</p> <p>Listed items have been accepted by me or under my supervision</p> <p><input type="checkbox"/> Conform to contract specifications EXCEPT as noted herein or on supporting documents.</p> <p><input type="checkbox"/> Received in apparent good condition EXCEPT as noted</p> <p>Signature of authorized person and date: _____</p>								
<p>EXCEPTIONS:</p>								

## QUALITY SYSTEM SOP

### 7.2 QUALIFICATION OF OUTSIDE ORGANIZATIONS AND COMPANY DEPARTMENTS

Version	Approved by:
	Quality Manager

#### Purpose:

To assess and record the qualification of subcontractors and suppliers, and company departments to meet the quality requirements of the company and/or project and to keep a record of their licenses and certifications

#### Scope:

All projects

#### Definitions:

None:

#### Responsible Person(s):

Project Manager has overall responsibility

Quality Manager

#### References:

Quality Manual Section 7.2 Qualification of Outside Organizations and Company Departments

Quality Manual Section 13.4.2 Project Records Control

#### Procedure:

1. Use the Subcontractor and Supplier Qualification Form and Project Subcontractor and Supplier List Form contained in this procedure unless the customer contract or Project Quality Assurance/Quality Control Plan specifies the use of a modified or customer supplied form. In that case, the specified form replaces the standard form for that contract.
2. The Responsible Person identifies subcontractor and suppliers that require qualification as required by the Quality Manual.
3. Records the subcontractor's or supplier's company name on a Subcontractor and Supplier Qualification Form.
4. When no qualifications are required "none required" is entered and then this procedure is regarded as complete.
5. The Responsible Person assesses the subcontractor or supplier and records the qualifications on the Subcontractor and Supplier Qualification Form.
6. When all qualification requirements are met, the Project Manager signs the form.
7. When the subcontractor qualification assessment identifies minor nonconformances to the subcontract requirements, the Project Manager may approve a provisional subcontract. The provisional subcontract lists requirements for actions that address correction of the nonconformances. All nonconformances must be corrected and verification recorded on the form before the company can commence work affected by the provisional requirements.
8. The Responsible Person lists critical materials required by specific work task and suppliers qualified to provide the materials on the Project Subcontractor and Supplier List form.

9. The Responsible Person stores the completed form in the field office as required by Quality Manual Section 13.4.2 Project Records Control

Selected Pages

[CompanyName] Laboratory Qualification Form			
Company Name:		Scope of Work (specification sections):	
Project ID	Project Name	Approval	Approved By
[ProjectNumber]	[ProjectName]	<input type="checkbox"/> Yes <input type="checkbox"/> Conditional <input type="checkbox"/> No	
Review Topics	<b>Project-Related Job Credentials</b>		
	Licenses required:		License and expiration dates:
	Certification required: <input type="checkbox"/> NRTL: A nationally recognized testing laboratory according to 29 CFR 1910.7. <input type="checkbox"/> NVLAP: A testing agency accredited according to NIST's National Voluntary Laboratory Accreditation Program. <input type="checkbox"/> The American Association of State Highway and Transportation Officials (AASHTO) <input type="checkbox"/> International Accreditation Services, Inc. (IAS) <input type="checkbox"/> U. S. Army Corps of Engineers Materials Testing Center (MTC) <input type="checkbox"/> American Association for Laboratory Accreditation (A2LA) program		Certifications and expiration dates:
	Training required:		Training completed and expiration date:
	Type and length of experience required:		Certifications and expiration dates:
	Personnel license, certification, and training required:		List each person's credentials on the Subcontractor and Supplier Certifications and Licenses form.
	<b>Qualifications</b>		
	<input type="checkbox"/> Senior person designated as Quality Manager <input type="checkbox"/> Demonstrated skills and knowledge <input type="checkbox"/> Demonstrated experience		<input type="checkbox"/> Production capacity <input type="checkbox"/> Staffing availability
	QUALIFICATION NOTES:		
	<b>Provisional Approval: Action plan for improvement</b>		
<b>Follow-up results and date</b>			

<b>[CompanyName]</b> <b>Subcontractor and Supplier Qualification Form</b>			
Company Name:		Scope of Work (specification sections):	
Project ID	Project Name	Approval	Approved By
[ProjectNumber]	[ProjectName]	<input type="checkbox"/> Yes <input type="checkbox"/> Conditional <input type="checkbox"/> No	
Subcontractor and Supplier Quality System: <input type="checkbox"/> Works under [CompanyName] Quality System <input type="checkbox"/> Approved to Work under subcontractor's quality system		Subcontractor and Supplier site quality inspection <input type="checkbox"/> Site quality inspection required before approval <input type="checkbox"/> Site quality inspection of product/material required before delivery	
Review Topics	<b>Project-Related Job Credentials</b>		
	Licenses required:		License and expiration dates:
	Certification required:		Certifications and expiration dates:
	Training required:		Training completed and expiration date:
	Type and length of experience required:		Certifications and expiration dates:
	Personnel license, certification, and training required:		List each person's credentials on the Subcontractor and Supplier Certifications and Licenses form.
	<b>Qualifications</b>		
	<input type="checkbox"/> Senior person designated as Quality Manager <input type="checkbox"/> Knowledge of Company quality standards <input type="checkbox"/> Demonstrated capability to complete work to Company quality standards <input type="checkbox"/> Demonstrated skills and knowledge <input type="checkbox"/> Demonstrated experience		<input type="checkbox"/> Demonstrated results <input type="checkbox"/> Effective self-inspection process <input type="checkbox"/> Access to codes, standards and product instructions <input type="checkbox"/> Equipment availability <input type="checkbox"/> Production capacity <input type="checkbox"/> Staffing availability
	QUALIFICATION NOTES:		
	<b>Provisional Approval: Action plan for improvement</b>		
<b>Follow-up results and date</b>			

[CompanyName] Subcontractor and Supplier Certifications and Licenses			
Project ID	Project Name	Preparer	Date
[ProjectNumber]	[ProjectName]		

[illegible]

[CompanyName] Project Subcontractor and Supplier List				
Project ID	Project Name			Preparer/ Date
[ProjectNumber]	[ProjectName]			

Work Tasks	Subcontractor and Supplier Name	Description of Services	Quality Control Method (Not Applicable/ Subcontractor and Supplier QC/ [CompanyName] QC)	Remarks



QUALITY SYSTEM SOP	
8.2 PROJECT STARTUP AND QUALITY CONTROL COORDINATION MEETING	
Version	Approved by:
	Quality Manager

**Purpose:**

To communicate project requirements and expectations among project stakeholders and to record the content and results of project planning meetings

**Scope:**

All active projects

**Definitions:**

None:

**Responsible Person(s):**

Superintendent

**References:**

Quality Manual Section 8.2 Project Startup and Quality Control Coordination Meeting

Quality Manual Section 13.4.2 Project Records Control

**Procedure:**

1. Use the Project Quality Planning Meetings Form contained in this procedure unless the customer contract or Project Quality Assurance/Quality Control Plan specifies the use of a modified or customer supplied form. In that case, the specified form replaces the standard form for that contract.
2. The Responsible Person conducts project planning meetings as required by the Quality Manual.
3. The Responsible Person records the project plan on a Project Startup Meeting Form.
4. The Responsible Person stores the completed form in the field office as required by Quality Manual Section 13.4.2 Project Records Control

<b>QUALITY SYSTEM SOP</b>	
<b>9.14 INSPECTION AND TEST RECORDS</b>	
Version	Approved by:
	Quality Manager

**Purpose:**

To record and store the results of quality inspections and tests

**Scope:**

Project quality inspection and tests except work task quality control quality inspections performed by the Superintendent

**Definitions:**

None:

**Responsible Person(s):**

Superintendent

**References:**

Quality Manual Section 9.14 Inspection and Test Records

Quality Manual Section 13.4.2 Project Records Control

**Procedure:**

1. Use the Inspection and Test Records Form contained in this procedure unless the customer contract or Project Quality Assurance/Quality Control Plan specifies the use of a modified or customer supplied form. In that case, the specified form replaces the standard form for that contract.
2. Inspections and tests are performed work task quality inspections as required by the Quality Manual and the Project Quality Inspection and Test Plan.
3. For work task quality inspections, the Responsible Person records quality inspection results on the work task Inspection form (see procedure 9.14.1).
4. For quality inspections and tests:
5. The test is performed as required by the Quality System requirements and the Project Quality Inspection and Test Plan
6. Results of the quality inspections and tests are recorded on the Inspection and Test Report form.
7. The Responsible Person stores the completed form in the field office as required by Quality Manual Section 13.4.2 Project Records Control

[CompanyName] Inspection and Test Report						
Inspection Report ID #	Project ID	Project Name	Preparer Signature		Date	
	[ProjectNumber]	[ProjectName]				
Work Activity:			Item inspected and/or tested:			
Ref#	Specification reference documents (titles or description with version/date)					
Inspection/Test Record (additional items on next page)						
Inspection/ Test/ ID #	Inspection/Test Points/Location	Acceptance Criteria / Ref#	Test Result, Nonconformance	Non-conformance Disposition rework/reject/Non- conformance Report	Corrections Made / Final Acceptance	
					Initial	Date
Acceptance of completed work activity (sign and date)						
Inspector/Tester		Subcontractor and Supplier/Supplier		Superintendent		

QUALITY SYSTEM SOP	
9.15 PROJECT COMPLETION AND CLOSEOUT INSPECTION	
Version	Approved by:
	Quality Manager

**Purpose:**

To clearly document a nonconformance found by test or work task completion quality inspection, monitor the disposition status, and to record its disposition.

**Scope:**

All projects work in process quality inspections and project completions quality inspections.

**Definitions:**

None:

**Responsible Person(s):**

Superintendent reports nonconformance on a Nonconformance Report Form

Quality Manager assigns disposition of the nonconformance

Superintendent stores the completed forms

**References:**

Quality Manual Section 9.15 Project Completion and Closeout Inspection

Quality Manual Section 13.4.2 Project Records Control

**Procedure:**

1. Use the Punch List form contained in this procedure unless the customer contract or Project Quality Assurance/Quality Control Plan specifies the use of a modified or customer supplied form. In that case, the specified form replaces the standard form for that contract.
2. The Responsible Person records punch items as required by the Quality Manual on the Nonconformance Report Form.
3. The Responsible Person records the disposition on the Nonconformance Report Log.
4. When the corrective actions have been completed, the Responsible Person records the action on the form.
5. The Responsible Person stores the completed form in the field office as required by Quality Manual Section 13.4.2 Project Records Control

[CompanyName] Punch List						
Project ID		Project Name		Punch List Type		
[ProjectNumber]		[ProjectName]		<input type="checkbox"/> Work Tasks _____ <input type="checkbox"/> Project Final Punch <input type="checkbox"/> Pre-Final Customer Inspection <input type="checkbox"/> Final Acceptance Inspection		
Inspection Date		Preparer				
Item	Location	Description	Due Date	Compl. Date	Item Completion Verification	
					Super Initial	QA Initial
Punch List Completion Date		Final QA Sign-off		Remaining Nonconformances Reported ID # and Description		

<b>[CompanyName]</b> <b>Project Completion Inspection Form</b>			
Project: ID:	Project Name:	Location/Area:	
[ProjectNumber]	[ProjectName]		
<b>Compliance Verification</b> <input type="checkbox"/> Compliance with material inspection and tests <input type="checkbox"/> Compliance with inspection requirements <input type="checkbox"/> Compliance with functional tests if required <input type="checkbox"/> Compliance with inspection and test plan <input type="checkbox"/> Punch lists corrections complete		<b>Heightened Awareness Checkpoints</b> <input type="checkbox"/> [Insert items identified at project startup, preparatory and status meetings] <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Notes:			
Reported Nonconformances:			
Verification of Project Completion (sign and date)			
Project Superintendent verified complete to specifications (sign and date)		Sign and date*:	
Quality Manager verified complete to specifications (sign and date)		Sign and date*:	
<small>* On behalf of the contractor, I certify that this report is complete and correct, and equipment and material used, and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.</small>			

QUALITY SYSTEM SOP	
10.2.3.1 RECORDING OF NONCONFORMANCES	
Version	Approved by:
	Quality Manager

**Purpose:**

To clearly document a nonconformance found by test or work task completion quality inspection, monitor the disposition status, and to record its disposition.

**Scope:**

All projects tests and work task completion quality inspections

**Definitions:**

None:

**Responsible Person(s):**

Superintendent reports nonconformance on a Nonconformance Report Form

Quality Manager assigns disposition of the nonconformance

Superintendent stores the completed forms

**References:**

Quality Manual Section 10.2.3.1 Recording of Nonconformances

Quality Manual Section 13.4.2 Project Records Control

**Procedure:**

1. Use the Nonconformance Report Form and Nonconformance Report Control Log contained in this procedure unless the customer contract or Project Quality Assurance/Quality Control Plan specifies the use of a modified or customer supplied form. In that case, the specified form replaces the standard form for that contract.
2. The Responsible Person records nonconformances as required by the Quality Manual on the Nonconformance Report Form and records the nonconformance report on the Nonconformance Report Log.
3. The Responsible Person records disposition of nonconformances as required by the Quality Manual on the Nonconformance Report Form.
4. The Responsible Person records the disposition on the Nonconformance Report Log.
5. When the corrective actions and/or preventive actions have been completed, the Responsible Person records the action on the Nonconformance Report Form, updates the status on the Nonconformance Report Log.
6. The Responsible Person stores the completed form in the field office as required by Quality Manual Section 13.4.2 Project Records Control

[CompanyName] Nonconformance Report		
Nonconformance Report Control ID	Project ID	Project Name
	[ProjectNumber]	[ProjectName]
Preparer Signature/ Submit Date		Quality Manager Signature / Disposition Date
Description of the requirement or specification		
Description of the nonconformance, location, affected area, and marking		
Disposition	<input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Rework <input type="checkbox"/> Use As-is	
	Approval of disposition required by customer representative? Yes <input type="checkbox"/> No <input type="checkbox"/>	
	Customer approval signature /date: _____	
Corrective Actions	<input type="checkbox"/> Corrective actions completed Name/Date: _____	
	Customer acceptance of corrective actions required? Yes <input type="checkbox"/> No <input type="checkbox"/>	
	Name/Date: _____	
Preventive Actions		
	<input type="checkbox"/> Preventive actions completed Name/Date: _____	



[illegible]

[CompanyName] Corrective Action Report		
Report Control ID	Project ID	Project Name
	[ProjectNumber]	[ProjectName]
Preparer's Signature/ Submit Date		Submitted to:
Description of the requirement or specification		
Reason for the corrective action		
Location, affected material, affected area, etc. requiring corrective action		
Suggested Corrective Actions		
Corrective Action Plan	<input type="checkbox"/> Approval signature/date _____	
	Approval of corrective actions required by customer representative? Yes <input type="checkbox"/> No <input type="checkbox"/>	
	<input type="checkbox"/> Customer approval signature /date: _____	
	<input type="checkbox"/> Corrective actions completed Name/Date: _____	
Preventive Action Plan		
	<input type="checkbox"/> Preventive actions completed Name/Date: _____	