

Non - Conformance Report

Prime Order No.:	NCR No.:	Date:
Prime Vendor:	Shop Order No.:	Client:
Sub Vendor:	Shop Order No.:	Jobsite Location:
Shop Location:	Authority Inspection:	
Item No.:	Description:	
Person Contacted:	Position:	
Issuing Office:	Inspector:	

Document Reference:

Non-conformance description:

Proposed resolution:

Action by:

Corrective action:

Prepared by: Approved by:

Impact on delivery schedule:

Close Out: Date: Signature: