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| **Nonconformity Report No:** ***(if applicable)*** |  |
| **Accreditation scheme:*****(if applicable)***  |  |
| **Auditor/Reported by:**  |  |
| **Auditee:*****(if applicable)*** |  |
| **Date:** |  |
| **DESCRIPTION OF NONCONFORMITY:** |
| **Reference to clause/sub-clause of ISO/IEC 17011** |  | **Reference to MAURITAS/External documents** |  |
| **Signature of Auditor/:** **MAURITAS Staff** | **Signature of Auditee:** ***(where relevant)*.** |
| **CORRECTION:****ROOT CAUSE OF NONCONFORMITY *(use additional page if necessary)*:****PROPOSED CORRECTIVE ACTION (PCA):****Name of Responsible Officer: Signature: Target Date: .** |
| **PCA approved by Director: Yes No Signature: Date: .** |
| **NEW DEADLINE (If Applicable)****Name of Responsible Officer: Signature: New Target Date:** **Approved by Director: Signature: Date:** *Note: For subsequent new deadlines, fill in Annex A*  |
| **Date of implementation of Corrective Action: .****Name of Responsible Officer: . Signature: .*****Documentary Evidence (attach supporting evidence, if necessary):*** |
| **CORRECTIVE ACTION VERIFIED AND CLEARED** **(Provide comment on the effectiveness of the action taken and indicate whether the NC is cleared or requires further action)** **Date of Verification: Name of Auditor/MAURITAS Staff: Signature: .** |

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| **Nonconformity closed on: Signature of Quality Manager: .** |

**Annex A**

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| **New Target Date** | **Name of Responsible Officer** | **Signature** | **Approved by Director** | **Date** |
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