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| 7 | **OPERATIONAL DOCUMENT** | **CIG 023**  **Appendix 4** |
|  | | |
| **Inspectors Finding/Observation Sheet**  **Part 2 and Part 3** | | |
| WARNING:  THIS DOCUMENT IS ONLY VALID IF USED BY ETICS MEMBERS  AND THEIR AUTHORISED AGENTS | | |
| Approved by: | MCCB meeting 10 April 2019 | No. of pages: 4 |
| Date of issue: | April 2019 |  |
| Supersedes: | New Document | Page 1 of 4 |

*NOTE:*

*Inspectors Finding/Observation Sheet Part 2 and Part 3 might be used individually or combined.*

*Front Pages only for document control and shall be excluded from numbering and actual Inspectors Finding/Observation Sheet.*

This document contains:

* *Inspectors Finding/Observation Sheet Part 2 - This part shall be filled by the Factory/Licence Holder ONLY if requested by the Certification Body*
* *Inspectors Finding/Observation Sheet Part 3 - This part shall be filled by the Certification Body*
* *Note: Inspectors Finding/Observation Sheet Part 1, is only available as integral part of OD CIG 023 – Factory Inspection Report.*

**Inspectors Finding/Observation Sheet (part 2)**

**This part shall be filled by the Factory/Licence holder ONLY if requested by the Certification Body**

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| **Reference number of the body that carried out the inspection:**  *(see factory inspection report)* |
| **Date of inspection:**  *(see factory inspection report)* |
| **Factory registered name and Factory Location:** |
| **Related to Finding/Observation Sheet No.:       of** |
| **Additional Information (if applicable):** |

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| --- | --- |
| Root Cause Analysis: | |
| Corrective Action: | |
| For objective evidence the following documents are attached: | |
| Date of implementation: | Factory/Licence Holders representative:    Date Name Signature |

**Inspectors Finding/Observation Sheet (part 3)**

**This part shall be filled by the Certification Body**

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| **Reference number of the body that carried out the inspection:**  ***(see factory inspection report)*** |
| **Date of inspection:**  ***(see factory inspection report)*** |
| **Factory registered name and factory location:** |
| **Related to Finding/Observation Sheet No.:       of** |
| **Additional Information (if applicable):** |

|  |  |  |  |
| --- | --- | --- | --- |
| Root Cause Analysis accepted | YES | NO |  |
| Corrective Action accepted | YES | NO |  |
| Objective Evidence received and accepted | YES | NO | N/A |
| Date of implementation accepted | YES | NO |  |
|  | Certification Bodies representative:    Date Name | | |