Non-Conformance Report

Date: [Insert Date]

Report Number: [Insert Report Number]

To:

[Subcontractor Name]

[Subcontractor Address]

From:

[Your Company Name]

[Your Company Address]

Subject:

Non-Conformance Report for [Project Name/Description]

Description of Non-Conformance:

[Detailed description of the non-conformance, including specific references to standards or requirements that were not met.]

Evidence:

[Describe any evidence that supports the non-conformance, such as photographs, inspection reports, or audit findings.]

Required Action:

[Outline the necessary corrective actions that must be taken to address the non-conformance.]

Response Deadline:

[Insert deadline for response, typically 7-30 days from the date of this report.]

Contact Information:

| [Insert name, title, and contact information of the person responsible for this report] |
|---|
| Signature: |
| [Your Name] |
| [Your Title] |