|  |
| --- |
| **01 Form "Deviation and Nonconformity Notification"** |

|  |  |
| --- | --- |
| **Deviation / Nonconformity details** | |
| Discovery Date/Time |  |
| Location (area, room, zone, etc.) |  |
| Observers (Names, positions) |  |
| Related Documents and Records |  |
| Related Equipment and Facilities (IDs) |  |
| Affected products, materials, processes |  |
| Detailed description of the Event: | |
| Initial assumed Event type | ☐ Deviation ☐ Nonconformity |
| Initial assumed Category | ☐ Minor ☐ Major ☐ Critical |
| Corrections were taken prior 01 Form "Deviation and Nonconformity Notification" submission: | |
| Segregation measurements were taken for Nonconforming Products or Materials prior 01 Form "Deviation and Nonconformity Notification" submission: | |

|  |  |
| --- | --- |
| **Originator** | |
| Department |  |
| Name/Position | Date/Signature |

|  |  |
| --- | --- |
| **Auditee review (only for Internal and External Audits Findings and Nonconformities)** | |
| Comments, if any: | |
| Name/Position | Date/Signature |

|  |  |
| --- | --- |
| **01 Form "Deviation and Nonconformity Notification" submission to Quality Organization** | |
| Assigned Deviation Nonconformity Reference Number (DNRN) |  |
| Quality Organization representative  Name/Position | Date/Signature |