Project.........
Nonconformance Report

A. **Definition of nonconformance:**
   
   Subcontract No. :  
   Item
   
   Reference (dwg/spec) :  
   Zone
   
   Originator:
   Name:  
   Signature  
   Date:

   Attachments (pages A1, A2, A3, etc.)

B. **Definition of disposition:**
   
   The following subcontractor/Company Department .................................................................
   is requested to define corrective action required.

   **Company Quality Department:**
   Name:  
   Signature  
   Date:

   Corrective action required:

   Name:  
   Signature  
   Date:

   Attachments (pages B1, B2, B3, etc.)

C. **Approval of disposition and instruction to implement:**
   
   The above defined corrective action is approved and shall be implemented by:

   **Quality Department:**
   Name:  
   Signature  
   Date:

   Attachments (pages C1, C2, C3, etc.)

D. **Close-out**
   
   Corrective action is complete and documented

   **Quality Department:**
   Name:  
   Signature  
   Date:

   Attachments (pages D1, D2, D3, etc.)

**Field distribution:**

<table>
<thead>
<tr>
<th>Copy:</th>
<th>Original</th>
</tr>
</thead>
<tbody>
<tr>
<td>Originator/Construction Specialist</td>
<td>Company QA</td>
</tr>
</tbody>
</table>

www.red-bag.com
Attachment 1
C:\RB_Foms\RBY010A.DOT\BN-G-Y010