

Use this form to conduct surveillance and verification of process controls for effective implementation and application.

SITE & PROCESS DETAILS			
Site Name:		Site Number:	
Location:			
Person Completing:			
Lot Ref No:		Date Conducted:	
ITP Ref No:		PCS No:	
Process Source Reference: <i>(e.g. Engineering doc, WMS / Spec clause no.)</i>			
Company responsible for process: <i>(e.g. Supplier / Sub-contractor / Daracon)</i>			
Person(s) involved with this PCS:			
Describe Process to be verified: <i>(e.g. paraphrase or copy clause / section to be verified)</i>			
Define the Scope of the verification: <i>(e.g. define limits / specific components to be verified)</i>			
SURVEILLANCE REPORT			
Findings and/or Leading Practice <i>(if any)</i> :	Corrective Actions <i>(raise NCR if needed)</i> :		
	NCR N°. <i>(If raised)</i> :		
PCS CLOSE OUT			
All evidence has been sighted in support of this PCS for Close Out			<input checked="" type="checkbox"/> Yes <input type="checkbox"/>
Person Responsible:		Position:	
Signature:		Date:	
Comments:			