

GILES CHEMICAL ~ PREMIER MAGNESIA

Company Form

Number: Q12-PR-100-F014

Title: Corrective and Preventive Action

(CAPA)

Effective Date: 02/06/12

Owner: Deborah Durbin Revision: 0 Page: 1 of 2



CORRECTIVE AND PREVENTIVE ACTION (CAPA)

Date:	Report #:	Assigned To:			
Initiated By:	CSR:	Salesperson:			
Customer:	Customer Location:	Product:			
Production Date:	Production Location:	Qty Rejected:			
Affected Quantity:	BOL #:	Date of Shipment:			
Generated By: Internal Audit Customer Complaint In- Process External Audit Consumer/Customer Inquiry Other:					
Initial Description of non-confo	rmance: (to be completed by CAPA	A Coordinator)			
Date Incident Occurred:					
Complaint Description:					
Identify root cause(s) of non-conformance: (to be completed within 7 days of origination)					
Root Cause(s):					



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Long Term Corrective Action:

Owner: Deborah Durbin Effective Date: 02/06/12

Action Plan: (to be completed within 7 days of origination)

Revision: 0 Page: 2 of 2

Number: Q12-PR-100-F014

Person Responsible **Date Corrected Target Date Immediate Action: Short Term Corrective Action:**

Follow-Up:	

Final Annroval

Cost:

Name	Title	Signature	Date
	Manager		
Deborah Durbin	Director of Quality		
Matt Haynes	Director Manufacturing		
	CSR		