|  | **Non-conformity No.** |  | **of** |  |
| --- | --- | --- | --- | --- |
| **Name of the CAB:** |  |
| File number: |  |  | Assessor: |  |
| + if applicable Technical Expert[[1]](#footnote-1): |  |
|  | Case number | Phase |  |
| Procedure: | Please select | Assessment type: | Please select |
|  |
| **Identified non-conformity** (detailed presentation of the facts or the observation/naming of the sub clause and quote of concrete, non-fulfilled requirement(s)/reason why the fact does not fulfil the requirement(s)): |
| **Fact/observation:** |
| **Reference to the standard** (Naming and quote of the non-fulfilled sub clause(s)) [[2]](#footnote-2): |
| **Reason** (quote of the specific requirement *(marked by „“*) and description why this requirement(s) is/are not fulfilled): |
| Evaluation of the non-conformity: | [ ]  Non-critical | [ ]  Critical |
| Follow-up on-site assessment necessary: | [ ]  Yes | [ ]  No |
| Further review of documents: | [ ]  Yes | [ ]  No |
| **Submission of corrective actions:**Specified by the assessor to the significance of the non-conformity.(For initial accreditation max. 4 months, for all other max. 2 months) | **Deadline:**  |
| **Immediate action(s) necessary[[3]](#footnote-3)?** | **Deadline[[4]](#footnote-4):**  |
| [ ]  **Yes** | [ ]  **No** |
| **Effect of the critical non-conformity to be corrected** (Consequence of the non-conformity in the market or serious risk): |
| **Expected immediate action(s):** |
|  | *Title First name Surname* | *Title First name Surname* |
| Location/Date | Signatur Assessor | Signature by Management/representativeof the assessed bodyfor information |
| **Immediate action(s) closed?** |  | *Title First name Surname* |
| [ ]  **Yes** | [ ]  **No** | Location/Date | Signatur assessor |
| For each non-conformity the assessed body shall perform a **root cause and extent analysis** and shall define suitable corrective actions. The root cause and extent analysis as well as the corrective actions shall be documented in a clear form and submitted to the assessor and DAkkS case manager within the above mentioned deadline including evidence of the implementation of corrective actions (submission preferably by electronic means). Only after submission of the relevant documentation, the assessor can review the corrective actions and finally may close the non-conformity. |
| **Justification for closing of the non-conformity by assessor:**Remarks, recommendations, indications/recommendation for conditions including deadlines for implementation: |
|  |
| **Non-conformity closed?** |  | *Title First name Surname* |
| [ ]  **Yes** | [ ]  **No** | Location/Date | Signatur assessor |

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1. Provided that the finding is based on observations of a Technical Expert. [↑](#footnote-ref-1)
2. Insofar as an issue violates several standard sections that cannot be presented in combination, it may be described either in a separate non-conformity report or by means of reasons presented separately for each affected standard section in turn. [↑](#footnote-ref-2)
3. Immediate actions prevent the instant reduction or suspension of the accreditation and can be determined by the assessor/DAkkS in the event of critical non-conformities. Immediate actions are no substitute for a careful analysis of root cause and extent as well as the definition and implementation of suitable corrective actions by the CAB. Immediate actions are requirements for the CAB from the respective standard in the section of the management system (e. g. sub clause 8.7/7.10 of DIN EN ISO/IEC 17025:2018, sub clause 8.7 of DIN EN ISO/IEC 17065:2013, sub clause 10.2.7 of DIN EN ISO/IEC 17021-01:2015 etc.). [↑](#footnote-ref-3)
4. The implementation of specified immediate actions shall be demonstrated to the assessor and the DAkkS by the above deadline. [↑](#footnote-ref-4)