|  |  |  |  |
| --- | --- | --- | --- |
| **Contractor** | [Insert text here] | **Notice of Test No.** | [Insert date here] |
| **Contract No.** | [Insert text here] | **Project No.** | [Insert text here] |
| **Project Name** | [Insert text here] | **Lot No.** | [Insert text here] |
| **Chainage** | [Insert text here] | **CAR No.** | [Insert text here] |

| Non‑conformance details: | | |
| --- | --- | --- |
| NCR No :  Date:  **Administrator to include other relevant information if applicable:**   * **when the Non‑conformance has to be rectified** * **whether this CAR is related to another CAR or NCR, and** * **other communications CA had with the contractor to date** | | |
| **Issued by** | | |
| **Name** | **Signature** | **Date** |
|  |  |  |
| **Received by** | | |
| **Name** | **Contractor’s Representative** | **Date** |
|  |  |  |

| Contractor’s comments: | | |
| --- | --- | --- |
| (Immediate action to fix the problem and, if required, actions to correct cause to prevent reoccurrence. Records / analysis to be attached as appropriate.) | | |
|  | | |
| **Name** | **Signature** | **Date** |
|  |  |  |

| Administrator’s comments: | | |
| --- | --- | --- |
| (Verification of effectiveness of actions taken) | | |
|  | | |
| **Name** | **Signature** | **Date** |
|  |  |  |