

Equipment Non-Conformance Documentation Sample

Document No.

(e.g., EQ-NC-2024-001)

Date Reported

Reported By

Full Name

Department

Department/Area

Equipment Details

Equipment Name

Enter equipment name

Equipment ID/Serial Number

Enter ID/Serial Number

Manufacturer

Enter manufacturer

Location

Enter location

Description of Non-Conformance

Describe the non-conformance and how it was identified

Immediate Action Taken

Describe any immediate action taken

Investigation

Summary of root cause investigation

Corrective / Preventive Actions

Action	Responsible Person	Due Date	Status

Verification of Completion

Detail verification of action completion

Approval

Prepared By

Date

Approved By

Date