

Material Non-Conformance Reporting Form

Report No.:

Date:

Reported By:

Department:

Material Name:

Supplier:

Batch / Lot No.:

Quantity Received:

PO Number:

Description of Non-Conformance:

Reference
Standard/Spec:

Detected By:

Date Detected:

Immediate Action Taken:

Disposition / Suggested
Action:

Select

Remarks:

Reported By / Date

Reviewed By / Date

Approved By / Date