



PM Safety Consultants Limited

**PROJECT
QUALITY ASSURANCE
PROFORMAS**

Project Number:

PM Safety Consultants Limited

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1.0 PROJECT QUALITY PLAN

1.1	Project Title	
1.2	Job Number	
1.3	Start Date	
1.4	Name & Address of Client	
	Telephone & Fax	
	Email	
1.5	Client Contract Contact	
1.6	Client Project Contact	
1.7	Project Quality Requirements	
1.8	Work Scope	
1.9	Scheduled Completion Date	
1.10	Quality Record Requirements	
1.11	Project Manager	
1.12	Project Record Structure	
1.13	Other Project Contacts	
1.14	Project Personnel	

2.0 PROJECT INSTRUCTION LOG

Project Instruction	Title	Author	Issue	Date	Instruction Recipient

Applicable: Yes / No

Details:

5.1 Example Calculation Approval Sheet

Calculation Approval Sheet			
Project Number:			
Project Title:			
Client:			
Calculation Number:			
Calculation Title:			
Issue Number:			
	Name	Signature	Date
Originator			
Checker			
Approver			
Comments			

5.2 Example Calculation Sheet

Calculation Sheet (Page of)	
Project Number:	
Project Title:	
Client:	
Originator:	Checker:
Calculation Number:	Issue Number:
Title:	

7.0 TRAINING RECORDS

TRAINING RECORDS (Page of)					
Project Number:					
Project Title:					
Client:					
Training Officer	PMSC Staff	Venue	Subject/Reading Assignment	Date	Signature of Completion

Reference Guidelines: Training Records = TR Reference Format: TR_ (Project No) _(sequential number starting 001) e.g.TR_93_001

8.1 Example Record of Conversation Sheet

Record of Conversation	
To: Company:	
From: Company:	
Date:	Record Number:

10.1 Example Report Approval Cover Sheet

Report Approval Cover Sheet
Report Number:
Report Title:
Copy Number:
Prepared By:
Date Issued:
Revision Status:

10.2 Example Document Comments Front Sheet

Document Comments Front Sheet		
Project Number:		
Project Title:		
Client:		
Document Number:	Issue Number:	
Title		
Originator:		
Date of Issue for Comment:	Date Comment Required:	
Reviewer:		
Sections to be Reviewed:		
Section Number	Comment	Originator Decision

12.0 QUALITY AUDIT RECORDS

QUALITY AUDIT RECORDS (Page of)					
Project Number:					
Project Title:					
Client:					
QA Audit No.	Date	Deficiencies in the Project File	Action Taken	QA Man Signature of Approval	Comments

12.1 Example Audit Notification Proforma

Audit Notification	
To:	
From:	
Date:	
This memo formally provides notification of an internal audit to be completed on a PM Safety Consultants Limited project.	
Project Number:	
Project Title:	
Audit Date:	Audit Time:
Audit Scope:	
Audit Team:	
IF THIS DATE AND TIME IS INCONVENIENT, PLEASE INFORM.	

12.3 Example Audit Report Proforma

PM Safety Consultants Limited	AUDIT REPORT (Page of)	Audit Report Number
Allotted Organisation:		Project/Purchase Order Number:
Address:		Scope of Supply:
Tel:		Type:
Fax:		Date:
Persons Contacted:		Audit Criteria:
Audit Team:		Previous Audit Date:
		Previous Audit Reference:
Summary of Audit:		
Signatures:		
Audit Team Leader:		Date:
Quality Manager:		Date:

12.4 Example Non-Conformance Report (NCR) Proforma

Non-Conformance Report (NCR)	
NCR Number:	Date:
Project:	Project Number:
Finding/Non-Conformance	
Reported By:	Acknowledged By:
Proposed Solution:	
Completion Date:	
Proposed By (Project Manager)	Date
Reviewed By: (QA Manager)	Date
Verification (Details of measures taken)	
Reviewed By: (Project Manager)	Date
Verified By: (QA Manager)	Date

12.5 Example Corrective Action Request Status Log

Corrective Action Request (CAR) Status Log										
CAR Serial Number	CAR Issued to	Deficiency	Audit Date	Initials of Auditor	Response Due Date	Date Reminder Sent	Corrective Action Completion Date	Action to Prevent Recurrence Completion Date	Proposed Follow-Up Date	Date CAR Closed