

Factory Visit Report

File No:			
Audit Date			
Company Name			
Company Registration No			
Postal Address			
Physical Address			
Tel No		Fax No	

Personnel:	Name	E-mail	Contact #
MD / General Manager			
Production / Factory Manager			
Technical / Quality Manager			
Management Representative			

Factory Size			
Extruders		Injection Moulders	
Production Staff		Total Staff	

Certification	Permit #	Authority	Expiry	Tradename
ISO 9001				
SANS 966 Part 1				
SANS 966 Part 2				
SANS 16422 / ISO 16422				
SANS 1283				
SANS 4427 part 2				
SANS 4427 part 3				
SANS 791				
SANS 1601				
SANS 967				
SANS 61386-24				
SANS 674				
SANS 11				
SANS 271				
SANS 1086				
SANS 1156				
SANS 721				
SANS 8773				
SANS 14236				
SANS 1808				
SANS 15874				
SANS 21138				

Check the following points and record details:		Comply	
		Y	N
1	ISO 9001	<input type="checkbox"/>	<input type="checkbox"/>
2	Quality Manual / Works Instructions	<input type="checkbox"/>	<input type="checkbox"/>
3	SANS Standards	<input type="checkbox"/>	<input type="checkbox"/>
4	Production Planning / Works Orders	<input type="checkbox"/>	<input type="checkbox"/>
5	Raw Material Storage and Control	<input type="checkbox"/>	<input type="checkbox"/>
6	COC and COA	<input type="checkbox"/>	<input type="checkbox"/>
7	Compounded / Pre-mix Control	<input type="checkbox"/>	<input type="checkbox"/>
8	Reworked Material Control	<input type="checkbox"/>	<input type="checkbox"/>
9	Usage of Reworked Material	<input type="checkbox"/>	<input type="checkbox"/>
10	Mass Balance	<input type="checkbox"/>	<input type="checkbox"/>
11	Certified Material (Raws/Rubbers)	<input type="checkbox"/>	<input type="checkbox"/>
12	Die Store	<input type="checkbox"/>	<input type="checkbox"/>
13	Maintenance	<input type="checkbox"/>	<input type="checkbox"/>
14	Machine Conditions	<input type="checkbox"/>	<input type="checkbox"/>
15	Extrusion Control	<input type="checkbox"/>	<input type="checkbox"/>
16	Correct Material to Extruders	<input type="checkbox"/>	<input type="checkbox"/>
17	Visual Standards	<input type="checkbox"/>	<input type="checkbox"/>

18	In-Line Tests	<input type="checkbox"/>	<input type="checkbox"/>
19	Product Marking - Comply	<input type="checkbox"/>	<input type="checkbox"/>
20	Product Marking - Durable	<input type="checkbox"/>	<input type="checkbox"/>
21	Handling of Products	<input type="checkbox"/>	<input type="checkbox"/>
22	Ends Workmanship / Socket Dimensions	<input type="checkbox"/>	<input type="checkbox"/>
23	Calibrated Laboratory Equipment	<input type="checkbox"/>	<input type="checkbox"/>
24	Laboratory operator skills	<input type="checkbox"/>	<input type="checkbox"/>
25	Specific Permit Conditions	<input type="checkbox"/>	<input type="checkbox"/>
26	Laboratory Records	<input type="checkbox"/>	<input type="checkbox"/>
27	Traceability	<input type="checkbox"/>	<input type="checkbox"/>
28	NCR File	<input type="checkbox"/>	<input type="checkbox"/>
29	Storage of Pipe and Fittings	<input type="checkbox"/>	<input type="checkbox"/>
30	Housekeeping	<input type="checkbox"/>	<input type="checkbox"/>
31	Participation (Meetings / Workgroups)	<input type="checkbox"/>	<input type="checkbox"/>
32	Previous Findings Cleared	<input type="checkbox"/>	<input type="checkbox"/>
33	No Prohibited Items	<input type="checkbox"/>	<input type="checkbox"/>

Conversion Volumes					
Pipe Sizes					
Quality Manual	<table border="1"> <tr> <td>Rev #</td> <td></td> <td>Issue Date</td> <td></td> </tr> </table>	Rev #		Issue Date	
Rev #		Issue Date			

