

Project No. 011643-08

July 18, 2013

Mr. Faron Knott
Corner Brook Pulp And Paper Limited
Woodland Operations
Mill Road
P.O. Box 2001
Corner Brook, Newfoundland & Labrador
CAN, A2H 6J4

SUBJECT: REGISTRATION PROGRAM

Dear Faron:

Please find attached the Audit Report documenting the results of our Re-Assessment Audit of your management system to the ISO 14001:2004 standard conducted at your Corner Brook facility on July 09, 2013. The Recommendation at the end of Section 4 of this report provides a status of your registration.

We thank you and your organization for the support and co-operation provided during the audit and if you have any questions, please contact the undersigned.

Best Regards,

Guillaume Gignac
SAI Global Team Leader
Encls.

SAI Global Confidential

MANAGEMENT SYSTEM AUDIT REPORT

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REPORT DISTRIBUTION

Corner Brook Pulp And Paper Limited
SAI Global File
Guillaume Gignac

COMMERCIAL- IN – CONFIDENCE

The contents of this report must not be disclosed to a third party without the agreement of the SAI Global Client

DISCLAIMER:

This report has been prepared by SAI Global (SAI Global) in respect of a Client's application for assessment by SAI Global. The purpose of the report is to comment upon evidence of the Client's compliance with the standards or other criteria specified. The content of this report applies only to matters, which were evident to SAI Global at the time of the audit within the audit scope. SAI Global does not warrant or otherwise comment upon the suitability of the contents of the report or the certificate for any particular purpose or use. SAI Global accepts no liability whatsoever for consequences to, or actions taken by, third parties.

SECTION 1 - COMPANY INFORMATION

Company Name: Corner Brook Pulp And Paper Limited
Address: Mill Road
P.O. Box 2001
Corner Brook, Newfoundland & Labrador
CAN, A2H 6J4
Client No.: 011643
Contact Person: Mr. Faron Knott
Title: Environmental Management Representative

SECTION 2 – PURPOSE

The purpose of the audit was to evaluate the extent of conformance to the referenced standard, confirm the effective inter-action between the elements of the system audited, and verify demonstrated commitment to maintain the effectiveness of the system. The purpose of this audit report is to summarize the degree of conformance with relevant criteria, as defined within this report, based on the evidence obtained during the audit of your organization.

This audit was performed in accordance with the requirements of SAI Global procedures which reflect the requirements and guidance provided in recognized international standards relating to audit practices such as ISO/IEC 17021, ISO 19011 and other normative criteria. SAI Global Auditors are assigned to audits according to industry, standard or technical competencies appropriate to the organization being audited. Details of such experience and competency are maintained in our records.

In addition to the information contained in this audit report, SAI Global maintains files containing details of organization size and personnel as well as evidence collected during preliminary and subsequent audit activities relevant to the application for initial registration of your organization. Such information includes details of your primary contact persons and site addresses. Please take care to advise us of any change that may affect the application and/or registration or may assist us to keep your contact information up to date, as required by our Terms and Conditions.

Please note that this report is subject to independent review and approval. Should changes to the outcomes of this report be necessary as a result of the review, a revised report will be issued and will supersede this report.

SECTION 3 - MANAGEMENT SYSTEM AND SCOPE

Audit Standard: ISO 14001:2004

US SIC / NACE Codes: 0811 0851 2411 / A02.0 A02.0 DD20.1

Scope of Registration

Woodlands operations in the Forest Management Districts No. 5, 6, 9, 14, 15, 16 including management planning, road construction and maintenance, harvesting operations, transportation of fibre, silviculture and support services.

Statutory and Regulatory Requirements Referenced

1. Corner Brook Pulp and Paper uses the services of through Global LTS for Legal tracking.
2. Federal, Provincial and Municipal applicable to forest management and forestry operations are being tracked. In addition other and internal requirements set by the organization are being tracked.

Dependency Note

Not Applicable

SECTION 4 - AUDIT DETAILS AND RECOMMENDATION

Type of Audit: Re-Assessment Audit

Audit Dates: July 09, 2013 to July 11, 2013

Duration of Audit: **Person(s):** 2 **Day(s):** 4,5

Audit Team

Position	Name
Team Leader	Guillaume Gignac
Team Member	Daniel Martin

Re-Assessment Audit

Executive Overview

The Environment Management System of Corner Brook Pulp and Paper Woodlands Operations continues to function effectively for the organization in achieving its Environment Policy. Senior management continues to maintain a high level of commitment to the EMS and its improvement. In addition all staff and forestry contractors including contractor employees continue to demonstrate a genuine interest in doing the right thing to improve the organization's EMS. Several positive points were noted during the audit:

- Health and safety in all operations.
- Effective use of GPS technology.
- New cue cards on Species at risk distributed to personnel
- High level of commitment from all staff.

Management System – Main Components

Management System Documentation

The management system manual revision was reviewed and found to be in conformance with the requirements of the ISO 14001:2004 standard.

Management Review

Management review meetings are conducted Quarterly. A review of the records of the most recent management review was performed and found to meet the requirements of the ISO 14001:2004 standard.

Policy

Based on the results of this audit, the Corner Brook Pulp And Paper Limited management system is effectively implemented and fulfils the stated policy.

Objectives

Based on the results of this audit, the Corner Brook Pulp And Paper Limited management system is effectively implemented and the stated objectives are being met.

Internal Audits

Internal audits are being conducted at planned intervals to ensure conformance to planned arrangements, the requirements of the ISO 14001:2004 standard and the established management system.

Compliance Evaluation

Corner Brook Pulp And Paper Limited has not adequately implemented processes for periodically evaluating its compliance with applicable legal and other requirements. Compliance evaluations are conducted every 3 years. Details are provided in NCR No. 2013-01.

Continual Improvement

Corner Brook Pulp And Paper Limited is implementing an effective process for the continual improvement of the management system through the use of the policy, objectives, audit results, data analysis, corrective and preventive actions and management review.

Past Performance - Client and SAI Global Audit Review

(CORNER BROOK PULP AND PAPER LIMITED is implementing an effective process for the continual improvement of the management system through the use of the policy, objectives, audit result, data analysis, corrective and preventive actions and management review. Over the last cycle the company has improved in several area of its system in areas such as: Environment Incident Review, in keeping the interest of all in doing the right thing, maintaining a very thorough internal audit process

Review of Changes

The management system has not changed since the previous audit. Over the past 3 years a reduction of staff as continued.

Previous Audit Issues

All AOCs raised at the last audit were verified. They were properly implemented with the exception of the AOC on evaluation of compliance of other requirements which resulted in a non-conformance being raised.

Usage of Marks, Logos and Certificate

The certificates are well posted in the organization's office. CORNER BROOK PULP AND PAPER LIMITED uses the QMI-SAI Global Mark on maps and other documents.

Environmental and/or Health and Safety Management System Components

Site Inspection

The audit team toured the site and concluded that the conditions of the site reflect an effectively implemented management system.

Aspect and Hazard Identification

Based on the results of this audit, the Corner Brook Pulp And Paper Limited management system has established, implemented and maintained procedures for the identification, evaluation and upkeep of :

1. Maintenance of visual quality;
2. Potential for fuel spill;
3. Fibre recovery;
4. Collection and disposal of garbage;
5. Potential for degradation of water quality;
6. Potential for soil disturbance ;

and the associated impacts and risks

Operational Controls, Monitoring and Measurement Processes

Implementation of necessary operational, monitoring and measurement controls Maintenance of visual quality, Potential for fuel spill, Fibre recovery, Collection and disposal of garbage, Potential for degradation of water quality, Potential for soil disturbance is adequately demonstrated with the exception of the 2 AOCs raised.

Emergency Preparedness and Response

Corner Brook Pulp and Paper Ltd has identified the potential emergency situations and developed and tested

response procedures. Many test of the emergency procedure are done annually with different contractor employees and for different potential emergency situation.

Recommendation:

The results of this Re-Assessment Audit Re-Assessment Audit indicates that the management system of Corner Brook Pulp And Paper Limited does not fully meet the requirements the ISO 14001:2004 standard and has not been maintained based on the area of nonconformance identified during the audit and as documented in the attached Non-conformance Report. As discussed during the Closing meeting, please submit a response Root Cause Analysis within the next 30 days and completed corrective action within the next 60 days.

A recommendation for re-registration to the ISO 14001:2004 standard and to the scope of registration identified in this report is on hold pending the receipt, review and acceptance of the corrective action taken.

Notwithstanding the identified area(s) of non-conformance, the results of this audit have confirmed that Corner Brook Pulp And Paper Limited:

- Continues to effectively implement a management system that meets the ISO 14001:2004 standard for the scope of registration identified in this report.
- Ensures the management system remains effective considering internal and external changes.
- Demonstrates a commitment to maintain the effectiveness and improve the management system in order to enhance overall performance.
- Operates the management system to ensure the achievement of the stated policies and objectives.

Please note that this report is subject to independent review and approval. Should changes to the outcomes of this report be necessary as a result of the review, a revised report will be issued and will supersede this report.

SECTION 5 – AUDIT FINDINGS

Functions, Activity, Processes and Areas Audited	
All of the applicable requirements of the ISO 14001:2004 standard for the functions, processes and areas listed below were reviewed.	
<i>Function/Activity/Process/Area</i>	<i>Details</i>
4.1 General Requirements	The scope of the EMS was properly defined and communicated to company personnel. The company has established, implemented, documented, maintained, and continually improved an Environmental Management System program in conformity with the requirements of ISO 14001:2004.
4.2 Environmental Policy	The environmental policy meets all the requirements of this standard. It is documented (posted in the woodlands office) and is available to the public via the company website (http://www.cbpl.com). The environmental policy is communicated to all persons working on behalf of the organization. This was verified during the field visit. However by interview, employees did not fully demonstrate good knowledge of the environmental policy. An AOC was raised.
4.3.1 Environmental Aspects	Environmental Aspects and Impacts were defined in the Environmental Aspects Manual dated May 26, 2007, as the basis in determining which aspects required action plans and targets. The methodology for determining significance is defined by procedure, and there were six identified significant aspects. The list of significant environmental aspects was last revised during the June 26 2012 quarterly management review. This element was

	appropriately implemented.
4.3.2 Legal and other requirements	<p>The Environmental Management Representative is responsible to ensure that the legal requirements procedures meet the ISO 14001-2004 standard and are readily accessible to CBPP Woodlands personnel. CBPP Woodlands subscribes to the Legal Tracking Service through Global LTS. This service identifies and tracks changes to legal requirements at the three levels of government. This process is described in Global LTS's procedure number GLTS-LT-PR-002 (located in Manual 8, Section 4) dated April 1, 2012. Monthly Updates are received by the EMR and communicated to CBPP Woodlands staff by e-mail and Woodlands Management Committee meetings. This element was appropriately implemented.</p>
4.3.3 Objectives, Targets, and Programme(s)	<p>CBPPL has established implemented and maintained documented environmental objectives and targets. There is a long history of completed programs, dating as far back as 2001. Currently, there are four programs in progress (Fuel consumption, EMS documentation improvement, Public values, and Wildlife tree).</p> <p>The objectives and targets are measurable and are consistent with the environmental policy. Each program reviewed in the course of this audit has at least one designated person responsible for achieving objectives and targets at relevant functions and levels in the organization, with a due date and a statement when the assigned task was realized. This element was properly addressed.</p>
4.4.1 Resources, Roles, Responsibility, and Authority	<p>This section of the manual provides detailed description of the roles and responsibilities related to both ISO and CSA management systems. EMR is appointed (Faron Knott). CBPP has an Environment Management System Management Review Committee in place with specific role defined.</p> <p>The audit found that roles & responsibilities are understood by personnel and contractors. This element was appropriately implemented.</p>
4.4.2 Competence, Training, and Awareness	<p>The Woodlands Management Committee (WMC) is responsible for the identification of training requirements. It is the WMC's responsibility to ensure that employees have obtained the knowledge and skills necessary to perform their job function in a competent manner while maintaining Company policies, rules, and all legislated requirements relating operations and training.</p> <p>Training skills matrix, version 13 identifies the training, skills required for persons performing tasks on the organization's behalf in the implementation of the EMS/SFM. The Safety & Training Coordinator is responsible for the development and implementation of training and programs identified by the WMC as well as monitoring training records and ensuring they meet the requirements of the Environmental Management System.</p> <p>The field audit found that personnel were highly competent in all areas pertaining to their roles and responsibilities. Evidence of training was provided for all the employees met during the field visit.</p>
4.4.3 Communication	<p>Procedure for internal communication is well documented and several means of communications are used such as training/information sessions, meetings, newsletters and bulletin boards</p> <p>External communication report is documenting all requests from external parties. Very well documented with many request.</p> <p>CBPP Woodlands reports annually on its significant environmental aspects and progress through the publication of the Environmental Progress Report. The 2012 report is available on the company website (www.cbpp.com). This element was appropriately implemented.</p>
4.4.4 Documentation	<p>There was satisfactory documentation in place to describe the elements of the EMS and their interaction as required by the standard. The documentation also clearly showed the relationship between environmental aspects, related documents and records, and the requirements of the standard. Records required by the standard and the organization were also evidenced. This element was appropriately implemented.</p>

4.4.5 Control of Documents	Procedures for approval, review, update of documents are contained in the Document and data control procedure. Documents are identified with a version number and revision date. Relevant versions of documents are available on the company server, or by hard copy. All the documents consulted in the course of the audit were legible and readily available. Both electronic and paper copies were consulted during the audit. Table 11.1 of the Documents and data control procedure indicates the location of EMS/SFM documents, the person responsible and the required retention time.
4.4.6 Operational Control	Each work instruction is documented. EWI-3 for SEA: 3. Fibre Recovery. Version 3. Last revised: April 3, 2012. The operational criteria is stipulated in the EWI (eg: all live spruce and balsam fir trees greater than 9 cm at breast height are to be felled and utilized for pulpwood and/or sawlogs, all stumps are to be cut to a maximum of 15 cm in height, all trees are to be topped at 8 cm, etc). Employees interviewed during the field audit demonstrated good knowledge of operational control procedures applicable to their operations. During the field audit, a stream crossing was inspected by the auditor. Two issues were found with the output of the culvert. In addition 2 small spills were not cleaned up. Two AOCs were raised to address these issues
4.4.7 Emergency Preparedness and Response	A standard emergency response procedure has been defined by the organization listing what needs to be done in the case of an emergency situation does occur, phone numbers. Forms that must be filled out are also included in the emergency response procedure. Employees interviewed during the field audit demonstrated good understanding of the emergency preparedness and response procedures established by the organization. The emergency response manual was accessible and available on site and stored in the service truck. Emergency response tests are conducted annually. In 2012, Fuel and oil procedure, medical emergency and fire test were conducted.
4.5.1 Monitoring and Measurement	Table 14.1 Monitoring EMS Compliance (Legal and SEA's) contains all the Significant Environmental Aspects identified by the organization, and the monitoring and measure procedures used for monitoring the activities. Implementation of the monitoring and Measurements procedure was verified and found to be adequate during the audit. Interview with the harvesting foreman. Harvesting foreman provided as evidence the #1 monthly EMS Compliance Inspection, dated June 10, 2013. The EMR provided the #2 EMS compliance inspections for the contractor visited in the ffiled in Jonathons Pond operating area, dated April 17, 2013, covering the period from January-April 2013.
4.5.2 Evaluation of Compliance	A Legal and other requirements compliance audit is done every 3 years. A legal compliance audit was done in 2013 in conjunction with the internal audit which was held in February and June 2013. All required correctives actions following the compliance audit are documented in the audit action plan. In addition compliance is evaluated through regular inspections. Three level of inspections are in place. It was evident that CBPP does evaluate the compliance of some of their other requirements however it is not clear by which means all of CBPP other requirements are evaluated for compliance and how records of the results of the evaluation are kept. A non-conformance was raised. NC 2013-01
4.5.3 Nonconformity, Corrective Action and Preventive Action	CBPPL has a procedure in place last Revised on March 22, 2013. Environmental incident report C-FRM-01 is used to document any non-conformance. Corrective actions are documented on the same report form. Any employee may fill in an incident report. The report must be sent to the superintendent and/or to the EMS manager who will get a copy of each incident report. Internal and External NCRs are reported on the CAR report which is different than the Incident report. Environmental incident and investigation log and Preventive action log are recording all actions taken for non-conformities or to prevent them. In 2012 5 incident reports and 4 incident reports in 2013 with investigation

	were raised. A number of Incident reports were verified along with NCR raised at the internal audit. This element was appropriately implemented.
4.5.4 Control of Records	The organization has a procedure in place to meet the requirements of this criterion. The Control of environmental records procedure states the organization's requirements for storage, the responsible person and retention time for each type of record covered under the scope of the EMS. Records consulted during the audit were found to be of the most current version, legible and available. EMR was able to provide the requested records in a very efficient and effective manner. Records sampled throughout the audit were able to confirm the effectiveness of the organization's EMS and were effectively managed in all audited areas.
4.5.5 Internal Audit	Internal audits are conducted annually. Furthermore, Environmental Management Representative is responsible for implementing a schedule for conducting audits. Internal audit report as well as Corrective/Preventive Action Requests are completed by the lead auditor. The last internal audit was conducted in 2 phases; February 11-22 2013 and June 10-20 2013. An audit plan was prepared and the audit scope covered the Woodlands Operations of CBPPL. It includes all activities, products and services of the company as referenced in the EMS.3. An Audit report was prepared and lists all the findings and recommendation.
4.6 Management Review	The company holds management reviews quarterly. The minutes of the meeting for September 25, 2012, December 11, 2012, April 9-10, 2013 and July 18, 2013 were reviewed. Very comprehensive. Interview with the Woodlands Manager was held. Very strong commitment in maintaining their EMS was noted. In the past 2 years CBPPL has added FSC FM certification. Human resources are their biggest issue. CBPPL has moved roles and responsibilities around. It has affected their EMS to a certain extent. It is not improving as effectively as it should however they are still in reasonably good shape. CBPPL has not added new programmes since the last audit. Based on the management review records, reviews were judged to effectively evaluate the environmental system. They also were found to assess the suitability and effectiveness of the system with regards to the standard and the company's operations.

Non-Conformances (NCRs):

All of the applicable requirements of the ISO 14001:2004 were audited and considered to be adequately implemented with the exception of the non-conformances identified below.

NCR No.	Clause	Description	Final CAR Due Date:
2013-01	4.5.2	Evaluation of compliance	August 28, 2013

Areas of Concern (AoC)

- AOC 4.2 - Not all employees interviewed during the field audit did demonstrate good practical knowledge of the organization's environmental policy.
- AOC 4.4.6 - Observations in the field demonstrated that one stream crossing was not adequately installed and centerline stream crossing not installed
- AOC 4.4.6 - Some oil spills (patches) were not picked up in one particular operation.

Opportunities for Improvement (OFI)

- The organization should review the legislation and its risk evaluation to determine if a fire extinguisher is needed in the cabin of the fuel trucks.
- Indicator 6.3.2 - Consider improving measures to ensure the health and safety of the general public when conducting forestry operations.
- Indicator 5.1.3 - Consider reviewing this indicator and to come up with a different wood utilization indicator
- Indicator 5.1.4 - Consider documenting the annual assessment of the access management plan
- The organization should pursue its efforts to ensure that the operators and contractors are comfortable with the methods and procedures developed to maintain residual structures on harvested areas.

Other Issues

During our next audit the issues identified as requiring attention will be reviewed to ensure they have been adequately addressed.

Scheduled Audit: July 9, 2014
Date(s): July 9, 2014 to July 11, 2014
Type of Audit: 12 Month Surveillance Audit
No. of Persons: 2
No. of Audit Days Required: 3

Guillaume Gignac
SAI Global Team Leader

Date: July 18, 2013

SAI GLOBAL REGISTRATION PROGRAM

INSTRUCTIONS FOR THE COMPLETION OF NON-CONFORMANCE REPORTS (NCR)

Failure to provide action plans as arranged with SAI Global and/or to implement correction and corrective action within the nominated time frames may lead to a recommendation that your certification be denied or suspended. Certain sectors require both Major and minor NCR's to be cleared within a specified time. Refer to sector specific requirements for details.

Section 1

To be completed by the SAI Global Team Leader at the time of the audit. A copy of the NCR shall be left with the Client at the completion of the audit.

Section 2 - Organization Response

Complete Section 2 as described below and return it to -SAI Global. In lieu of completing SAI Global NCR form, the Client may submit an equivalent corrective action document.	
Root Cause:	Consider using appropriate root-cause analysis tools such as, 5 Why's, FMEAs, Fault tree analysis and fish bone diagrams, etc., to ensure identification of root cause.
Correction:	Describe the action taken to correct the incident and contain the problem. Objective evidence in the form of revised procedures, records, etc. shall be submitted unless otherwise identified by the Audit Team Leader
Corrective Action:	Client shall describe the systemic (long term) corrective action(s) planned or taken to eliminate the root cause to prevent recurrence. Objective evidence in the form of revised procedures, records, etc. shall be submitted unless otherwise identified by the Audit Team Leader. <i>NOTE: For audits to the ISO 13485 – CMDCAS standard the client shall submit a corrective action plan that identifies the steps to correct the root cause and verify the effectiveness of actions taken within 30 days of the NCR issuance date. Objective evidence for closure can be submitted at a later date.</i>
Organization Acknowledgement:	Name of the organizations representative who was presented the non-conformance. Signature is not required.
SAI Global Verification Method	Record if site visit is required or what information is to be provided to effect NCR closure.

Section 3

The SAI Global Team Leader /Client/Project Manager will review the completed NCR or Client's equivalent corrective action document for adequate root cause analysis, systemic corrective action taken on root cause and objective evidence submitted. Upon completion of the review the SAI Global Team Leader will either accept the corrective action taken and clear the NCR or request that the Client provide an additional or revised response or objective evidence in order to clear the NCR. Comments shall be added to the hardcopy of the NCR or electronically as appropriate to identify any request for additional information, including the date for submittal.

Section 4 – Verification of Effectiveness

Identify the method (plan) to be utilized to verify that the corrective action taken is effective. This could be a follow-up audit or submission of objective evidence of implementation. Where appropriate, records of the client's method of verifying effectiveness can be utilized. Record in the results the actual method and documents reviewed to verify effectiveness.

Section 5 - NCR Closure

Name and date of individual performing the verification and NCR closure.

Response is not acceptable for these reasons:

Please submit a revised response by:

Reviewer:

Date:

Response is acceptable please see section 4 for details. Reviewer:

Date:

Section 4- SAI Global Verification of Corrective Action for effectiveness

It is not clear by which means all of CBPP other requirements are evaluated for compliance and how records of the results of the evaluation are kept.

Section 5- SAI Global NCR Closure:

Name:

Date:

SAI GLOBAL REGISTRATION PROGRAM

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