



NON COMPLIANT WORKS REPORT FORM

Please use NON COMPLIANT WORKS PROCEDURE form to correctly use this form.

This form should be used when a Statewide Door Service employee believes that further work by is required for completion of a task. It should be returned to Statewide Door Service, with the appropriate Job Service Record.

OR when a Statewide Door Service, service controller is informed of a rejection of works, due to non compliance of work.

Work Originally performed for Company: Date:

Site Address:

Reported by:

- Employee: Mobile: Contractor: Mobile: Lead Contract: Mobile: Phone: Fax: Email:

Notification to: On Date:

Original Job Description:

- This work requires completion This work was completed but has been rejected. Workmanship not up to standard. Work not completed as quoted. Other:

Further work required:

Person required: Electrical Technician Mechanical Technician Plc Technician Other:

Work Actioned by: On date:

Internal Action required Corrective Action to Employee: On Date: Corrective Completion: Corrective Works Completed on: By: Signature:

External Action required Corrective Action to Contractor: On Date: Corrective Completion: Corrective Works Completed on: By: Signature:

Completion Additional work does not need to be checked: Signature of person instigating action: Additional work does need to be checked. Actioned to: On Date: Checked by: On Date: Ok Reject again

Notification of Completion to: Matter Closed On Date: OR Notification of Rejection to: Matter Ongoing On Date: