



# Non Conformance Form - Foamalite Ltd. Page 1 of 2



Email or Fax back to Mr Cathal Hawkins, cathal@foamalite.ie - +353 43 83523

**ALL BOXES NEED TO BE COMPLETED BEFORE A NON CONFORMANCE CAN BE PROCESSED**

## Customer Details

Company		End user (If different)	
Company		Company	
Address		Address	
Contact		Contact	
Tel.		Tel.	
Fax.		Fax.	
Email		Email	

## Product Information

Product Description		Pallet Number	
Product Size (Length x Width)		Quantity Order	
Product Thickness		Quantity Delivered	
Customer Order Number		Colour	
Foamalite Order Number		Date of Issue	
PE	BRANDED/ PLAIN/ NONE	Date of Claim	
Delivery Date			

### ***This section of for internal Foamalite use only***

Non Conformance received by	_____	Date	_____
Investigated by:	_____	Date	_____
Customer Complaint Number:	_____		_____



# Non Conformance Form - Foamalite Ltd. - Page 2 of 2



Email or Fax back to Mr Cathal Hawkins, [cathal@foamalite.ie](mailto:cathal@foamalite.ie) - +353 43 83523

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## Application

What is the product application

Did the product require any processing such as:

- Printing - One Sided

Yes / No

(Please delete box as appropriate)

- Printing - Two Sided

Yes / No

(Please delete box as appropriate)

- Cutting

Yes / No

(Please delete box as appropriate)

- Bonding

Yes / No

(Please delete box as appropriate)

- Mechanical fixings

Yes / No

(Please delete box as appropriate)

- Other

Is the product used outside/ near a light source / near a heat source

Yes / No

## Non Conformance Details

Quantity of sheet with issue

Details of issue

Do you consider the issue is related to: (Delete as appropriate)

a) The manufacture of the sheet

b) The secondary processing of the sheet

c) The application of the sheet

## Evidence of Non Conformance

Picture of label on products to be provided by mail or email to Mr Cathal Hawkins ([cathal@foamalite.ie](mailto:cathal@foamalite.ie))

*(This is essential for internal traceability in Foamalite). Issues cannot be reviewed without this information*

Picture sent

Yes / No

Picture of issue to be provided by mail or email to Mr Cathal Hawkins ([cathal@foamalite.ie](mailto:cathal@foamalite.ie))

Picture sent

Yes / No

Sample of defective product to be send to Mr Cathal Hawkins, Foamalite Ltd., Gowna, Co. Cavan.

Sample sent

Yes / No

Do you consider the issue is related to: (Delete as appropriate)

a) The manufacture of the sheet

b) The secondary processing of the sheet

c) The application of the sheet

Non Conformance received by

Date

Investigated by:

Date

Customer Complaint Number: