CPCQA CERTIFICATION QUALITY CONCERN REPORTING FORM

File No. (Note: CPCQA to Issue this):	**Date:**
Person Reporting Concern	
Name:	**Title:**
Company or Organization:	
Phone: **Email:**	
CPCQA Certified Plant Information	
CPCQA Certified Plant:	**Location:**
Your Main Contact at the Plant:	

Nature of Concern:
(Describe the concern in detail and include specifics such as project, location, time of year, and where possible include the non-conformance as it relates to CSA, ASTM, PCI, AWWA, or Provincial specifications - Add additional Pages as Required)

Accredited Certification Organization (ACO) Response/Recommended Action:

CPCQA Quality Assurance Council (QAC) Resolution:

Closing Date: _____

Additional Page:

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