

## AF05-ASSESSMENT REPORT

Laboratory/Inspection body:		<i>MOTIVA Laboratories Inc.</i>			
Quality Manager: <i>I. M. Motiva MD</i>			Date(s) of Visit: <i>13-15 August 2017</i>		
Type of Visit:	Pre-Assessment <input type="checkbox"/>	Assessment <input checked="" type="checkbox"/>	Re-Assessment <input type="checkbox"/>	Surveillance <input type="checkbox"/>	Verification Visit <input type="checkbox"/>
Facility: <i>Testing</i> / Calibration/ Medical/ Inspection (Circle ONE)			Field(s): <i>Concrete and Steel Testing</i>		
<b>Assessment Team (Names)</b>					
Lead Assessor: <i>OK Engr</i>		Assessor 1: <i>I.M. Smart Tech</i>		Assessor 2:	
Assessor 3:		Assessor 4:		Observer:	
Date of previous visit: <i>N/A First Visit</i>		Non-Conformances recorded during previous visit <b>HAVE / HAVE NOT BEEN</b> cleared. (Circle ONE) <i>N/A</i>			
<b>ASSESSMENT SUMMARY: (Lead Assessor Comments on the overall outcome of the Assessment)</b> <i>The laboratory is very keen to get accredited.</i>					
Number of Non-Conformance(s) Raised.	<b>4</b>	Number of Potential Non-Conformance(s) Raised.	<b>2</b>	Number of Opportunities for Improvement Raised:	<b>0</b>
<b>RECOMMENDATIONS OF ASSESSMENT TEAM: (Does the CAB demonstrate the competence required for accreditation?)</b> <i>This laboratory demonstrates competence in the production of its steel and concrete testing results.</i> Date by which remaining Non-Conformances* are to be cleared by the Laboratory: <i>12 Nov 2017</i>					
<b><u>I.M. MOTIVA MD</u></b> Acknowledged by <b>Authorised Signatory of Lab</b>		<b><u>15 August 17</u></b> Date		<b><u>OK Engr</u></b> Signature of <b>Lead Assessor</b>	

### List of Attachments:

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|---|---|
| <input checked="" type="checkbox"/> Requested Scope of Testing <input checked="" type="checkbox"/> or Calibration <input type="checkbox"/><br><input type="checkbox"/> Testing/Method Checklist Form(s) No. _____<br><input checked="" type="checkbox"/> Assessment Findings Form(s) No. <u>6 Forms</u> | <input type="checkbox"/> Assessment Checklist<br><input type="checkbox"/> Assessment Schedule<br><input type="checkbox"/> Attendance List |
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