



NATIONAL HEAVY VEHICLE ACCREDITATION AUDIT REPORT

TICK AS APPROPRIATE				TICK AS APPROPRIATE	
NHVAS	Maintenance		Mass		ENTRY AUDIT
NHVAS	BFM		AFM		COMPLIANCE AUDIT
WA HVA	Maintenance		Fatigue		RE-ENTRY AUDIT (WA HVA ONLY)
TRUCKSAFE	All Modules				TRIGGERED AUDIT
					RANDOM AUDIT

CONTACT INFORMATION										
Operator name										
Additional trading names										
Australian Business Number										
Operator business address and contact details										
Operator Postal address										
Phone No.					Fax No.					
Mobile					Email address					
Location of audit										
Date of Audit					___/___/___					
Auditor name										
Auditor certification id							Certification expiry Date:		___/___/___	

ATTENDANCE LIST (NAMES AND POSITION TITLES):

NATURE OF OPERATOR BUSINESS (SUMMARY):

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ACCREDITATION VEHICLE SUMMARY (Attach copy of fleet register)

Number of powered vehicles

--

Number of trailing vehicles

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ACCREDITATION DRIVER SUMMARY (Attach copy of driver list)

Number of drivers in BFM

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Number of drivers in AFM

--

Pages in Standard Report that are not included (i.e. for other schemes or modules)	
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AUDIT SUMMARY SHEET

COMPLIANCE CODES			
NAP	Not Applicable	NA	Not Assessed at this Audit
V	Conformance Verified	M	Minor Non-Conformance Requiring Rectification by an Agreed Date
C	Major Non-Conformance Requiring Rectification by an Agreed Date Prior to Accreditation Being Allowed	SFI	Suggestion For Improvement

MAINTENANCE MANAGEMENT				
REQUIREMENT OF STANDARD	COMPLIANCE CODE	CORRECTIVE ACTION REPORT (CAR)	AGREED CLOSEOUT DATE	ACTUAL CLOSEOUT DATE
Std 1. Daily Check				
Std 2. Fault Recording and Reporting				
Std 3. Fault Repair				
Std 4. Maintenance Schedules and Methods				
Std 5. Records and Documentation				
Std 6. Responsibilities				
Std 7. Internal Review				
Std 8. Training and Education				
Std 9. Fuel Quality (fuel tax credit only)				

MASS MANAGEMENT				
REQUIREMENT OF STANDARD	COMPLIANCE CODE	CORRECTIVE ACTION REPORT (CAR)	AGREED CLOSEOUT DATE	ACTUAL CLOSEOUT DATE
Std 1. Responsibilities				
Std 2. Vehicle Control				
Std 3. Vehicle Use				
Std 4. Records and Documentation				
Std 5. Verification				
Std 6. Internal Review				
Std 7. Training and Education				
Std 8. Maintenance of Suspension				

FATIGUE MANAGEMENT (BFM)

REQUIREMENT OF STANDARD	COMPLIANCE CODE	CORRECTIVE ACTION REPORT (CAR)	AGREED CLOSEOUT DATE	ACTUAL CLOSEOUT DATE
Std 1. Scheduling and Rostering				
Std 2. Fitness for Duty				
Std 3. Fatigue Knowledge and awareness				
Std 4. Responsibilities				
Std 5. Internal Review				
Std 6. Records and Documentation				

FATIGUE MANAGEMENT (AFM)

REQUIREMENT OF STANDARD	COMPLIANCE CODE	CORRECTIVE ACTION REPORT (CAR)	AGREED CLOSEOUT DATE	ACTUAL CLOSEOUT DATE
Std 1. Scheduling and Rostering				
Std 2. Readiness for Duty				
Std 3. Fatigue Knowledge and awareness				
Std 4. Responsibilities				
Std 5. Internal Review				
Std 6. Records and Documentation				
Std 7. Health				
Std 8. Workplace Conditions				
Std 9. Management Practices				
Std 10. Operating Limits				

FATIGUE MANAGEMENT (WA HVA ONLY)

REQUIREMENT OF STANDARD	COMPLIANCE CODE	CORRECTIVE ACTION REPORT (CAR)	AGREED CLOSEOUT DATE	ACTUAL CLOSEOUT DATE
Std 1. Scheduling				
Std 2. Rostering				
Std 3. Fitness for work				
Std 4. Training and education				
Std 5. Management of Accidents and Incidents				
Std 6. Workplace Conditions				
Std 7. Documentation and records				
Std 8. Responsibilities				
Std 9. Internal review				

MANAGEMENT (TRUCKSAFE)				
REQUIREMENT OF STANDARD	COMPLIANCE CODE	CORRECTIVE ACTION REPORT (CAR)	AGREED CLOSEOUT DATE	ACTUAL CLOSEOUT DATE
Management Policy and Procedure				
Responsibility				
Internal Review				
Record Keeping				

TRAINING (TRUCKSAFE)				
REQUIREMENT OF STANDARD	COMPLIANCE CODE	CORRECTIVE ACTION REPORT (CAR)	AGREED CLOSEOUT DATE	ACTUAL CLOSEOUT DATE
Training (General)				
Training Needs Analysis				
Driver Road Use Requirements				

WORK PLACE AND DRIVER HEALTH (TRUCKSAFE)

REQUIREMENT OF STANDARD	COMPLIANCE CODE	CORRECTIVE ACTION REPORT (CAR)	AGREED CLOSEOUT DATE	ACTUAL CLOSEOUT DATE
Workplace Health and Safety Issues				
Medical Practitioner				
Driver Health Screening				
Rehabilitation				
Drive Hours				

ASSESSMENT/AUDIT REPORT OBSERVATIONS AND COMMENTS

SUMMARY OF AUDIT FINDINGS

The operator named in this report presented the following documentation to demonstrate compliance with the standards:

Provide details on how the operator demonstrated compliance for each Standard, including dates and type of sample documentation. Please refer to audit matrix for details of assessment steps.

MAINTENANCE MANAGEMENT	DETAILS
<p>Std 1. Daily Check (Review procedures/policy and evidence of completion, including documented fault reporting)</p>	
<p>Std 2. Fault Recording and Reporting (Review procedures/policy, evidence of completion for both trailing and hauling equipment, and reporting mechanism)</p>	
<p>Std 3. Fault Repair (Review procedures/policy, evidence of assessment and prioritising, identification of responsible person, evidence of repairs conducted and maintenance of records)</p>	
<p>Std 4. Maintenance Schedules and Methods (Review procedures/policy, evidence of roadworthiness certification, when applicable, maintenance schedules, tables of tolerance, identification of responsible person, evidence that maintenance is conducted with scheduled timeframe)</p>	

MAINTENANCE MANAGEMENT	DETAILS
<p>Std 5. Records and Documentation (Review availability of the documented maintenance system, and ensure the following is maintained:</p> <ul style="list-style-type: none"> ▪ Fleet register ▪ Daily checks ▪ Fault recording and reporting ▪ Fault repairs ▪ Scheduled maintenance ▪ Authorities and responsibilities ▪ Internal review) 	
<p>Std 6. Responsibilities (Review responsibilities for the maintenance management system, including defined responsibilities for the above dot points, and identification of external service providers)</p>	
<p>Std 7. Internal Review (Review procedures/policy, evidence of completion of Compliance Statements and Internal Reviews, including records of any Interception Reports, NCRs raised and CARs to eliminate recurrence)</p>	
<p>Std 8. Training and Education (Review procedures/policy, appropriateness of training, evidence of training records and identification of responsible person)</p>	
<p>Std 9. Fuel Quality (fuel tax credit only) (Review fuel storage arrangements and that supply is from a reputable supplier)</p>	

ASSESSMENT/AUDIT REPORT OBSERVATIONS AND COMMENTS

SUMMARY OF AUDIT FINDINGS

The operator named in this report presented the following documentation to demonstrate compliance with the standards:

Provide details on how the operator demonstrated compliance for each Standard, including dates and type of sample documentation. Please refer to audit matrix for details of assessment steps.

MASS MANAGEMENT	DETAILS
<p>Std 1. Responsibilities (Review authorities, responsibilities and duties for the mass management system. Ensure that each is current, clearly defined, well documented and tasks rest with the appropriate people).</p>	
<p>Std 2. Vehicle Control (Review comprehensive register of nominated vehicles (including sub-contractors) Ensure that nominated vehicles have the technical specifications and mass authorisations (if required) to use the road network).</p>	
<p>Std 3. Vehicle Use (Review procedures/policy, documented instructions that objectively demonstrate how vehicle mass is weighed/assessed prior to departure. The system incorporates provisions for ensuring axle and gross weights are not exceeded)</p>	
<p>Std 4. Records and Documentation (Review availability of the documented mass management system, and ensure the following trip records are kept and maintained:</p> <ul style="list-style-type: none"> • Vehicle identifier • Measured weight (mass of vehicle) • Date and time of trip) 	

MASS MANAGEMENT	DETAILS
<p>Std 5. Verification (Review procedures/policy, including method used to verify weight of vehicle and load, the frequency at which verification is performed, how the verification process allows for different types of measurement methods)</p>	
<p>Std 6. Internal Review (Review procedures/policy, evidence of completion of Compliance Statements and Internal Reviews, including records of any NCRs raised and CARs to eliminate recurrence)</p>	
<p>Std 7. Training and Education (Review procedures/policy, appropriateness of training, evidence of training records and identification of responsible person)</p>	
<p>Std 8. Maintenance of Suspension (Review procedures/policy, documented evidence of:</p> <ul style="list-style-type: none"> • Suspension fault reporting/recording mechanism • Assigning priority to suspension related faults • The person responsible for monitoring/deferring a suspension fault is identified/recorded • Upon completion of a suspension fault, closeout details including test method is recorded) 	

ASSESSMENT/AUDIT REPORT OBSERVATIONS AND COMMENTS

SUMMARY OF AUDIT FINDINGS

The operator named in this report presented the following documentation to demonstrate compliance with the standards:

Provide details on how the operator demonstrated compliance for each Standard, including dates and type of sample documentation. Please refer to audit matrix for details of assessment steps.

FATIGUE MANAGEMENT (BFM)	DETAILS
<p>Std 1. Scheduling and Rostering (Review procedures/policy, identification of responsible person, where applicable, and evidence of compliance, including trip sheets, rosters, schedules, work diary records, system for use of relief/casual drivers, driver input)</p>	
<p>Std 2. Fitness for Duty (Review procedures for driver health, medical examinations, driver self assessment of fitness, system for driver to notify operator that they are unfit for duty, two-up driver requirements if applicable)</p>	
<p>Std 3. Fatigue Knowledge and Awareness (Review procedures/policy, including identification of responsible persons, and policy statement relating to fatigue, alcohol and drugs. Review procedures/policy in relation to medical assessments, including monitoring process, and evidence of assessment, induction process for all responsible persons, evidence of fatigue training for drivers and schedulers)</p>	
<p>Std 4. Responsibilities (Review responsibilities for the fatigue management system, including defined responsibilities for managers, those involved in scheduling/rostering, training, driver's medicals, non-compliance reporting)</p>	

FATIGUE MANAGEMENT (BFM)	DETAILS
<p>Std 5. Internal Review (Review procedures/policy for reporting and recording of unsafe incidents, documented evidence, including documentation that demonstrates follow-up and remedial action) evidence of completion of Compliance Statements and Internal Reviews, including records of any Interception Reports, NCRs raised and CARs to eliminate recurrence)</p>	
<p>Std 6. Records and Documentation (Review availability of the documented fatigue system (Fatigue Management Plan), and ensure the following is maintained, where applicable:</p> <ul style="list-style-type: none"> ▪ Schedules ▪ Rosters ▪ Training and medical records ▪ Trip sheets ▪ Incident report forms ▪ Authorities and responsibilities ▪ Internal review ▪ Medical Records ▪ Non-compliance Reports ▪ Driver Work Diary Duplicate daily sheets 	

ASSESSMENT/AUDIT REPORT OBSERVATIONS AND COMMENTS

SUMMARY OF AUDIT FINDINGS

The operator named in this report presented the following documentation to demonstrate compliance with the standards:

Provide details on how the operator demonstrated compliance for each Standard, including dates and type of sample documentation. Please refer to audit matrix for details of assessment steps.

FATIGUE MANAGEMENT (AFM)	DETAILS
<p>Std 1. Scheduling and Rostering (Review procedures/policy, identification of responsible person, where applicable, and evidence of compliance, including trip sheets, rosters, schedules, work diary records, system for use of relief/casual drivers, driver input)</p>	
<p>Std 2. Readiness for Duty (Review procedures/policy, identification of persons responsible for developing and implementing drug and alcohol awareness and screening, process of driver self assessment, system for driver to notify they are unfit for duty)</p>	
<p>Std 3. Fatigue Knowledge and Awareness (Review procedures/policy, including identification of responsible persons, and policy statement relating to fatigue, alcohol and drugs, medical assessments including monitoring process and evidence of assessment, induction process for all responsible persons, evidence of fatigue training for drivers and schedulers)</p>	
<p>Std 4. Responsibilities (Review responsibilities for the fatigue management system, including defined responsibilities for managers, those involved in scheduling/rostering, training, driver's medicals, non-compliance reporting)</p>	

FATIGUE MANAGEMENT (AFM)	DETAILS
<p>Std 5. Internal Review (Review procedures/policy for reporting and recording of unsafe incidents, documented evidence, including documentation that demonstrates follow-up and remedial action, evidence of completion of Compliance Statements and Internal Reviews, including records of any Interception Reports, NCRs raised and CARs to eliminate recurrence)</p>	
<p>Std 6. Records and Documentation (Review availability of the documented fatigue system (Fatigue Management Plan), and ensure the following is maintained, where applicable:</p> <ul style="list-style-type: none"> • Schedules • Rosters • Training and medical records • Trip sheets • Incident report forms • Authorities and responsibilities • Internal review • Medical Records • Non-compliance Reports • Driver Work Diary Duplicate daily sheets 	
<p>Std 7. Health (Review procedures/policy for driver health requirements, review driver list, conduct random checks of medical assessment and history, assess information on health provided to drivers, medical advice documented)</p>	
<p>Std 8. Workplace Conditions (Review procedures/policy on company commitment to vehicle comfort, depot rest areas, rest areas provided in transit)</p>	
<p>Std 9. Management Practices (Review procedures/policy for freight task compatibility for drivers, counselling and disciplinary actions, personal performance management assessment Communication systems)</p>	
<p>Std 10. Operating Limits. (Review procedures/policy for establishing operating limits, regular evaluation of operating limits, flexibility to alter trip schedules, regular review of driver work diaries /trip schedules, counter measures and reporting procedure of operating over normal limits)</p>	

ASSESSMENT/AUDIT REPORT OBSERVATIONS AND COMMENTS

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Provide details on how the operator demonstrated compliance for each Standard, including dates and type of sample documentation. Please refer to audit matrix for details of assessment steps.

FATIGUE MANAGEMENT (WA HVA ONLY)	DETAILS
<p>Std 1. Scheduling (Review procedures/policy, identification of responsible person, where applicable, and evidence of compliance)</p>	
<p>Std 2. Rostering (Review procedures/policy, identification of responsible person, where applicable, and evidence of compliance, including trip sheets)</p>	
<p>Std 3. Fitness for Work (Review procedures/policy, including identification of responsible persons, and policy statement relating to fatigue, alcohol and drugs. Review procedures/policy in relation to medical assessments, including monitoring process, and evidence of assessment)</p>	
<p>Std 4. Training and Education (Review procedures/policy for all employees, including regular review of training requirements and identification of responsible person. Review training records and induction process, including evidence of training assessment)</p>	
<p>Std 5. Management of Accidents and Incidents (Review procedures/policy for reporting and recording of unsafe incidents, documented evidence, including documentation that demonstrates follow-up and remedial action)</p>	

FATIGUE MANAGEMENT (WA HVA ONLY)	DETAILS
<p>Std 6. Workplace Conditions (Review procedures/policy in relation to sleeper berths, depot facilities, and ventilation)</p>	
<p>Std 7. Documentation and Records (Review availability of the documented fatigue system (Fatigue Management Plan), and ensure the following is maintained, where applicable:</p> <ul style="list-style-type: none"> ▪ Schedules ▪ Rosters ▪ Training and medical records ▪ Trip sheets ▪ Incident report forms ▪ Authorities and responsibilities ▪ Internal review) 	
<p>Std 8. Responsibilities (Review responsibilities for the fatigue management system, including defined responsibilities for managers, those involved in scheduling/rostering, training and drivers)</p>	
<p>Std 9. Internal Review (Review procedures/policy, evidence of completion of Compliance Statements and Internal Reviews, including records of any Interception Reports, NCRs raised and CARs to eliminate recurrence)</p>	

ASSESSMENT/AUDIT REPORT OBSERVATIONS AND COMMENTS

SUMMARY OF AUDIT FINDINGS

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Provide details on how the operator demonstrated compliance for each Standard, including dates and type of sample documentation. Please refer to audit matrix for details of assessment steps.

MANAGEMENT (TRUCKSAFE)	DETAILS
1. A management manual shall be constructed which reflects organisational structure, responsibilities and functional relationships of the operator and any service providers.	
2. All documents used in the operators management system shall be controlled through approval, issue date and/or version number.	
3. Records of the current version status of all documents shall be maintained.	
4. All key positions associated with the organisation shall be identified and their responsibilities documented (internal or external positions, such as a service provider).	
5. Interrelationships between positions are clearly defined and documented.	
6. The operator must demonstrate that systems exist for identifying planning and conducting Quarterly Compliance and Annual Reviews.	

MANAGEMENT (TRUCKSAFE)	DETAILS
<p>7. An annual review of the entire system and the practices within the business must be conducted and available including:</p> <ul style="list-style-type: none"> • Daily checks • Reporting of faults detected during daily checks • Fault reporting, Assessment, Deferral, Monitoring and Repair of faults • Review of maintenance schedules • Roadworthiness compliance inspection and certificates • Control of system documents • Maintenance of records • Internal reviews (1/4 compliance statement) • Non-compliances and closeouts • Training and education • Driving hours • Registration papers • Current driver and operator licences 	
<p>8. Annual reviews are conducted by a person independent of the area being reviewed, where practical.</p>	
<p>9. A system is in place to capture and record corrective and preventive actions should the review detect any non-compliance.</p>	
<p>10. The Quarterly Compliance Statement is to be completed at least every 3 months and shall contain the following information:</p> <ul style="list-style-type: none"> • Total number of daily checks missed • Total number of services missed • Total number of fault repairs not closed out • Total number of non-compliant driving hours 	
<p>11. Any changes to the Operator's established system as a consequence of an internal review are formally identified.</p>	

ASSESSMENT/AUDIT REPORT OBSERVATIONS AND COMMENTS

SUMMARY OF AUDIT FINDINGS

The operator named in this report presented the following documentation to demonstrate compliance with the standards:

Provide details on how the operator demonstrated compliance for each Standard, including dates and type of sample documentation. Please refer to audit matrix for details of assessment steps.

TRAINING (TRUCKSAFE)	DETAILS
1. That policy or procedures identify the requirement (where applicable) for all new employees to receive induction training within an appropriate time.	
2. The induction training record must include training in the occupational health and safety risks as displayed in the Policy/Workplace assessment.	
3. That induction training provided to new employees is recorded.	
4. That a Training Needs Analysis (TNA) is performed to identify the individual training needs of each driver. Once identified the results shall be documented, and retained for audit purposes.	
5. Policy or procedure identifies the requirement to either: 1). Implementation of a competency based training program selected from modules within the Transport and Distribution Training Package (TDT) relating to safety. OR 2). The implementation of a self-assessed training program based on a Training Needs Analysis (TNA) of a business' specific needs.	
6. That training and education records are kept for each employee. Detailing as a minimum, who, what training, when, trainer/organisation/process.	

TRAINING (TRUCKSAFE)	DETAILS
<p>7. That training records indicate that training has been conducted on at least the following specific issues of TruckSafe:</p> <ul style="list-style-type: none"> • Induction • Daily check • Fault reporting, repair • Scheduled services • OH&S • Fatigue and Driving Hours • Load restraint 	
<p>8. That training is provided by suitably qualified training professionals, suitably experienced persons, or appropriate processes e.g. Workshops, seminars or self-administered training.</p>	
<p>9. All drivers hold a current licence and authorisations to operate assigned vehicles and perform respective freight tasks.</p>	
<p>10. The driver/s are trained / competent in road use requirements including how and when to document all work, rest and driving hours as well as knowledge of load restraint procedures relevant to the freight task.</p>	

ASSESSMENT/AUDIT REPORT OBSERVATIONS AND COMMENTS

SUMMARY OF AUDIT FINDINGS

The operator named in this report presented the following documentation to demonstrate compliance with the standards:

Provide details on how the operator demonstrated compliance for each Standard, including dates and type of sample documentation. Please refer to audit matrix for details of assessment steps.

WORKPLACE DRIVER HEALTH AND SAFETY (TRUCKSAFE)	DETAILS
1. The operator must have an occupational health and safety policy that confirms to relevant State OH&S requirements or codes of practice.	
2. The Driver Health and OH&S policy must be on display in the workplace and known to all staff (if any).	
3. That a documented system exists for the provision of driver health and Occupational Health and Safety training.	
4. A hazard identification, risk assessment and risk control review must be conducted and be made available prior to entry to TruckSafe and reviewed annually. The operator must ensure the review focuses on at least the following: <ol style="list-style-type: none"> 1. management OH&S responsibility; 2. risks & how they will be managed; 3. ensure hazardous procedures are documented; and 4. ensure induction and ongoing training has been conducted. 	
5. The operator is to maintain a register of incidents and injuries.	
6. Records indicate that accidents are fully investigated and Corrective Actions implemented to remove likelihood of recurrence.	

WORKPLACE DRIVER HEALTH AND SAFETY (TRUCKSAFE)	DETAILS
7. That a formal relationship with a medical practitioner be established.	
8. The medical practitioner has been briefed on the requirements of the driver health program.	
9. Evidence that the medical practitioner has accepted and is performing to the requirements of the health program.	
10. The operator must demonstrate a system of control to ensure that he/she undertakes the MECVD at required intervals. The operator's system must also provide for sleep disorder assessment as prescribed by the TruckSafe Standards.	
11. The operator shall maintain records of all medical assessments including: <ul style="list-style-type: none"> • Date; • Result; • Medical Practitioner; and • Employment restrictions or rehabilitation requirements. 	
12. Procedures must be documented describing the control and delivery of rehabilitation in the workplace.	
13. Responsibilities for those persons involved in the rehabilitation process are clearly documented.	
14. Where rehabilitation is undertaken records are kept detailing how the rehabilitation was undertaken and final outcomes.	
15. The Operator has a demonstrated commitment to, and has undertaken training for the management of driving hours and fatigue.	
16. The operator shall maintain records of driving hours, review them quarterly and retain them for at least 12 months. The operator's review must cover a minimum of 10% of retained records in a quarterly period.	

AUDITOR DECLARATION

PRINT NAME	ABN NUMBER

as an Accredited Auditor currently registered with RABQSA to conduct audits for NHVAS, WA HVA and TruckSafe, hereby certify that

(print operator name)

_____ (please state "does" or "does not") meet all requirements of accreditation for the modules and vehicles described in this report as assessed against the standards for each module.

Audit was conducted on	__ __ / __ __ / __ __
CARs closed out on:	__ __ / __ __ / __ __
CARs to be closed out by:	__ __ / __ __ / __ __

I further certify that in the conduct of this audit, I have not breached the RABQSA Code of Practice.

AUDITOR SIGNATURE _____ **DATE** _____

The operator listed in this application must comply with all the requirements of the Business Rules and standards for the modules requested in this application according to the applicable Scheme.

OPERATOR DECLARATION and CONSENT

I hereby acknowledge that all details in this declaration are true and correct and I have read and understand the conditions applicable to the relevant Scheme, including the Scheme Business Rules and the Scheme Standards.

I hereby consent to information relating to my Accreditation membership to be shared with other participating National Heavy Vehicle Accreditation Scheme jurisdictions, WA Heavy Vehicle Accreditation and TruckSafe in order to facilitate collaboration with other Scheme owners for the effective management of accreditation nationally.

OPERATOR SIGNATURE _____ **DATE** _____

NAME _____ **POSITION** _____

CORRECTIVE ACTION REQUEST

OPERATOR NAME			
TYPE OF NON CONFORMANCE			
Major non-conformance requires correction by agreed date			
Minor non-conformance requires correction by agreed date			
Reference			
Corrective Action Request Number			
NON CONFORMANCE AND ACTION TAKEN			
Observed Non Conformance:			
Corrective Action Taken:			
Signed Operator Representative		Position	
		Date	___ / ___ / ___
ACTION TO PREVENT RECURRENCE (IF APPROPRIATE)			
Action Taken / Planned:			
Signed Operator Representative		Position	
		Date	___ / ___ / ___
CORRECTIVE ACTION FOLLOW UP BY AUDITOR			
Acceptance Recommended by:			
Signed Auditor		Date	___ / ___ / ___

VEHICLE REGISTRATION NUMBERS OF RECORDS EXAMINED

MAINTENANCE MANAGEMENT

OPERATOR NAME (Business Name)

Registration Number	Roadworthiness Certificates (Where applicable)	Maintenance Records	Daily Checks Yes/No	Fault Recording/Reporting	Fault Repair	Internal Review (date)

