



# Corrective Action Report

Document Number:
Revision:
Issue Date:
Report Type: <span style="float: right;">Response to Customer</span>

CAR Number:	Issue Date:	Due Date:	Issued By:	Department Assigned To:
Customer Project #:	Customer:	Part Name:	Part Number:	

**Nonconformance Description:**

**Interim Corrective Action:**

Planned completion Date:

**Root Cause:**

**Permanent Corrective Action:**

Submission Date:	Planned Completion Date:	Control Plan Update:	
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**Approval:**

Smartrend Authorization: \_\_\_\_\_ (signature) \_\_\_\_\_ (date)

Customer Approval: \_\_\_\_\_ (print name) \_\_\_\_\_ (signature) \_\_\_\_\_ (date)