



OPERATIONAL  
DOCUMENT

CIG 023423  
Appendix 1

Factory Inspection Report  
Appendix 1  
Signature Page (Part 1)  
Inspection Summary Page (Part 2)

WARNING:

~~THIS DOCUMENT IS ONLY VALID IF USED BY ETICS MEMBERS  
AND THEIR AUTHORISED AGENTS~~ **Important Notice:**

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Approved by:	MCCB meeting 10 April 2019	No. of pages: 65
Date of issue:	April 2019	
Supersedes:	PDOD CIG 023 Appendix 1 - September 2014 April 2019	Page 1 of 6

Reference number of the body carrying out the inspection:

**NOTE:**

Signature Page (Part 1) and Inspection Summary Page (Part 2) might be used individually (part 1 or part 2), combined (part 1 and part 2) or combined with OD CIG 023423.

Front Pages only for document control and shall be excluded from numbering and actual Signature Page and/or Inspection Summary Page

**This document contains:**

- Appendix 1 -to OD CIG 023423 Factory Inspection Report- - Signature Page (Part 1)
- Appendix 1 -to OD CIG 023423 Factory Inspection Report -- Inspection Summary Page (Part 2)

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Reference number of the body carrying out the Inspection:

### OD CIG 023423 - Appendix 1 Signature Page (Part 1)

<b>17 Inspector's Evaluation</b>			
<i>Note: This clause reflects the result of the Inspection from the view of the inspector. The final decision will be taken by the accepting/receiving Certification Body.</i>			
<b>17.1</b> List your findings/observations on the Inspectors Finding/Observation Sheet (part 1) by referencing the applicable clauses in this report (including comments, recommendations, etc.) and explain them to the Factory. <i>If possible, also indicate also the corrective actions the Factory intends to take.</i>			
Number of Findings Finding Sheets issued: _____ Number of Observations Observation			
<b>17.2</b> Give your recommendations by ticking the appropriate box.			
1	No unsatisfactory findings	<b>Grant or continue certification.</b>	<input type="checkbox"/>
2	Minor unsatisfactory finding(s)	<b>Factory corrective action(s) will be checked at next visit. Grant or continue certification.</b>	<input type="checkbox"/>
3	Major unsatisfactory finding(s) Safety not directly affected	<b>Factory shall confirm corrective action(s). Grant or continue certification.</b> Special or early routine inspection recommended for checking corrective action(s).	<input type="checkbox"/>
4	Critical unsatisfactory finding(s) <b>Safety directly affected</b>	<b>Certification refused/suspended and repeated factory inspection recommended after the Factory has confirmed implementation of corrective action(s).</b>	<input type="checkbox"/>
<b>17.3</b> Attachments: <i>For page control, write the reference number in the header of each attachment page.</i>			
<input type="checkbox"/> Finding/Observation Sheets Revised OD CIG 422 B1 No. of pages: _____			
<input type="checkbox"/> Revised OD CIG 022-B1/422 B2 No. of pages: _____			
<input type="checkbox"/> Revised OD CIG 022-B2 No. of pages: _____			
<input type="checkbox"/> Signature Page (Part 1) No. of pages: _____			
<input type="checkbox"/> OD CIG 023423 Appendix 1 – Signature page Inspection Summary Page (Part 42) No. of pages: _____			
<input type="checkbox"/> OD CIG 023423 Appendix 1 – Inspection Summary Page (Part 2) – QMS Appendix No. of pages: _____			
<input type="checkbox"/> OD CIG 023 Appendix 2 – ENEC Appendix No. of pages: _____			
<input type="checkbox"/> OD CIG 023423 Appendix 3 – ENEC+ Appendix No. of pages: _____			
<input type="checkbox"/> Copy of Quality Management Certificate No. of pages: _____			
<input type="checkbox"/> Others No. of pages: _____			
Total no. of pages of this report including all attachment pages: _____			
<i>(Front pages to be excluded from page numbering!)</i>			



Reference number of the body carrying out the Inspection:

*A copy of this report shall be provided to the undersigned contact person who should be aware of the contents and sign for its receipt.*

Printed copy provided

Electronic copy provided

Content of this report including findings as documented on Inspectors Finding/Observation Sheet (part 1) (if any) have been explained by the Inspector to the Factory contact person.

The responsibility for ensuring that a product is produced in accordance with the standard to which it was originally approved rests with the Licence Holder.

Inspection reports shall be kept at least for the period between two inspection visits!

For confidentiality reasons the contact person requests the preparation of individual copies of this report for each Licence Holder.

YES  NO  N/A

Inspection ~~duration~~ On-site time:          hours

**Additional comments:**

**This report has been issued by:**

CIG-Member Body or on behalf of a CIG-Member Body

NON-CIG Member Body

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Inspector's name (printed letters): \_\_\_\_\_

Contact person's name (printed letters): \_\_\_\_\_

Signature:

Signature:



Reference number of the body carrying out the inspection:

### OD CIG 023423 - Appendix 1 Inspection Summary Page (Part 2)

Factory Number:	
Factory registered name:	
Licence Holder number:)*	
Licence Holder:	
Inspection carried out by (Name of Inspection Body):	

\*)\*: Optional information. Confidentiality shall be ensured!

1.4  Pre-Licence       Routine       ENEC       ENEC+  
 HAR       EMC       Others:

#### 1.6 Inspection Details:

Certification Body requesting inspection	Inspection X of Y	Certification Body's Reference No.	Product Category	Kind of Product

16. If selection of samples ~~for re-examination~~ is required, have the required samples been selected?      YE N/A NO  
1      S

**Note:**  
*The selection of samples for Product Surveillance is an essential aspect to maintain the validity of the Product License. Not providing samples might result in suspension or withdrawal of the Product License!*

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- Deleted Cells



Reference number of the body carrying out the Inspection:

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YES  NO  N/A

Inspection ~~duration~~ On-site time: \_\_\_\_\_ hours

**Additional comments:**

This report has been issued by:  
 CIG-Member Body or on behalf of a CIG-Member Body  
 NON-CIG Member Body

Date: _____	Date: _____
Inspector's name (printed letters): _____	Contact person's name (printed letters): _____
Signature: _____	Signature: _____

For signatures see attached Signature Page



Reference number of the body carrying out the Inspection:

For signatures see original OD CIG 023423 Report