

NOTIFICATION OF NON-CONFORMANCE

To be filled out by the auditor and signed at the exit interview at the end of the on-site audit. The following nonconformances were found during the American Humane Certified™ audit on:

Within 10 business days of audit entry, you must submit a Corrective Action Plan that includes the corrective action to be taken, the person responsible for the correction, and the date the correction will be completed. After correction, a Corrective Action Proof of Completion with supporting documentation must be submitted to the American Humane Certified™ program. Documentation may include pictures, copies of daily reports, training records, veterinary health plan adjustments, etc. Producers/ managers are encouraged to submit progress reports as corrective actions are taken.

AUDIT SUMMARY	
PRODUCER	AUDIT LOCATION
NON-CONFORMANCES	
COMMENTS	
COMMENTS	
OUT OF SCOPE OBSERVATIONS	
Notes should include each non-conformance item (for example: FW3, H12 as needed. Information in the completed Animal Welfare Audit Tool and Na has been verified by the auditor. One copy should be left with the produ	otification of Non-Conformance Report is complete, correct, and
AUDITOR SIGNATURE	DATE
I, the undersigned, agree to submit a Corrective Action Plan a Corrective Action Proof of Completion and agree to addit	
PRODUCER SIGNATURE	DATE