

SCS FOREST MANAGEMENT CERTIFICATION SERVICES CORRECTIVE ACTION REQUEST (CAR) / OBSERVATION (OBS) FORM

V1-0

Certificate holder/applicant	Baxter State Park Scientific Forest Management Area
CAR/OBS identified by (SCS representative)	Mike Dann and Dave Capen
Date of Issuance	July 14, 2011
Audit Year/Type (select from pull down menu)	Certification Evaluation

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Copy and complete table for each non-conformity / opportunity for improvement detected

TO BE COMPLETED BY SCS REPRESENTATIVE	CAR/OBS Number (e.g. 1, 2, ...)		CAR 2011.1
	Select one: <input type="checkbox"/> Major CAR <input checked="" type="checkbox"/> Minor CAR <input type="checkbox"/> Observation		
	FMU CAR/OBS issued to (when more than one FMU)		
	Deadline for Corrective Action by FME		
	<input type="checkbox"/> 3 months from above Date of Issuance <input checked="" type="checkbox"/> Next audit (surveillance or re-evaluation) <input type="checkbox"/> Pre-condition to certification <input type="checkbox"/> Other deadline (specify):		
Standard and Requirement Reference		FSC-US Forest Management Standard Indicator 1.1.b	
NON-CONFORMITY (or Background/ Justification in the case of Observations) (Describe and provide objective evidence) Interviews with SFMA staff indicated a lack of knowledge of all applicable laws and regulations.			
REQUESTED CORRECTIVE ACTION (or Observation) SFMA shall ensure that employees and contractors are duly informed about all applicable laws and regulations.			

TO BE COMPLETED BY FME	IMPLEMENTED CORRECTIVE ACTION <i>(Response to Observations is optional)</i> Describe action taken by the FME to address the root cause of the non-conformity	
	EVIDENCE OF CONFORMANCE SUBMITTED WITH THIS FORM <i>(please list)</i>	
	FME Representative Name and Title	Date
TO BE COMPLETED BY SCS REPRESENTATIVE	SCS REVIEW / ACCEPTANCE OF CORRECTIVE ACTION <i>(Describe conclusion in detail)</i>	
	CLOSED UPGRADED TO MAJOR OTHER DECISION (refer to description above)	
	SCS Representative Name and Title (CAR/OBS reviewer)	Date of Acceptance of Corrective Action
Press Enter twice below table to leave a space, then copy and paste table below for each CAR/OBS		

TO BE COMPLETED BY SCS REPRESENTATIVE	CAR/OBS Number (e.g. 1, 2, ...)		CAR 2011.2
	Select one: <input type="checkbox"/> Major CAR <input checked="" type="checkbox"/> Minor CAR <input type="checkbox"/> Observation		
	Site CAR/OBS issued to (where more than one site)		
	Deadline for Corrective Action by FME		
	<input type="checkbox"/> 3 months from above Date of Issuance <input checked="" type="checkbox"/> Next audit (surveillance or re-evaluation) <input type="checkbox"/> Pre-condition to certification <input type="checkbox"/> Other deadline (specify):		
Standard and Requirement Reference		FSC-US Forest Management Standard Indicator 1.3.a	
NON-CONFORMITY (or Background/ Justification in the case of Observations) (Describe and provide objective evidence)			
SFMA staff did not demonstrate a knowledge of all applicable binding international agreements			
REQUESTED CORRECTIVE ACTION (or Observation)			
SFMA shall identify, and assess their compliance with, all binding international agreements.			

TO BE COMPLETED BY FME	IMPLEMENTED CORRECTIVE ACTION <i>(Response to Observations is optional)</i> Describe action taken by the FME to address the root cause of the non-conformity	
	EVIDENCE OF CONFORMANCE SUBMITTED WITH THIS FORM <i>(please list)</i>	
	FME Representative Name and Title	Date
TO BE COMPLETED BY SCS REPRESENTATIVE	SCS REVIEW / ACCEPTANCE OF CORRECTIVE ACTION <i>(Describe conclusion in detail)</i>	
	<input type="checkbox"/> CLOSED <input type="checkbox"/> UPGRADED TO MAJOR <input type="checkbox"/> OTHER DECISION <i>(refer to description above)</i>	
	SCS Representative Name and Title (CAR/OBS reviewer)	Date of Acceptance of Corrective Action
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TO BE COMPLETED BY SCS REPRESENTATIVE	CAR/OBS Number (e.g. 1, 2, ...)		OBS 2011.1
	Select one: <input type="checkbox"/> Major CAR <input type="checkbox"/> Minor CAR <input checked="" type="checkbox"/> Observation		
	Site CAR/OBS issued to (where more than one site)		
	Deadline for Corrective Action by FME		
	<input type="checkbox"/> 3 months from above Date of Issuance <input checked="" type="checkbox"/> Next audit (surveillance or re-evaluation) <input type="checkbox"/> Pre-condition to certification <input type="checkbox"/> Other deadline (specify):		
	Standard and Requirement Reference		FSC-US Forest Management Standard (v1.0) 1.6.a
NON-CONFORMITY (or Background/ Justification in the case of Observations) (Describe and provide objective evidence)			
<p>The SFMA's web site states that they participate in FSC certification but does not state that they are committed to managing their forests according to the FSC standards and policies.</p>			
REQUESTED CORRECTIVE ACTION (or Observation)			
<p>The publicly available statement of participation in FSC certification should include a statement of commitment to manage to the FSC Standards and policies.</p>			

TO BE COMPLETED BY FME	IMPLEMENTED CORRECTIVE ACTION <i>(Response to Observations is optional)</i> Describe action taken by the FME to address the root cause of the non-conformity	
	EVIDENCE OF CONFORMANCE SUBMITTED WITH THIS FORM <i>(please list)</i>	
	FME Representative Name and Title	Date
TO BE COMPLETED BY SCS REPRESENTATIVE	SCS REVIEW / ACCEPTANCE OF CORRECTIVE ACTION <i>(Describe conclusion in detail)</i>	
	<input type="checkbox"/> CLOSED <input type="checkbox"/> UPGRADED TO MAJOR <input type="checkbox"/> OTHER DECISION <i>(refer to description above)</i>	
	SCS Representative Name and Title (CAR/OBS reviewer)	Date of Acceptance of Corrective Action
<i>Press Enter twice below table to leave a space, then copy and paste table below for each CAR/OBS</i>		

TO BE COMPLETED BY SCS REPRESENTATIVE	CAR/OBS Number (e.g. 1, 2, ...)		CAR 2011.3
	Select one: <input type="checkbox"/> Major CAR <input checked="" type="checkbox"/> Minor CAR <input type="checkbox"/> Observation		
	Site CAR/OBS issued to (where more than one site)		
	Deadline for Corrective Action by FME		
	<input type="checkbox"/> 3 months from above Date of Issuance <input checked="" type="checkbox"/> Next audit (surveillance or re-evaluation) <input type="checkbox"/> Pre-condition to certification <input type="checkbox"/> Other deadline (specify):		
Standard and Requirement Reference		FSC-US Forest Management Standard Indicator 4.2.b	
NON-CONFORMITY (or Background/ Justification in the case of Observations) (Describe and provide objective evidence)			
The harvest and trucking contract with the sole contractor on the SFMA did not contain safety requirements			
REQUESTED CORRECTIVE ACTION (or Observation)			
SFMA shall include safety requirements in all contracts and written agreements with service providers.			

TO BE COMPLETED BY FME	IMPLEMENTED CORRECTIVE ACTION <i>(Response to Observations is optional)</i> Describe action taken by the FME to address the root cause of the non-conformity	
	EVIDENCE OF CONFORMANCE SUBMITTED WITH THIS FORM <i>(please list)</i>	
	FME Representative Name and Title	Date
TO BE COMPLETED BY SCS REPRESENTATIVE	SCS REVIEW / ACCEPTANCE OF CORRECTIVE ACTION <i>(Describe conclusion in detail)</i>	
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TO BE COMPLETED BY SCS REPRESENTATIVE	CAR/OBS Number (e.g. 1, 2, ...)		OBS 2011.2
	Select one: <input type="checkbox"/> Major CAR <input type="checkbox"/> Minor CAR <input checked="" type="checkbox"/> Observation		
	Site CAR/OBS issued to (where more than one site)		
	Deadline for Corrective Action by FME		
	<input type="checkbox"/> 3 months from above Date of Issuance <input checked="" type="checkbox"/> Next audit (surveillance or re-evaluation) <input type="checkbox"/> Pre-condition to certification <input type="checkbox"/> Other deadline (specify):		
Standard and Requirement Reference		FSC-US Forest Management Standard Indicator 5.5.a	
NON-CONFORMITY (or Background/ Justification in the case of Observations) (Describe and provide objective evidence) SFMA management plan does not contain explicit mention of consideration of carbon storage and sequestration.			
REQUESTED CORRECTIVE ACTION (or Observation) The topic of carbon storage and sequestration could be more explicitly addressed and incorporated in the SFMA Management Plan.			

TO BE COMPLETED BY FME	IMPLEMENTED CORRECTIVE ACTION <i>(Response to Observations is optional)</i> Describe action taken by the FME to address the root cause of the non-conformity	
	EVIDENCE OF CONFORMANCE SUBMITTED WITH THIS FORM <i>(please list)</i>	
	FME Representative Name and Title	Date
TO BE COMPLETED BY SCS REPRESENTATIVE	SCS REVIEW / ACCEPTANCE OF CORRECTIVE ACTION <i>(Describe conclusion in detail)</i>	
	<input type="checkbox"/> CLOSED <input type="checkbox"/> UPGRADED TO MAJOR <input type="checkbox"/> OTHER DECISION <i>(refer to description above)</i>	
	SCS Representative Name and Title (CAR/OBS reviewer)	Date of Acceptance of Corrective Action
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TO BE COMPLETED BY SCS REPRESENTATIVE	CAR/OBS Number (e.g. 1, 2, ...)		OBS 2011.3	
	Select one: <input type="checkbox"/> Major A <input type="checkbox"/> Minor CAR <input checked="" type="checkbox"/> Observation			
	Site CAR/OBS issued to (where more than one site)			
	Deadline for Corrective Action by FME			
	<input type="checkbox"/> 3 months from above Date of Issuance <input checked="" type="checkbox"/> Next audit (surveillancer re-evaluaion) <input type="checkbox"/> Pre-condition to certification <input type="checkbox"/> Other deadline (specify):			
Standard and Requirement Reference		FSC-US Forest Management Standard (v1.0) 5.6.a.		
NON-CONFORMITY (or Background/ Justification in the case of Observations) (Describe and provide objective evidence)				
The current sustained yield harvest calculation models multiple cutting cycles within a 140 year rotation. On-going inventory data confirm the assumptions made in the calculation. The long rotation length meets the intent of the indicator. There is no discussion of planned treatments or regrowth beyond that single rotation.				
REQUESTED CORRECTIVE ACTION (or Observation)				
A discussion of planned treatments and regrowth beyond the 140 year rotation would improve conformance.				

TO BE COMPLETED BY FME	IMPLEMENTED CORRECTIVE ACTION <i>(Response to Observations is optional)</i> Describe action taken by the FME to address the root cause of the non-conformity	
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	FME Representative Name and Title	Date
TO BE COMPLETED BY SCS REPRESENTATIVE	SCS REVIEW / ACCEPTANCE OF CORRECTIVE ACTION <i>(Describe conclusion in detail)</i>	
	<input type="checkbox"/> CLOSED <input type="checkbox"/> UPGRADED TO MAJOR <input type="checkbox"/> OTHER DECISION <i>(refer to description above)</i>	
	SCS Representative Name and Title (CAR/OBS reviewer)	Date of Acceptance of Corrective Action
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TO BE COMPLETED BY SCS REPRESENTATIVE	CAR/OBS Number (e.g. 1, 2, ...)		CAR 2011.4
	Select one: <input type="checkbox"/> Major CAR <input checked="" type="checkbox"/> Minor CAR <input type="checkbox"/> Observation		
	Site CAR/OBS issued to (where more than one site)		
	Deadline for Corrective Action by FME		
	<input type="checkbox"/> 3 months from above Date of Issuance <input checked="" type="checkbox"/> Next audit (surveillance or re-evaluation) <input type="checkbox"/> Pre-condition to certification <input type="checkbox"/> Other deadline (specify):		
Standard and Requirement Reference		FSC-US Forest Management Standard Indicator 6.2.c.	
NON-CONFORMITY (or Background/ Justification in the case of Observations) (Describe and provide objective evidence) SFMA Management Plan does not address species recovery goals for Canada Lynx, a threatened species with defined critical habitat that includes the SFMA.			
REQUESTED CORRECTIVE ACTION (or Observation) The SFMA plan must be revised to address the recovery goals for the Canada Lynx, a threatened species with defined critical habitat that includes Baxter State Park.			

TO BE COMPLETED BY FME	IMPLEMENTED CORRECTIVE ACTION <i>(Response to Observations is optional)</i> Describe action taken by the FME to address the root cause of the non-conformity	
	EVIDENCE OF CONFORMANCE SUBMITTED WITH THIS FORM <i>(please list)</i>	
	FME Representative Name and Title	Date
TO BE COMPLETED BY SCS REPRESENTATIVE	SCS REVIEW / ACCEPTANCE OF CORRECTIVE ACTION <i>(Describe conclusion in detail)</i>	
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TO BE COMPLETED BY SCS REPRESENTATIVE	CAR/OBS Number (e.g. 1, 2, ...)		OBS 2011.4
	Select one: <input type="checkbox"/> Major CAR <input type="checkbox"/> Minor CAR <input checked="" type="checkbox"/> Observation		
	Site CAR/OBS issued to (where more than one site)		
	Deadline for Corrective Action by FME		
	<input type="checkbox"/> 3 months from above Date of issuance <input checked="" type="checkbox"/> Next audit (surveillance or re-evaluation) <input type="checkbox"/> Pre-condition to certification <input type="checkbox"/> Other deadline (specify):		
Standard and Requirement Reference		FSC-US Forest Management Standard (v1.0) 6.3.f.	
NON-CONFORMITY (or Background/ Justification in the case of Observations) (Describe and provide objective evidence) Field inspections of recent harvest sites indicate that stand-level retention is generally adequate, and that habitat components are provided, but they are not consistently prescribed before harvests.			
REQUESTED CORRECTIVE ACTION (or Observation) Written standards for stand-level retention and habitat components would lead to more consistency among harvest prescriptions.			

TO BE COMPLETED BY FME	IMPLEMENTED CORRECTIVE ACTION <i>(Response to Observations is optional)</i> Describe action taken by the FME to address the root cause of the non-conformity	
	EVIDENCE OF CONFORMANCE SUBMITTED WITH THIS FORM <i>(please list)</i>	
	FME Representative Name and Title	Date
TO BE COMPLETED BY SCS REPRESENTATIVE	SCS REVIEW / ACCEPTANCE OF CORRECTIVE ACTION <i>(Describe conclusion in detail)</i>	
	<input type="checkbox"/> CLOSED <input type="checkbox"/> UPGRADED TO MAJOR <input type="checkbox"/> OTHER DECISION <i>(refer to description above)</i>	
	SCS Representative Name and Title (CAR/OBS reviewer)	Date of Acceptance of Corrective Action
Press Enter twice below table to leave a space, then copy and paste table below for each CAR/OBS		

TO BE COMPLETED BY SCS REPRESENTATIVE	CAR/OBS Number (e.g. 1, 2, ...)		CAR 2011.5
	Select one: <input type="checkbox"/> Major CAR <input checked="" type="checkbox"/> Minor CAR <input type="checkbox"/> Observation		
	Site CAR/OBS issued to (where more than one site)		
	Deadline for Corrective Action by FME		
	<input type="checkbox"/> 3 months from above Date of Issuance <input checked="" type="checkbox"/> Next audit (surveillance or re-evaluation) <input type="checkbox"/> Pre-condition to certification <input type="checkbox"/> Other deadline (specify):		
Standard and Requirement Reference		FSC-US Forest Management Standard (v1.0) 6.3.h.	
NON-CONFORMITY (or Background/ Justification in the case of Observations) <i>(Describe and provide objective evidence)</i> Field observations show that SFMA staff can identify invasive plants and animals and are monitoring their presence. However, there is no strategy to prevent or control invasive species.			
REQUESTED CORRECTIVE ACTION (or Observation) SFMA shall identify appropriate strategies minimizing the risk of invasives and control of their populations.			

TO BE COMPLETED BY FME	IMPLEMENTED CORRECTIVE ACTION <i>(Response to Observations is optional)</i> Describe action taken by the FME to address the root cause of the non-conformity	
	EVIDENCE OF CONFORMANCE SUBMITTED WITH THIS FORM <i>(please list)</i>	
	FME Representative Name and Title	Date
TO BE COMPLETED BY SCS REPRESENTATIVE	SCS REVIEW / ACCEPTANCE OF CORRECTIVE ACTION <i>(Describe conclusion in detail)</i>	
	<input type="checkbox"/> CLOSED <input type="checkbox"/> UPGRADED TO MAJOR <input type="checkbox"/> OTHER DECISION <i>(refer to description above)</i>	
	SCS Representative Name and Title (CAR/OBS reviewer)	Date of Acceptance of Corrective Action
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TO BE COMPLETED BY SCS REPRESENTATIVE	CAR/OBS Number (e.g. 1, 2, ...)		OBS 2011.5
	Select one: <input type="checkbox"/> Major CAR <input type="checkbox"/> Minor CAR <input checked="" type="checkbox"/> Observation		
	Site CAR/OBS issued to (where more than one site)		
	Deadline for Corrective Action by FME		
	<input type="checkbox"/> 3 months from Date of Issuance <input checked="" type="checkbox"/> Next audit (surveillance or re-evaluation) <input type="checkbox"/> Pre-condition to certification <input type="checkbox"/> Other deadline (specify):		
Standard and Requirement Reference		FSC-US Forest Management Standard (v1.0) 6.5.f.	
NON-CONFORMITY (or Background/ Justification in the case of Observations) (Describe and provide objective evidence) Field inspections of water crossings revealed that older crossings do not facilitate movement of aquatic organisms as well as do recently constructed crossings.			
REQUESTED CORRECTIVE ACTION (or Observation) An inventory of stream crossing to assess conformance with the objective of facilitating movement of aquatic species, where appropriate, would strengthen compliance.			

TO BE COMPLETED BY FME	IMPLEMENTED CORRECTIVE ACTION <i>(Response to Observations is optional)</i> Describe action taken by the FME to address the root cause of the non-conformity	
	EVIDENCE OF CONFORMANCE SUBMITTED WITH THIS FORM <i>(please list)</i>	
	FME Representative Name and Title	Date
TO BE COMPLETED BY SCS REPRESENTATIVE	SCS REVIEW / ACCEPTANCE OF CORRECTIVE ACTION <i>(Describe conclusion in detail)</i>	
	<input type="checkbox"/> CLOSED <input type="checkbox"/> UPGRADED TO MAJOR <input type="checkbox"/> OTHER DECISION <i>(refer to description above)</i>	
	SCS Representative Name and Title (CAR/OBS reviewer)	Date of Acceptance of Corrective Action
Press Enter twice below table to leave a space, then copy and paste table below for each CAR/OBS		

TO BE COMPLETED BY SCS REPRESENTATIVE	CAR/OBS Number (e.g. 1, 2, ...)		OBS 2011.6
	Select one: <input type="checkbox"/> Major CAR <input type="checkbox"/> Minor CAR <input checked="" type="checkbox"/> Observation		
	Site CAR/OBS issued to (where more than one site)		
	Deadline for Corrective Action by FME		
	<input type="checkbox"/> 3 months from above Date of Issuance <input checked="" type="checkbox"/> Next audit (surveillance or re-evaluation) <input type="checkbox"/> Pre-condition to certification <input type="checkbox"/> Other deadline (specify):		
Standard and Requirement Reference		FSC-US Forest Management Standard (v1.0) 6.9.a.	
NON-CONFORMITY (or Background/ Justification in the case of Observations) (Describe and provide objective evidence) Field observations and interviews with staff show that, with the possible exception of grass mixtures used for erosion control, exotic species have not been used on the SFMA.			
REQUESTED CORRECTIVE ACTION (or Observation) Although exotic species are not planted in silvicultural operations, they may be present in seed mixtures used to stabilize soils. SFMA should address the source and content of such mixtures.			

TO BE COMPLETED BY FME	IMPLEMENTED CORRECTIVE ACTION <i>(Response to Observations is optional)</i> Describe action taken by the FME to address the root cause of the non-conformity	
	EVIDENCE OF CONFORMANCE SUBMITTED WITH THIS FORM <i>(please list)</i>	
	FME Representative Name and Title	Date
TO BE COMPLETED BY SCS REPRESENTATIVE	SCS REVIEW / ACCEPTANCE OF CORRECTIVE ACTION <i>(Describe conclusion in detail)</i>	
	<input type="checkbox"/> CLOSED <input type="checkbox"/> UPGRADED TO MAJOR <input type="checkbox"/> OTHER DECISION <i>(refer to description above)</i>	
	SCS Representative Name and Title (CAR/OBS reviewer)	Date of Acceptance of Corrective Action
Press Enter twice below table to leave a space, then copy and paste table below for each CAR/OBS		

TO BE COMPLETED BY SCS REPRESENTATIVE	CAR/OBS Number (e.g. 1, 2, ...)		OBS 2011.7
	Select one: <input type="checkbox"/> Major CAR <input type="checkbox"/> Minor CAR <input checked="" type="checkbox"/> Observation		
	Site CAR/OBS issued to (where more than one site)		
	Deadline for Corrective Action by FME		
	<input type="checkbox"/> 3 months from above Date of Issuance <input checked="" type="checkbox"/> Next audit (surveillance or re-evaluation) <input type="checkbox"/> Pre-condition to certification <input type="checkbox"/> Other deadline (specify):		
Standard and Requirement Reference		FSC-US Forest Management Standard (v1.0) 7.1.d.	
NON-CONFORMITY (or Background/ Justification in the case of Observations) (Describe and provide objective evidence) The current management plan has limited references to the larger landscape.			
REQUESTED CORRECTIVE ACTION (or Observation) A strengthened description of the landscape within which SFMA is located and landscape-scale habitat elements would improve the revised management plan.			

TO BE COMPLETED BY FME	IMPLEMENTED CORRECTIVE ACTION <i>(Response to Observations is optional)</i> Describe action taken by the FME to address the root cause of the non-conformity	
	EVIDENCE OF CONFORMANCE SUBMITTED WITH THIS FORM <i>(please list)</i>	
	FME Representative Name and Title	Date
TO BE COMPLETED BY SCS REPRESENTATIVE	SCS REVIEW / ACCEPTANCE OF CORRECTIVE ACTION <i>(Describe conclusion in detail)</i>	
	<input type="checkbox"/> CLOSED <input type="checkbox"/> UPGRADED TO MAJOR <input type="checkbox"/> OTHER DECISION <i>(refer to description above)</i>	
	SCS Representative Name and Title (CAR/OBS reviewer)	Date of Acceptance of Corrective Action
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TO BE COMPLETED BY SCS REPRESENTATIVE	CAR/OBS Number (e.g. 1, 2, ...)		CAR 2011.6
	Select one: <input type="checkbox"/> Major CAR <input checked="" type="checkbox"/> Minor CAR <input type="checkbox"/> Observation		
	Site CAR/OBS issued to (where more than one site)		
	Deadline for Corrective Action by FME		
	<input type="checkbox"/> 3 months from above Date of Issuance <input checked="" type="checkbox"/> Next audit (surveillance or re-evaluation) <input type="checkbox"/> Pre-condition to certification <input type="checkbox"/> Other deadline (specify):		
Standard and Requirement Reference		FSC-US Forest Management Standard (v1.0) 7.1.f.	
NON-CONFORMITY (or Background/ Justification in the case of Observations) <i>(Describe and provide objective evidence)</i>			
<p>The SFMA Management Plan does not describe invasive species conditions, applicable management objectives, and control measures.</p>			
REQUESTED CORRECTIVE ACTION (or Observation)			
<p>The SFMA Management Plan shall describe invasive species conditions, applicable management objectives, and control measures.</p>			

TO BE COMPLETED BY FME	IMPLEMENTED CORRECTIVE ACTION <i>(Response to Observations is optional)</i> Describe action taken by the FME to address the root cause of the non-conformity	
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	FME Representative Name and Title	Date
TO BE COMPLETED BY SCS REPRESENTATIVE	SCS REVIEW / ACCEPTANCE OF CORRECTIVE ACTION <i>(Describe conclusion in detail)</i>	
	<input type="checkbox"/> CLOSED <input type="checkbox"/> UPGRADED TO MAJOR <input type="checkbox"/> OTHER DECISION <i>(refer to description above)</i>	
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TO BE COMPLETED BY SCS REPRESENTATIVE	CAR/OBS Number (e.g. 1, 2, ...)		CAR 2011.7
	Select one: <input type="checkbox"/> Major AR <input checked="" type="checkbox"/> Minor CAR <input type="checkbox"/> Observation		
	Site CAR/OBS issued to (where more than one site)		
	Deadline for Corrective Action by FME		
	<input type="checkbox"/> 3 months from above Date of Issuance <input checked="" type="checkbox"/> Next audit (surveillance or re-evaluation) <input type="checkbox"/> Pre-condition to certification <input type="checkbox"/> Other deadline (specify):		
Standard and Requirement Reference		FSC-US Forest Management Standard (v1.0) 7.1.r.	
NON-CONFORMITY (or Background/ Justification in the case of Observations) <i>(Describe and provide objective evidence)</i> SFMA management plan does not describe the stakeholder consultation process.			
REQUESTED CORRECTIVE ACTION (or Observation) SFMA shall include a description of the stakeholder consultation process in the revised management plan.			

TO BE COMPLETED BY FME	IMPLEMENTED CORRECTIVE ACTION <i>(Response to Observations is optional)</i> Describe action taken by the FME to address the root cause of the non-conformity	
	EVIDENCE OF CONFORMANCE SUBMITTED WITH THIS FORM <i>(please list)</i>	
	FME Representative Name and Title	Date
TO BE COMPLETED BY SCS REPRESENTATIVE	SCS REVIEW / ACCEPTANCE OF CORRECTIVE ACTION <i>(Describe conclusion in detail)</i>	
	<input type="checkbox"/> CLOSED <input type="checkbox"/> UPGRADED TO MAJOR <input type="checkbox"/> OTHER DECISION <i>(refer to description above)</i>	
	SCS Representative Name and Title (CAR/OBS reviewer)	Date of Acceptance of Corrective Action
Press Enter twice below table to leave a space, then copy and paste table below for each CAR/OBS		

TO BE COMPLETED BY SCS REPRESENTATIVE	CAR/OBS Number (e.g. 1, 2, ...)		CAR 2011.8
	Select one: <input type="checkbox"/> Major CAR <input checked="" type="checkbox"/> Minor CAR <input type="checkbox"/> Observation		
	Site CAR/OBS issued to (where more than one site)		
	Deadline for Corrective Action by FME		
	<input checked="" type="checkbox"/> 3 months from above Date of Issuance <input type="checkbox"/> Next audit (surveillance or re-evaluation) <input type="checkbox"/> Pre-condition to certification <input type="checkbox"/> Other deadline (specify):		
Standard and Requirement Reference		FSC-US Forest Management Standard (v1.0) 7.2.a.	
NON-CONFORMITY (or Background/ Justification in the case of Observations) (Describe and provide objective evidence)			
Interviews with staff and review of documents confirm that a major revision of the management plan is well underway that will raise management of the SFMA to a higher level. However, a full revision of the management plan has not been completed within the past 10 years.			
REQUESTED CORRECTIVE ACTION (or Observation)			
SFMA shall prepare a detailed outline of the full revision of the management plan and a schedule for completion.			

TO BE COMPLETED BY FME	IMPLEMENTED CORRECTIVE ACTION <i>(Response to Observations is optional)</i> Describe action taken by the FME to address the root cause of the non-conformity	
	EVIDENCE OF CONFORMANCE SUBMITTED WITH THIS FORM <i>(please list)</i>	
	FME Representative Name and Title	Date
TO BE COMPLETED BY SCS REPRESENTATIVE	SCS REVIEW / ACCEPTANCE OF CORRECTIVE ACTION <i>(Describe conclusion in detail)</i>	
	<input type="checkbox"/> CLOSED <input type="checkbox"/> UPGRADED TO MAJOR <input type="checkbox"/> OTHER DECISION <i>(refer to description above)</i>	
	SCS Representative Name and Title (CAR/OBS reviewer)	Date of Acceptance of Corrective Action
Press Enter twice below table to leave a space, then copy and paste table below for each CAR/OBS		

TO BE COMPLETED BY SCS REPRESENTATIVE	CAR/OBS Number (e.g. 1, 2, ...)		CAR 2011.9
	Select one: <input type="checkbox"/> Major CAR <input checked="" type="checkbox"/> Minor CAR <input type="checkbox"/> Observation		
	Site CAR/OBS issued to (where more than one site)		
	Deadline for Corrective Action by FME		
	<input type="checkbox"/> 3 months from above Date of Issuance <input checked="" type="checkbox"/> Next audit (surveillance or re-evaluation) <input type="checkbox"/> Pre-condition to certification <input type="checkbox"/> Other deadline (specify):		
Standard and Requirement Reference		FSC-US Forest Management Standard (v1.0) 7.4.a.	
NON-CONFORMITY (or Background/ Justification in the case of Observations) <i>(Describe and provide objective evidence)</i> A public summary of the management plan outlining the elements of the plan described in Criterion 7.1 is not available.			
REQUESTED CORRECTIVE ACTION (or Observation) A summary of the management plan, outlining elements of Criterion 7.1, shall be readily available to the public.			

TO BE COMPLETED BY FME	IMPLEMENTED CORRECTIVE ACTION <i>(Response to Observations is optional)</i> Describe action taken by the FME to address the root cause of the non-conformity	
	EVIDENCE OF CONFORMANCE SUBMITTED WITH THIS FORM <i>(please list)</i>	
	FME Representative Name and Title	Date
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	SCS Representative Name and Title (CAR/OBS reviewer)	Date of Acceptance of Corrective Action
Press Enter twice below table to leave a space, then copy and paste table below for each CAR/OBS		

TO BE COMPLETED BY SCS REPRESENTATIVE	CAR/OBS Number (e.g. 1, 2, ...)		CAR 2011.10
	Select one: <input type="checkbox"/> Major CAR <input checked="" type="checkbox"/> Minor CAR <input type="checkbox"/> Observation		
	Site CAR/OBS issued to (where more than one site)		
	Deadline for Corrective Action by FME		
	<input type="checkbox"/> 3 months from above Date of Issuance <input checked="" type="checkbox"/> Next audit (surveillance or re-evaluation) <input type="checkbox"/> Pre-condition to certification <input type="checkbox"/> Other deadline (specify):		
Standard and Requirement Reference		FSC-US Forest Management Standard (v1.0) 8.5.a.	
NON-CONFORMITY (or Background/ Justification in the case of Observations) <i>(Describe and provide objective evidence)</i> Full monitoring results or a summary of the most recent monitoring information, covering the indicators in Criterion 8.2., is not available.			
REQUESTED CORRECTIVE ACTION (or Observation) Full monitoring results or a summary of the most recent monitoring information, covering the indicators in Criterion 8.2., shall be maintained and made publicly available.			

TO BE COMPLETED BY FME	IMPLEMENTED CORRECTIVE ACTION <i>(Response to Observations is optional)</i> Describe action taken by the FME to address the root cause of the non-conformity	
	EVIDENCE OF CONFORMANCE SUBMITTED WITH THIS FORM <i>(please list)</i>	
	FME Representative Name and Title	Date
TO BE COMPLETED BY SCS REPRESENTATIVE	SCS REVIEW / ACCEPTANCE OF CORRECTIVE ACTION <i>(Describe conclusion in detail)</i>	
	<input type="checkbox"/> CLOSED <input type="checkbox"/> UPGRADED TO MAJOR <input type="checkbox"/> OTHER DECISION <i>(refer to description above)</i>	
	SCS Representative Name and Title (CAR/OBS reviewer)	Date of Acceptance of Corrective Action
Press Enter twice below table to leave a space, then copy and paste table below for each CAR/OBS		

To be completed by SCS Representative	CAR/OBS Number (e.g. 1, 2, ...) _____ CAR 2011.11 Select one: <input type="checkbox"/> Major CAR <input checked="" type="checkbox"/> Minor CAR <input type="checkbox"/> Observation
	FMU CAR/OBS issued to (when more than one FMU) _____
	Deadline for Corrective Action by FME <input type="checkbox"/> 3 months from above Date of Issuance <input checked="" type="checkbox"/> Next audit (surveillance or re-evaluation) <input type="checkbox"/> Pre-condition to certification _____ <input type="checkbox"/> Other deadline (specify): _____
	Standard and Requirement Reference SCS FSC Chain of Custody Indicators for Forest Management Enterprises. 1.2.1.
To be completed by SCS Representative	<u>Non-Conformity (or Background/ Justification in the case of Observations)</u> <u>(Describe and provide objective evidence)</u> The SFMA does not have a formal training program or training records
	<u>Requested Corrective Action (or Observation)</u> The SFMA will formalize their training an documentation.
	<u>Implemented Corrective Action (Response to Observations is optional)</u> <u>Describe action taken by the FME to address the root cause of the non-conformity</u> _____
To be completed by FME	<u>Evidence of conformance submitted with this form (please list)</u>

	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"><u>FME Representative Name and Title</u> _____</td> <td style="width: 40%;"><u>Date</u> _____</td> </tr> </table>	<u>FME Representative Name and Title</u> _____	<u>Date</u> _____														
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To be Completed by SCS Representative	<p><u>SCS Review / Acceptance of Corrective Action</u> <i>(Describe conclusion in detail)</i></p> <p>_____</p> <p>_____ <u>CLOSED</u></p> <p>_____ <u>UPGRADED TO MAJOR</u></p> <p>_____ <u>OTHER DECISION (refer to description above)</u></p>																
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To be completed by SCS Representative	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"><u>CAR/OBS Number</u></td> <td style="width: 50%; text-align: right;"><i>OBS 2011.8</i></td> </tr> <tr> <td colspan="2"> <u>Select one:</u> <input type="checkbox"/> <u>Major CAR</u> <input type="checkbox"/> <u>Minor CAR</u> <input checked="" type="checkbox"/> <u>Observation</u> </td> </tr> <tr> <td colspan="2"><u>FMU CAR/OBS issued to (when more than one FMU)</u></td> </tr> <tr> <td colspan="2"><u>Deadline for Corrective Action by FME</u></td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> 3 months from above Date of Issuance <input type="checkbox"/> Next audit (surveillance or re-evaluation) <input type="checkbox"/> Pre-condition to certification _____ <input type="checkbox"/> Other deadline (specify): _____ </td> </tr> <tr> <td><u>Standard and Requirement Reference</u></td> <td>_____ <u>SCS FSC Chain of Custody Indicators for Forest Management Enterprises. 1.2.2.</u></td> </tr> <tr> <td colspan="2"><u>Non-Conformity (or Background/ Justification in the case of Observations)</u></td> </tr> <tr> <td colspan="2"><i>(Describe and provide objective evidence)</i></td> </tr> </table>	<u>CAR/OBS Number</u>	<i>OBS 2011.8</i>	<u>Select one:</u> <input type="checkbox"/> <u>Major CAR</u> <input type="checkbox"/> <u>Minor CAR</u> <input checked="" type="checkbox"/> <u>Observation</u>		<u>FMU CAR/OBS issued to (when more than one FMU)</u>		<u>Deadline for Corrective Action by FME</u>		<input type="checkbox"/> 3 months from above Date of Issuance <input type="checkbox"/> Next audit (surveillance or re-evaluation) <input type="checkbox"/> Pre-condition to certification _____ <input type="checkbox"/> Other deadline (specify): _____		<u>Standard and Requirement Reference</u>	_____ <u>SCS FSC Chain of Custody Indicators for Forest Management Enterprises. 1.2.2.</u>	<u>Non-Conformity (or Background/ Justification in the case of Observations)</u>		<i>(Describe and provide objective evidence)</i>	
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<u>Select one:</u> <input type="checkbox"/> <u>Major CAR</u> <input type="checkbox"/> <u>Minor CAR</u> <input checked="" type="checkbox"/> <u>Observation</u>																	
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<u>Standard and Requirement Reference</u>	_____ <u>SCS FSC Chain of Custody Indicators for Forest Management Enterprises. 1.2.2.</u>																
<u>Non-Conformity (or Background/ Justification in the case of Observations)</u>																	
<i>(Describe and provide objective evidence)</i>																	

	SFMA staff and contractor personnel demonstrate knowledge of COC requirements. A formal training program would improve compliance as employees change.	
	<u>Requested Corrective Action (or Observation)</u> A formal training program would improve compliance.	
To be completed by FME	<u>Implemented Corrective Action (Response to Observations is optional)</u> <u>Describe action taken by the FME to address the root cause of the non-conformity</u> _____	
	<u>Evidence of conformance submitted with this form (please list)</u> _____	
	<u>FME Representative Name and Title</u> _____	<u>Date</u> _____
To be Completed by SCS	<u>SCS Review / Acceptance of Corrective Action</u> <u>(Describe conclusion in detail)</u> _____	

<u> </u> CLOSED <u> </u> UPGRADED TO MAJOR <u> </u> OTHER DECISION (refer to description above)	
<u>SCS Representative Name and Title (CAR/OBS reviewer)</u> <u> </u>	<u>Date of Acceptance of Corrective Action</u> <u> </u>

Press Enter twice below table to leave a space, then copy and paste table below for each CAR/OBS

To be completed by SCS Representative	CAR/OBS Number (e.g. 1, 2, ...)	OBS 2011.9
	Select one: <input type="checkbox"/> Major CAR <input type="checkbox"/> Minor CAR <input checked="" type="checkbox"/> Observation	
	FMU CAR/OBS issued to (when more than one FMU)	<u> </u>
	Deadline for Corrective Action by FME <input type="checkbox"/> 3 months from above Date of Issuance <input type="checkbox"/> Next audit (surveillance or re-evaluation) <input type="checkbox"/> Pre-condition to certification <input type="checkbox"/> Other deadline (specify): <u> </u>	
	Standard and Requirement Reference	SCS FSC Chain of Custody Indicators for Forest Management Enterprises. 1.3.1.
	Non-Conformity (or Background/ Justification in the case of Observations) <i>(Describe and provide objective evidence)</i> The SFMA is not currently certified and their shipping information does not include a certificate code and product claim. Prior to their certificate lapse, documents contained only the certificate code.	
	Requested Corrective Action (or Observation) SFMA should include both their new certificate code and product claim on shipping documents after certification.	
To be	Implemented Corrective Action (Response to Observations is optional) <u>Describe action taken by the FME to address the root cause of the non-conformity</u>	

	<u>Evidence of conformance submitted with this form (please list)</u>	

	<u>FME Representative Name and Title</u>	<u>Date</u>
	_____	_____
To be Completed by SCS Representative	<u>SCS Review / Acceptance of Corrective Action</u> <u>(Describe conclusion in detail)</u>	

	<input type="checkbox"/> <u>CLOSED</u> <input type="checkbox"/> <u>UPGRADED TO MAJOR</u> <input type="checkbox"/> <u>OTHER DECISION (refer to description above)</u>	
	<u>SCS Representative Name and Title (CAR/OBS reviewer)</u>	<u>Date of Acceptance of Corrective Action</u>
	_____	_____
<i>Press Enter twice below table to leave a space, then copy and paste table below for each CAR/OBS</i>		

To be completed by	<u>CAR/OBS Number (e.g. 1, 2, ...)</u>	CAR 2011.12
	<u>Select one:</u> <input type="checkbox"/> Major CAR <input checked="" type="checkbox"/> Minor CAR <input type="checkbox"/> Observation	
	<u>FMU CAR/OBS issued to (when more than one FMU)</u>	_____
<u>Deadline for Corrective Action by FME</u>		

	<input type="checkbox"/> 3 months from above Date of Issuance	
	<input checked="" type="checkbox"/> Next audit (surveillance or re-evaluation)	
	<input type="checkbox"/> Pre-condition to certification	
	<input type="checkbox"/> Other deadline (specify): _____	
Standard and Requirement Reference	_____ SCS FSC Chain of Custody Indicators for Forest Management Enterprises 1.5.2.	
<u>Non-Conformity (or Background/ Justification in the case of Observations)</u> <u>(Describe and provide objective evidence)</u>		
The SFMA does not have a formal outsourcing agreement with their contractors.		
<u>Requested Corrective Action (or Observation)</u>		
The SFMA shall have formal outsourcing agreements with service providers.		
<u>Implemented Corrective Action (Response to Observations is optional)</u> <u>Describe action taken by the FME to address the root cause of the non-conformity</u>		

<u>Evidence of conformance submitted with this form (please list)</u>		

To be completed by FME	<u>FME Representative Name and Title</u>	<u>Date</u>
	_____	_____
To be	<u>SCS Review / Acceptance of Corrective Action</u> <u>(Describe conclusion in detail)</u>	

<p>_____</p> <p><u>CLOSED</u></p> <p><u>UPGRADED TO MAJOR</u></p> <p><u>OTHER DECISION (refer to description above)</u></p>	
<u>SCS Representative Name and Title (CAR/OBS reviewer)</u>	<u>Date of Acceptance of Corrective Action</u>
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To be completed by SCS Representative	<u>CAR/OBS Number (e.g. 1, 2, ...)</u>	<i>OBS 2011.10</i>
	<i>Select one:</i> <input type="checkbox"/> Major CAR <input type="checkbox"/> Minor CAR <input checked="" type="checkbox"/> Observation	
	<u>FMU CAR/OBS issued to (when more than one FMU)</u>	_____
	<u>Deadline for Corrective Action by FME</u>	
	<input type="checkbox"/> 3 months from above Date of Issuance <input checked="" type="checkbox"/> Next audit (surveillance or re-evaluation) <input type="checkbox"/> Pre-condition to certification _____ <input type="checkbox"/> Other deadline (specify): _____	
	<u>Standard and Requirement Reference</u>	SCS FSC Chain of Custody Indicators for Forest Management Enterprises 1.5.3.
	<u>Non-Conformity (or Background/ Justification in the case of Observations)</u> <i>(Describe and provide objective evidence)</i>	
	Interviews with current contractor personnel and SFMA staff show compliance with the intent of 1.5.3. A written system would insure continuity.	
<u>Requested Corrective Action (or Observation)</u>		

	SFMA should consider a written system to help insure policy continuity.	
To be completed by FME	<u>Implemented Corrective Action (Response to Observations is optional)</u> <u>Describe action taken by the FME to address the root cause of the non-conformity</u> _____	
	<u>Evidence of conformance submitted with this form (please list)</u> _____	
	<u>FME Representative Name and Title</u> _____	<u>Date</u> _____
To be Completed by SCS Representative	<u>SCS Review / Acceptance of Corrective Action</u> <u>(Describe conclusion in detail)</u> _____	
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	<u>SCS Representative Name and Title (CAR/OBS reviewer)</u> _____	<u>Date of Acceptance of Corrective Action</u> _____