



Corrective Action Report



Shaded section—Coles Group team member raising the CAR to complete.
Unshaded sections—Contractor/Supplier/Demonstrator to complete.

Site Number and Name:	
Date of Incident:	
Service / Product Description:	
Contractor / Supplier Company / Division:	
Department Where Work Conducted	
Contractor / Supplier Full Name:	
Contractor / Supplier Phone No:	

Problem (Detail non compliant / unsafe product, service or practice)	Action (What action is proposed to rectify the problem)	Who	When	Closed date

Overall outcome of corrective action: *Satisfactory / Unsatisfactory* (Coles Group representative to circle).
 If unsatisfactory, outline the unresolved issues below and return the CAR to the contractor to address.
 Record the date when the action was closed off satisfactorily in the 'closed date' column above.

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Forward a copy to the Coles Group Contract Manager or Merchandise Manager in your Brand.

Contractor Representative:	
Signature:	
Coles Group Representative:	
Signature:	