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| **Contractor** | [Insert text here] | **Date** | [Insert text here] |
| **Contract No.** | [Insert text here] | **Project No.** | [Insert text here] |
| **Project Name** | [Insert text here] | | |

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| Review Item Details | | | | | | Review Outcomes | |
| Report No. | Date Conducted | Description | Location / Source | Type | Auditor | Requirements met? Y / N | CAR (if required) # |
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\*Type Codes

1 – Stakeholder Feedback, 2 – Audit, 3 – Inspection, 4 – Testing, 5 – Random Monitoring (and frequency if applicable)