

ISO 9001:2015	Document No: QO-F-8.1-9	Version No: Ver. 1.1	Date Effective: 19.06.2020
Document Title: Quality audit report			



RESEARCH DESIGNS & STANDARDS ORGANIZATION

Manaknagar, Lucknow – 226011

QO-F-8.1-9

Quality Audit Report

1.0 Amendment History:

S. No.	Amendment Date	Version	Reasons for Amendment
1.	12.09.2018	1.0	First issue under ISO 9001:2015. Approved by DG/RDSO on NP-1 to NP-3 of MR/ISO9001/App/QMS/Doc/2018 on date 07.09.2018.No change in content from previous document no.QO-F-7.1-9 Ver. 4.0 of 9001:2008 QMS.
2.	19.06.2020	1.1	Special DG VD (Vendor Development) has joined RDSO and looking after vendor development work. All proposal for ISO procedure related to vendor development , where it was earlier required to get the approval of DG/RDSO, now to be put up to Spl.DG/VD who is now designated as final authority in vendor development matters. DG's note no. DG/Misc. dated 15.Jun.2020 and 16 June 2020 to ED /VDG RDSO/LKO

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2.0 Purpose:

For assessment of the vendor at the time of Quality Audit.

3.0 Scope of Application:

Applicable for all the cases of Quality Audit.

4.0 Procedure / Details:

Format is appended. While using the form **print and use only the 'Format' pages**.

5.0 Referenced Documents

None

6.0 Referenced Documents of External Origin

None

7.0 Associated

Records None

8.0 Responsibility and Authority

Activity	Responsible	Approver	Supporting	Consulted	Informed
Creation, maintenance of this document	MR/ISO Cell	Spl. DG/VD	Staff of ISO Cell	Standing Committee	All directorates Through intranet
Requirement of deviation from this form template.	Head of Directorate	Spl. DG/VD	Respective officer of directorate	MR/ISO Cell	All directorates Through intranet
Compliance of directives contained in this document	Director In charge Of Directorate	Head of Directorate	Directorate Staff		

9.0 Abbreviations:

Nil

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Quality Audit Report

I. General Details-

1.	Firm's name		
2.	Office address		
3.	Works Address (Where Quality Audit conducted)		
	Phone No.		
	Fax		
	E-mail		
4.	Name of the Auditing Official		
5.	Designation		
6.	Date of Audit		
7.	Item covered during Quality Audit (Attach list in separate sheet if numbers of items are more.)		
S.No	Item Name	Spec./ Drg. No./STR	Status approved Vendors

II. Compliance of STR & Specification:-

SN	Item	Remarks
1.	Compliance of STR requirements/Item specific guidelines(Para wise)	

2.	Compliance of specification (Except 'Type Test')	
3.	Availability of all relevant standards, Specification, IS Code, Drawing, Reference Code	
4.	(a) Whether gauges are calibrated/approved (b) Measuring & testing equipment are calibrated.	

III. Compliance of QAP:-

S.No.	Description	Remarks
1.	Check Firm's name and Works address on QAP	
2.	Whether firm is following the approved QAP.	
3.	Whether firm has made any changes in Raw material/processes without informing them to RDSO.	
4.	Check raw material purchase & inspection procedure	
5.	Verify in-process inspection & internal testing records of finished product.	
6.	Traceability of product from raw material to finished stage(if applicable)	

IV. Warranty compliance:-

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SN	Item	Comment/ Observations
1.	Whether firm is maintaining a proper Record of warranty complaints/ in-service failure and other general complaints	
2.	Details of warranty failures complied/ pending as on date	
	SN	Item
	a.	No. of warranty failures reported from last Quality Audit/ fresh registration
	b.	No. of warranty claims complied
c.	No. of warranty claims pending on date	(Attach sheet giving details.)

V. Supply Quantity details:-

Total Quantity Supplied (Since last Quality Audit)	Total Quantity to be supplied (as per purchase orders in hand)

VI. Verification of documents

S.No.	Description	Validity	Attach verified copy
1.	Factory License		
2.	ISO-9001 Certificate		
3.	Latest Electricity Bill	(Month)	
4.	Digital Signature and IREPS Registration		

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1.	Whether Sample testing carried out	Yes/No
2.	If yes, attach Test results	

VIII. Compliance of Last Quality Audit Observations :(Attach sheet in the following format)

S.N	Date of Audit	Details of pending quality audit observations	Proposed date of compliance

IX. Reassessment of Capacity (if applicable)

(Attach Separate Sheet)

X. Other observation of Quality Audit.

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XI. Recommendation

Intimation of successful 'Quality Audit' to be communicated to the firm/Vendor and all concerned as per standard format at Annexure –I .

(Write either Yes or No in the box above)

Sig. Of Auditing Official

Name:

Designation:

Date:

Counter signature (by field officer incharge)

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 Lucknow - 226 011
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Annexure - I

Fax.....

Date:

Email.....

M/s.....

.....

Office Address

Work Address

.....

.....

Sub: **'Quality Audit'** for manufacture & supply of item.....

Quality Audit of M/s, conducted successfully on(date) at their work address.....for manufacture & supply of following items:

SN	Item	Drawing	Specification
i)			

ii)			
iii)			

Next Quality Audit due on (Date).....

(5-year from date of this Audit)

Signature

Name of Officer

Designation

Copy to: Concerned office..... (e.g. QA at NDLS/Kolkata/Bangalore etc. as applicable)