

NON-CONFORMANCE REPORT



Ministry of
Transportation
and Infrastructure

SECTION 1: TRACKING DETAILS

NCR #: 01

Service Area: **SA12 - Selkirk**

Name of Contractor: **HMC Services Inc**

Date: November 24, 2010

Prepared by: Dean Young Area Manager Golden SA12

SECTION 2: DESCRIPTION OF NON-CONFORMANCE

Contractor failed to comply with Maintenance specification 3.300 3.1.1 on the following roads;

- **Campbell #07**
- **Mons #15**
- **Pagliaro#82**
- **Lavallee#130**
- **Hough#200**
- **Allan#201**
- **Read#46**
- **Chamber#83**
- **Jones#154**
- **Thomas#309**
- **Malone#310**

Roads were checked Nov 18, 19, 20 November 2010. Roads are in the same geographic area. Some roads were monitored over the three day period. Contractor was unable to demonstrate proper coordination and planning. Equipment deployed in one instance was not adequately prepared.

SECTION 3: REQUIRED CORRECTION

Does Contractor have to re-do/do the work? Select N/A if non-conformance is not curable or opportunity to rectify has passed.

YES ☐ Deadline for correction: [Click here to enter a date.](#)

NO ☒ MOT accepts the non-conforming product/service
Reason: Work completed beyond time frame

N/A ☐ Reason:

Signatures upon completion of required correction:

Contractor representative confirms correction complete. Contractor Signature: _____

Date accepted by MOT: [Click here to enter a date.](#) MOT Representative: _____

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SECTION 4: ROOT CAUSE ANALYSIS & CORRECTIVE ACTION PLAN

4A) Deadline for submission of corrective action plan to MOT: [Click here to enter a date.](#)

4B) Root Cause Analysis: (Why did the non-conformance occur?)

4C) Corrective Action Plan: (How will the contractor prevent re-occurrence of the non-conformance?)

Signatures:

Contractor representative commits to implementing the corrective action plan and confirms that the plan is intended to prevent the re-occurrence of the Non-conformance identified in section 2 of this report..

Name: _____

Contractor Signature: _____

MOT representative accepts the corrective action plan. Acceptance does not negate the contractor's responsibility to perform the services in accordance with the contract requirements.

Name: _____

MOT Representative: _____

Date: [Click here to enter a date.](#)

INSTRUCTIONS:

SECTION 1, 2 AND 3 TO BE COMPLETED BY MOT

SECTION 4 TO BE COMPLETED BY THE CONTRACTOR

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Ministry of
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SECTION 1: TRACKING DETAILS

NCR #: 2011-02

Service Area: SA12 - Selkirk

Name of Contractor: HMC Services Inc

Date: September 20, 2011

Prepared by: Art McClean

SECTION 2: DESCRIPTION OF NON-CONFORMANCE

Quote the contractual requirement which is not being met and/or the relevant section of the QMS. Also quote location of non-conformance, e.g., highway number, foreman area, when applicable

Quantified Maintenance Services work reports have consistently been found to have instances of maintenance services that do not accurately represent actual work completed and/or the correct locational information as required in Article 14 b) f) "Records and Reports" of the *Road & Bridge Maintenance Contract* and as described in the *Quality Management System*, quality processes for Analysis & Reporting QMS OF11.

Examples:

- Highway 604R (TCH) Landmark 12330 & 12350 both of which are on Highway 95
- Delineators reported as 440M single post sign system – more than one at same landmark offset
- 100M Overlay patch reported to Hwy. 001W - Landmark 25090 should be Hwy. 1
- Start offset of highway used is almost always 0.00 at start of landmark and may continues through another landmark (hard to find location/length/measurement in the field)
- Kicking Horse concession work reported to Service Area
-

SECTION 3: REQUIRED CORRECTION

Does Contractor have to re-do/do the work? Select N/A if non-conformance is not curable or opportunity to rectify has passed.

YES ☒ Deadline for correction: **October 14, 2011**

NO ☐ MOT accepts the non-conforming product/service

Reason:

N/A ☒ Reason:

Signatures upon completion of required correction:

Contractor representative confirms correction complete. Contractor Signature: _____

Date accepted by MOT: Click here to enter a date. MOT Representative: _____

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SECTION 4: ROOT CAUSE ANALYSIS & CORRECTIVE ACTION PLAN

4A) Deadline for submission of corrective action plan to MOT: October 14, 2011

4B) Root Cause Analysis: (Why did the non-conformance occur?) New staff being introduced to the procedure on how the work reporting is compiled and reported to the MOT.

4C) Corrective Action Plan: (How will the contractor prevent re-occurrence of the non-conformance?) We are committed to providing further training to the new employees involved in the work reporting procedures.

Signatures:

Contractor representative commits to implementing the corrective action plan and confirms that the plan is intended to prevent the re-occurrence of the Non-conformance identified in section 2 of this report.

Name: Deide Thuc

Contractor Signature: [Signature]

MOT representative accepts the corrective action plan. Acceptance does not negate the contractor's responsibility to perform the services in accordance with the contract requirements.

Name: DEVETA ROBERTS

MOT Representative: [Signature]

Date: Click here to enter a date.
Dec 22 2011

INSTRUCTIONS:

SECTION 1, 2 AND 3 TO BE COMPLETED BY MOT

SECTION 4 TO BE COMPLETED BY THE CONTRACTOR