

Deficiency Listing for Follow Up Action

Date(s) of Review:					
Company Name and Addre	ess:				
Name					
Division (when applicable)		Abbreviation (when applicable)			
Street					
City	State/Province		Country	Postal Code	
Each open deficiency should be	listed on a separate NB-232				
Code Reference/ No:	RIPTION OF DEFICIENCY				
receipt, and acceptance by the I	at the review team recommends issu National Board, of page 2 of this doc standing deficiency listed above.				
		_			
Team Leader Signature		Date			
Team Leader Printed Name		Team Leader Nu	mber		
Review Team Member (AIA) Signature	Date			
Review Team Member (AIA) Printed Name		Name of Authori	Name of Authorized Inspection Agency		

IMPORTANT: Page 2 of this document should be completed by the Authorized Inspection Agency and submitted to the National Board within 30 days of the last day of the review, advising that the above listed deficiency has been corrected. If this form is not received within 30 days, the *Certificate of Authorization* will not be issued, and another review may be required.



Deficiency Listing for Follow Up Action

Date(s) of Review:			
Company Name and Address:			
Name			
Division (when applicable)	Abbreviation (when applied		when applicable)
Street			
City	State/Province	Country	Postal Code
Action taken to resolve deficiency: Indicate action taken to resolve the outsta applicable <i>Certificate of Authorization</i> .	nding deficiency as a result of	the National Board review t	for issuance of the
Deficiency No			
AIA Representative Contact Information:			
Printed Name:			
Email:	Phon	e:	
Authorized Inspection Agency:			
Signature of AIA Representative	Date		

The completed NB-232 should be emailed to the National Board at repairstamp@nbbi.org.

The original NB-232 should be kept with the AIA.

A copy of the NB-232 should be given to the Company.