

CORRECTIVE ACTION REGISTER

STRAVIK Construction Group · Controlled Document

Document No.	Revision	Effective Date	Document Owner	Status
STV-HSE-PRO-017C	00 (Initial Issue)	2026-10-24	[SAFETY DIRECTOR]	Issued for review / pending approval

Management system alignment: This document is aligned with ISO 9001:2015, ISO 14001:2015 and ISO 45001:2018 requirements as applicable. STRAVIK Construction Group does not claim third-party certification to these standards. Florida Certified General Contractor License No. [FL LICENSE NO.].

REVISION HISTORY

Rev.	Date	Description of Change	Prepared By	Approved By
00	2026-10-24	Initial issue for STRAVIK Construction Group	[PREPARED BY]	Michael Gaya, President

1. PURPOSE

To establish a standardized system for logging, tracking, verifying, and closing all corrective and preventive actions (CAPA) related to safety, quality, environmental, and operational nonconformities. This register ensures that identified issues are documented, analyzed for root cause, assigned to responsible parties, and closed within defined timelines, supporting continual improvement across STRAVIK's operations.

2. SCOPE

Applies to all projects, facilities, and departments within STRAVIK Construction Group, covering:

- Daily/weekly inspections
- Monthly audits
- Incident and near-miss investigations
- Client or regulatory findings
- Environmental or quality nonconformities

3. REFERENCES

- OSHA 29 CFR 1904 – Recordkeeping & Incident Tracking
- ISO 45001:2018 – Clause 10.2 "Incident, Nonconformity, and Corrective Action"
- ISO 9001:2015 – Clause 10.2 "Nonconformity and Corrective Action"
- STRAVIK Safety Management System (STV-HSE-PRO-003)
- Field Safety Program (STV-HSE-MAN-002)

4. DEFINITIONS

- Nonconformity: Deviation from a required standard, policy, or regulatory requirement.

- Corrective Action (CA): Action taken to eliminate the cause of a detected nonconformity or hazard.
- Preventive Action (PA): Action taken to prevent the occurrence of a potential nonconformity.
- Root Cause: The fundamental reason the problem occurred, determined through investigation.
- CAR ID: Unique sequential identification number assigned to each corrective action (e.g., CAR-2025-001).

5. RESPONSIBILITIES

Role Responsibilities

Initiates CARs for project-level findings and assigns Project Manager responsible persons.

Tracks CARs, ensures completion, verifies effectiveness of Safety Officer / EHS Manager corrective actions.

Responsible Person / Implements corrective actions within agreed timeframe Subcontractor and reports completion.

Monitors CAR trends, validates closure, and reports status Corporate EHS Director in monthly dashboard.

Reviews high-severity or systemic issues and ensures Executive Leadership organizational learning.

6. CORRECTIVE ACTION REGISTER TABLE

See STV-QHSE-17C1CORRECTIVE ACTION REGISTER TABLE

(Rows continue as needed for project duration; digital register preferred for traceability.)

7. SEVERITY CLASSIFICATION

Severity Level	Definition	Action Timeline
Imminent risk of injury, environmental release, or Correct within 24 High (Critical) regulatory breach hours		
Medium	Potential for significant noncompliance or recurring	Correct within 7
(Major)	issue	days

Correct within 30 Low (Minor) Administrative or procedural deviation days

8. CLOSE-OUT VERIFICATION

Each CAR must include documented evidence of verification before closure: Field inspection by Safety Officer Photographic proof or signed completion form Confirmation of root cause correction Preventive control implemented

The EHS Director or Corporate Auditor signs off only after verifying the effectiveness of the corrective action.

9. PERFORMANCE MONITORING

CAR data is compiled monthly for analysis through the EHS Performance Dashboard, tracking:

- Total CARs raised
- CARs closed on time (%)

- Repeat findings (%)
- Leading causes of nonconformities
- Average days to closure

These metrics are reviewed by the Executive Leadership Team to identify systemic improvements and allocate resources where needed.

10. RECORD RETENTION

All CAR records (electronic or hard copy) must be retained for five (5) years, in accordance with Records Management Policy (STV-GOV-POL-011). Digital copies are stored in the corporate EHS Management System and accessible to auditors and clients upon request.

11. REVISION & APPROVAL

Approved By	Title	Signature	Date
Michael Gaya	President	_____	

[NAME] [VICE PRESIDENT / OPERATIONS] _____
Corporate EHS Director _____

APPROVAL

Role	Name	Title	Signature	Date
Prepared By	[PREPARED BY]	[TITLE]		
Reviewed By	[QUALITY / HSE MANAGER]	[TITLE]		
Approved By	Michael Gaya	President		

This document is reviewed at least annually, or upon significant organizational, legal or operational change, and re-issued under document control per STV-GOV-POL-011.