

CORRECTIVE & PREVENTIVE ACTION (CAPA) LOG

STRAVIK Construction Group · Controlled Document

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STV-CIP-PRO-003	00 (Initial Issue)	2026-10-24	[QUALITY / HSE MANAGER]	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 provide a standardized method for recording, investigating, and closing Corrective Actions and Preventive Actions (CAPA) arising from non-conformities, incidents, audits, or lessons learned. This ensures continual improvement and full compliance with ISO 9001 / 14001 / 45001 requirements.

2. SCOPE

Applies to all departments and project sites under STRAVIK Construction Group, covering:

- Quality non-conformities (materials, workmanship, documentation)
- Safety and environmental incidents or near-misses
- Regulatory or client audit findings
- Lessons learned requiring systemic prevention measures

3. REFERENCES

- STV-QMS-MAN-001 Corporate Quality Manual
- STV-EHS-01 Health, Safety & Environmental Manual
- STV-CIP-PRO-002 Lessons Learned Register
- STV-LEG-REG-007A Legal Claims / Dispute Logs
- ISO 9001:2015 Clause 10.2 (Non-conformity and Corrective Action)

4. RESPONSIBILITIES

Role Responsibility

Approves corporate CAPA summary and President allocates resources for implementation.

Leads root-cause analysis, assigns corrective and QA/QC Manager preventive actions, verifies closure.

Manages CAPA arising from safety or EHS Manager environmental incidents.

Ensure implementation and record closure Project Managers evidence at site level.

Maintains the CAPA Log and tracks deadlines Document Controller and verification status.

5. CAPA PROCESS

1. Identify non-conformity or potential issue via audit, incident, inspection, or lesson learned.
2. Record in CAPA Log (STV-CIP-PRO-003) and assign unique ID (CA-YYYY- ### or PA-YYYY-###).
3. Perform root-cause analysis using 5-Why or Fishbone method.
4. Define Corrective Action (immediate and long-term fix) and Preventive Action (systemic improvement).
5. Assign responsible person and target completion date.
6. Verify implementation and record evidence (photos, reports, training records).
7. Close CAPA once verified effective by QA/QC or EHS Manager.

6. CAPA REGISTER FIELDS

Field Description

CAPA ID Unique reference number (CA/PA-YYYY-XXX)

Date Raised When non-conformity was identified

Audit, Inspection, Incident, Client Feedback, Source Lesson Learned

Quality / Safety / Environmental / Process / Category Administrative

Description of Issue Summary of problem or risk

Root Cause Underlying reason determined by analysis

Corrective Action Action to eliminate root cause of existing issue

Preventive Action Action to avoid future occurrence

Responsible Party Assigned individual or department

Target Date Completion deadline

Verification Date Follow-up date for validation

Status Open / In Progress / Closed / Overdue

Effectiveness Verification Y/N – confirmed by QA/QC or EHS Manager

Comments / Evidence Ref. Supporting documentation path or file ID

7. MONITORING AND REVIEW

- CAPA Log reviewed monthly by QA/QC and EHS Managers.
- Quarterly summary presented in Management Review (STV-CIP-PRO-001).
- KPI Targets: ≥ 95 % closure within deadline, 0 repeat non-conformities.

8. RECORD RETENTION

All CAPA records retained for minimum 10 years and stored digitally within QMS → "/Continuous Improvement/CAPA_Log/".

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.