

# PCI Erector Certification Program

## Erector's Post-Audit Declaration (EPAD)



### COVER SHEET

Certified Erector's Company Name

Certified Field Auditor (CFA) Name

Audit Date

Precast Concrete Producer's Name

Precast Concrete Producer's City and State

Project Name and Location

Foreman's Name

Date of Previous Audit

#### Erector's Declaration:

I hereby declare that, to the best of my knowledge, the audit conducted on the date shown above was accomplished according to provisions of PCI Policy 29/Erector Certification Program, and Applicable Quality Standards (MNL 127, MNL 132, and MNL 135). I further certify that all nonconformances have been reconciled or mitigated and that my erection crew, to the best of my knowledge, is operating in compliance with the program standards.

Name

Title

Signature (Officer of the Company)

Date

#### Distribution (Email within 7 calendar days):

Audit@pci.org

Precast Concrete Producer

Certified Erector

To verify Certified Erector status, visit [https://www.pci.org/PCI/Directories/PCI\\_Certified\\_Erector\\_Search.aspx](https://www.pci.org/PCI/Directories/PCI_Certified_Erector_Search.aspx)

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## INSTRUCTIONS

**Please use the Erector's Post-Audit Declaration (EPAD) form to record the corrective actions you have taken for each nonconformance and incomplete conformance listed in the Audit Summary Comments of your current Field Quality Audit Report (FQAR).**

There are two EPAD forms available. One form can accommodate four responses. There is a second form for a single response in the event more space is required.

Several pages of forms can be submitted as separate PDF files to PCI for review.

## HOW TO COMPLETE THE FORM

The cover page includes fields for identifying information, such as the Certified Erector's Name and the Project Name and Location. Please include your identifying information on this page so PCI can identify the field audit associated with this EPAD.

The next section of the EPAD form (page 3) includes fields for identifying the section number listed in the FQAR and a brief description of the nonconformance or incomplete conformance. The erector's input into these two fields must be consistent with the information provided by the auditor in the Audit Summary Comments of the associated FQAR.

Please note that the section number in your EPAD must match the number assigned in the Audit Summary Comments of the associated FQAR. The auditor's description of the nonconformance or incomplete conformance can be briefly summarized; it does not need to be restated in its entirety.

The bottom portion of the form, titled "Erector's Corrective Actions," must include a brief summary of the **corrective/preventive actions** taken to mitigate the issues caused by the underlying problem and to support the potential elimination of the problem.

**Reminder: The EPAD form is due to PCI within 15 days of receiving the FQAR.**

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Section No.	Brief Description of the Nonconformance or Incomplete Conformance
<b>Erector's Corrective Actions</b>	

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Section No.	Brief Description of the Nonconformance or Incomplete Conformance

**Erector's Corrective Actions**