Exception Closure Verification Format

Document No.	_____	Date	_____/_____/_____
Department/Location	_____		
Reported By	_____	Designation	_____

Exception Details

Description of Exception	
Date of Occurrence	_____/_____/_____	Reference No.	_____

Root Cause Analysis

Description	

Corrective and Preventive Action Taken

Description	
Date of Implementation	_____/_____/_____	Responsible Person	_____

Verification of Closure

Verified By	_____	Date	_____/_____/_____
Remarks			

Important Notes

- This format ensures all exception cases are transparently documented and closed.
- Root cause analysis and corrective actions must be concise and evidence-based.
- Closure must only be verified by an authorized signatory.
- All supporting documentation should be maintained along with this form.
- Regular audits should include review of Exception Closure documents.