

LOGO & COMPANY NAME

DEVIATION REQUEST NOTE

DATE: _____ SR.NO.: _____

TO,
KIND ATTN: _____ [DEPARTMENT (S)]

DEVIATION REQUIRED FOR :

1. PRODUCT

2. PROCESS

DEVIATION REQUIRED [NATURE]

WHY DEVIATION REQUIRED - [NOS. OF REASONS]

ESTIMATED DEVIATION TIME :

DEVIATION : - IDENTIFY PARTICULAR LOT / BATCH / TRACEABLE NUMBER

FROM :
DEPARTMENT:

APPROVALS

NAME OF PERSONNEL & SIGNATORIES