## **Sanitation Deficiency Corrective Action Report**

Locatio	n/Area				
Date					
Date					
Reporte	ed By				
Deficie	ncy Description				
Immedi	ate Action Taken				
Root C	ause				
0	U A . H				
Correct	tive Action				
Respor	nsible Person				
Respon	ISIDIC I CISOTI				
Target	Completion Date				
Actual (	Completion Date				
Verified	д Ву				
Remark	ks/Comments				
Date	Deficiency Description	Immediate Action	Corrective Action	Responsible	Status