



དཔལ་ལྷན་འབྲུག་གཞུང་། གསོ་བ་ལྷན་ཁག འབྲུག་བཟའ་ཚས་དང་སློན་རིགས་དབང་འཛིན།

ROYAL GOVERNMENT OF BHUTAN
MINISTRY OF HEALTH
BHUTAN FOOD AND DRUG AUTHORITY
INSPECTION SERVICES



FOLLOW UP INSPECTION REPORT

Name of unit:	Registration no/Trade license:
Location:	Contact no:
Inspection Team (IT):	1)(Team leader)
	2) Member
	3) Member
Date of last inspection:	
Date of follow up inspection:	
Requirement/Standard used for Inspection:	

Participants in the Opening and Closing Meeting

Name of Key Personnel	Designation of Key Personnel	Opening Meeting (Date)	Closing Meeting (Date)

Follow-up of Corrective Actions

NC No. (from Report as per <i>BFDA-IB-FM-161</i>)	Evidences of Corrective Action taken by FBOs	Remarks (Acceptable / Not acceptable)

Recommendation:

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Dated:

Name and Signature of Team Leader

Doc. No: <i>BFDA-IS-FM-173</i>	Prepared by: <i>Technical Head</i>	Approved by: <i>Division Head</i>	Page 1 of 1
Issue No: <i>02</i>	Issue Date: <i>15 March 2023</i>	Revision No: <i>00</i>	Revision Date: --