FMS Audit – Internal Audit (Simplified)

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| Name of organization | Date of meeting | | Time | Location |
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| Procedures checked in the Facility Management System Manual and the applicable sub-clauses (e.g. 8.1 Operational Planning and Control) | | | | |
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| Documents checked and cross-referenced to the applicable sub-clauses as given above (e.g. 8.1 Operational plan based on defined processes) | | | | |
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| Findings, drawing attention to any nonconformity and necessary corrective action (e.g. minor change to operational plan to reduce waiting time for reactive maintenance). | | | | |
|  | | | | |
| Name of internal auditor | | Date and time | | |
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Note. This form to be used to record details of organization’s internal audit.