

COUNTERMEASURE IMPLEMENTATION MONITORING SHEET (CIMS)

Control No.: <Dealer Code>/Year/Month/<Sr. No.>	Date:
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Workshop Name:	Workshop Code:	Name of GM/WM:
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Sources: <input type="checkbox"/> PSF <input type="checkbox"/> Customer Feedback <input type="checkbox"/> Revisit <input type="checkbox"/> Internal Rework	MSIL TSM Name:
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Problem	Root Cause	Countermeasures Proposed	Target Date	Responsible Person

Actions Taken	Date of Action

Monitoring	1 st Month	2 nd Month	3 rd Month
	(OK/Not OK)*	(OK/Not OK)*	(OK/Not OK)*

Signature (GM/WM MSIL TSM)				
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Date of Verification				
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Note: (1) Implementation of countermeasures to be monitored for 3 months (2) In case of Not OK in a particular month, right countermeasure to be identified

*OK: No customer dissatisfaction due to identified root cause.

Reason for Not OK in particular month: