

# Company audit feedback form

Name of Company:

Company address:

Name of company contact person:

Telephone number:

Name of assessor:

Date of company audit:

**Please circle on a scale of 1-5 where 1 is strongly disagree, 5 is strongly agree.**

## Before the Audit

Acceptable notice was given prior to audit	1	2	3	4	5
Ease of arranging the audit date	1	2	3	4	5
From the information provided by the LCA you felt you were prepared for the audit	1	2	3	4	5

## The Audit

The assessor arrived at the agreed time	1	2	3	4	5
The audit was carried out professionally	1	2	3	4	5
The assessor explained the audit process to you	1	2	3	4	5
The audit addressed the requirements of the Code	1	2	3	4	5
The audit addressed the requirements of the Service Standards	1	2	3	4	5
Ease of arranging the audit date	1	2	3	4	5
The assessor summarised the findings of the audit clearly	1	2	3	4	5
The assessor provided guidance on improvements to procedures for non-conformances during the audit	1	2	3	4	5
The assessor conducted themselves and the audit in a professional manner	1	2	3	4	5

After the Audit					
The audit report arrived promptly	1	2	3	4	5
The audit report is clear and easily understood	1	2	3	4	5
You understand what you need to do to comply with the requirements of the LCA	1	2	3	4	5
You were happy with the level of confidentiality applied to the audit	1	2	3	4	5

Any further comments:

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Suggestions for LCA development or improvement:

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SIGNED:

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Print name:

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Date:

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**Thank you for your assistance, any comments will be carefully noted.**

**Please send this form back to LCA Secretariat.**

**email: [admin@legionellacontrol.org.uk](mailto:admin@legionellacontrol.org.uk)**

**or fax: 01827 250 408**