

**Allegations of non-compliance
First and Second Pass Assessment**

Instructions

1. Complete the form below
2. If the response to a question is red, recommend closure.

First Pass Assessment						
Number	Element	YES	NO	N/A	Evidence/notes	
1	a	Is there sufficient information to complete the assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	b	s47E(d)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	s47E(d)
2	a	Does the report relate to a Therapeutic Good?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	b	Is the Good included on the ARTG? or s47E(d)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ARTG Ref: s47E(d)
3	a	Does a permission apply for the good subject to the report?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Which permission?
	b	Is the Good Excluded from the Act?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Which Exclusion?
	c	Is the Good Exempt from the Act?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Which exemption?
4	a	s47E(d)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	b		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	c		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5	a	s47E(d)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	s47E(d)
6	a	Does the report relate to an offence under the Act, Regulations or advertising code?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Breach detected:

s47E(d)

s47E(d)

Assessment completed
by:

Date:

Endorsed by:

Date: