**BC MUNICIPAL SAFETY Association**

# NOTICE OF AUDIT

Submission Date: _____

☐ **External Audit**  ☐ **Internal Audit**  ☐ **Student Audit**

*Note: Each auditor participating in this audit must use their own Audit Tool.*
This document must be submitted to the British Columbia Municipal Safety Association (BCMSA) at least 2 weeks before the start of an audit.

## Organization Information

| Organization Name | WSBC Account # |
|---|---|
| Organization Address | Classification Unit # |
| First & Last Name of Organization Contact | Contact Email Address |
| Title | Contact Phone Number |

| ** FOR JOINT AUDITS – LIST ADDITIONAL ORGANIZATIONS INCLUDED IN AUDIT SCOPE HERE: | | |
|---|---|---|
| Legal Name of Organization | WSBC Account Number | Classification Unit |
| | | |
| | | |
| | | |

## Auditor Information

| 1st Auditor Name | | Auditor Certification # (n/a if student) | |
|---|---|---|---|
| Email | | Phone | |
| | | | |
| 2nd Auditor Name | | Auditor Certification # (n/a if student) | |
| Email | | Phone | |
| | | | |
| 3rd Auditor Name | | Auditor Certification # (n/a if student) | |
| Email | | Phone | |

***If more than three (3) auditors will be participating in this audit, please list them on an additional form.**

## Audit Information

☐ Certification   ☐ Maintenance   ☐ Re-certification   ☐ Limited Scope   ☐ Student

| Expected audit start date: | Estimated last day on site: | Estimated report submission: |
|---|---|---|
|  |  |  |

| Department | Minimum # of sites visited | # of people in the department | Minimum # of Interviews |
|---|---|---|---|
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| REFERENCE CHART | |
|---|---|
| # of people in the department | Minimum number of interviews based on the number of people in the department |
| 6 to 10 | 4 |
| 11 to 60 | 8 |
| 61 to 90 | 10 |
| 91 to 500 | 12 |
| 501 or more | 14 |

| Total # of Interviews | Total # of Sites Visited |
|---|---|
|  |  |

**Additional Comments:**

| Submit completed form to: | Drew Rassers<br>Client Services - Programs & Initiatives<br>BC Municipal Safety Association | E: drassers@bcmsa.ca<br>F: 778-278-0029 |
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