

Basic Quality Inspection Checklist

Date: _____ Inspector: _____

Item/Product Name: _____ Batch/Lot No.: _____

Supplier: _____

INSPECTION CHECKLIST

No.	Inspection Criteria	Pass	Fail	Remarks
1	Visual Appearance			
2	Dimensions/Size Check			
3	Functionality/Operation			
4	Packing Condition			
5	Labeling/Markings			
6	Other (Specify)			

GENERAL COMMENTS

Inspected By:

Date: _____
Approved By:

Date: _____