

# Standard Quality Control Audit Checklist Sheet

**Audit Date****Auditor Name****Department / Area**

Checklist Item	Standard/Criteria	Yes	No	Remarks
Are all materials labeled and stored properly?	Company SOP 2.1			
Is the equipment clean and maintained?	Company SOP 3.5			
Are safety protocols being followed?	Safety Policy 1.2			
Is documentation up to date and accessible?	Doc Control 4.1			
Are non-conformities documented and addressed?	QMS 6.4			

**General Remarks / Findings****Auditor Signature**