

# Container Vents & Drainage Inspection Form

Inspector Name

Date

Container ID/Number

Item	Status	Comments
Vents - Visual Condition	<div></div>	<div></div>
Vents - Blockages	<div></div>	<div></div>
Drainage - Condition	<div></div>	<div></div>
Drainage - Blockages	<div></div>	<div></div>
Any Repairs Needed	<div></div>	<div></div>

Additional Notes/Remarks

Inspector Signature

Date