

Final Finished Product Inspection Checklist (Fashion)

Factory:

Style Number:

PO Number:

Inspector Name:

Date of Inspection:

Inspection Points

| Check Point | Pass | Fail | Remarks |
|---------------------------|--------------------------|--------------------------|-------------|
| Measurement/Size Spec | <input type="checkbox"/> | <input type="checkbox"/> | <div></div> |
| Fabric Quality | <input type="checkbox"/> | <input type="checkbox"/> | <div></div> |
| Workmanship/Stitching | <input type="checkbox"/> | <input type="checkbox"/> | <div></div> |
| Trims & Accessories | <input type="checkbox"/> | <input type="checkbox"/> | <div></div> |
| Printing/Embellishments | <input type="checkbox"/> | <input type="checkbox"/> | <div></div> |
| Label & Care Instructions | <input type="checkbox"/> | <input type="checkbox"/> | <div></div> |
| Packing/Presentation | <input type="checkbox"/> | <input type="checkbox"/> | <div></div> |

Overall Comments:

Inspector Signature:

Date: