

# Packaging Material Inspection Checklist

Date:

Inspector Name:

Supplier Name:

Material Description:

Purchase Order No.:

Batch / Lot No.:

## Inspection Criteria

Criteria	Accept/Reject	Remarks
Appearance/Color	<input type="text"/>	<input type="text"/>
Cleanliness	<input type="text"/>	<input type="text"/>
Dimensions/Size	<input type="text"/>	<input type="text"/>
Odor	<input type="text"/>	<input type="text"/>
Integrity (No Damage)	<input type="text"/>	<input type="text"/>
Labeling	<input type="text"/>	<input type="text"/>
Sealing	<input type="text"/>	<input type="text"/>

Other Observations:

Final Decision:

Inspector Signature:

