

Raw Material Packaging Inspection Checklist

Date:

Inspector:

Supplier:

Material Name:

Batch/Lot No.:

Packaging Inspection Criteria

Criteria	Pass	Fail	Remarks
Packaging intact and undamaged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Proper labeling (name, code, batch, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Cleanliness of packaging	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Sealing/Wrapping intact	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Correct quantity/weight	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Absence of foreign materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

Comments/Findings

Disposition

Inspector Signature:

Date: