

Quality Assurance Department	Format No. : ST/GEN/02/F/01-R/01
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RAW MATERIAL INSPECTION CHECKLIST

Department : Stores Department	
Material Received with PO :	
Name of Manufacturer :	
Whether Approved Manufacturer :	Yes / No
Name of Supplier / Distributor :	
Whether Approved Supplier / Distributor :	Yes / No
Item Description :	
Whether COA Received :	Yes / No
D.C. No.& Date :	
GRN No & Date :	
Batch No.	
Mfg. Date :	Exp. Date :
Quantity :	

PHYSICAL VERIFICATION REPORT

Supplier Claim				Actual Receipt			Difference if any
Sr.#	Gross Wt.	Tare Wt.	Net Wt.	Gross Wt.	Tare Wt.	Net Wt.	
01							
02							
03							
04							
05							
06							
07							
08							
09							
10							

Vehicle inspection check list

1) Condition of the vehicle	Good / Not Good
2) Condition of the Consignment	OK/ Not Ok
3) Any Spillage of Material	Spillage Found / No Spillage
4) Any Rusted Drums Found	Yes / No
5) Any Mix-up with other party's material	Yes / No
6) Any Presence of Rodents /Animals	Yes / No
7) Any obnoxious Odor	Yes / No
8) Whether Vehicle is Covered to Protect the Material from Direct Sun & Rain	Yes / No
9) Seal Integrity	OK / Not OK

	Done By	Verified By
Sign / Date		
Name		
Dept.		

To,

Security

Serial No. 503

Please allow empty truck no..... to pass out of the factory gate after normal checks

Date :

Time :

Authorised Signatory