

Packaging Quality Assurance Checklist

Date: _____
Line/Area: _____
Inspector: _____

Checklist

| No. | Checkpoint | OK | NG | Comments |
|-----|---|----|----|----------|
| 1 | Packaging material is correct and as per specification | | | |
| 2 | All items are clean and free from dust or foreign materials | | | |
| 3 | Product is oriented and placed correctly in packaging | | | |
| 4 | Labels are present, clear, and correctly applied | | | |
| 5 | Seal integrity (no open or damaged seals) | | | |
| 6 | Barcodes/markings are clear and scannable | | | |
| 7 | Packaging appearance (no dents, tears, deformation) | | | |
| 8 | Correct quantity packed per unit/carton | | | |
| 9 | Traceability information present (lot number, date, etc.) | | | |
| 10 | Special instructions followed (if applicable) | | | |

Remarks:

Inspector Signature:

Supervisor Approval: _____

Date: _____
