

# Final Shipment Quality Approval Checklist

Shipment No.

Date

Customer

P.O. Number

Item Description

## Checklist

No.	Inspection Point	Pass	Fail	Remarks
1	Product Name/Label/Model Match PO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
2	Quantity Checked	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
3	Packing & Packaging Condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
4	Product Appearance & Workmanship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
5	Functionality / Performance Test	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
6	Safety Requirements Met	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
7	Documentation (Manuals, Labels, Barcode, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
8	Special Instructions/Customer Requirements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
9	Carton/Container Marking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
10	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

## Overall Remarks

Inspected by:

Name/Signature/Date

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Approved by:

Name/Signature/Date