

# Electronic Device Assembly Inspection Checklist

Device Model:

Serial Number:

Date:

Inspected By:

## Inspection Items

Item	Criteria	Pass	Fail	N/A
PCBA (Printed Circuit Board Assembly)	No visible damage, correct part orientation, secure mounting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Connectors & Sockets	All connectors properly attached and aligned.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cables & Wiring	Cables securely fixed; no pinched or crossed wires.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enclosure & Housing	No damage, correct assembly, all screws installed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Labels & Markings	All required labels present, legible, correctly positioned.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Power-Up Test	Device powers on with no abnormal sounds or smells.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Functional Test	Performs expected operations as specified.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accessories	All accessories included and correctly installed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Notes:

Inspector Signature:

Date:

**Note:** This checklist serves as a guideline for inspection. Any failing item should be documented and rectified before assembly completion.