

Incoming Goods Inspection Certificate

Warehouse Operations

1. Supplier and Delivery Information

| | | |
|-------------------|--------------------|--|
| Supplier Name | | |
| Delivery Note No. | | |
| Date of Receipt | ____ / ____ / ____ | |

| | | |
|--------------------|--|--|
| Purchase Order No. | | |
| Received By | | |
| Location | | |

2. Goods Details and Inspection

| No. | Item Description | Unit | Quantity Received | Quantity Ordered | Visual Inspection | Conformity | Remarks |
|-----|------------------|------|-------------------|------------------|-------------------|------------|---------|
| 1 | | | | | | | |
| 2 | | | | | | | |
| 3 | | | | | | | |

3. Inspection Conclusion

| | |
|---------------------------|--------------------------------------|
| Accepted | ____ Yes <input type="checkbox"/> No |
| Reason for Non-Acceptance | _____ |
| Disposition | Return / Rework / Other: _____ |

Inspector

Signature: _____
Name: _____

Warehouse Supervisor

Signature: _____
Name: _____

Date

____ / ____ / ____

Note: Attach any supporting documents or photographs if necessary.