

Quality Box Inspection Form



Customer: _____ Railcar: _____ Product: _____ Lot: _____

System Clean Down: 1st (Initials): _____ 2nd (Initials): _____ ☐ N/A Date: _____

Railcar Number Verification: 1st (Initials): _____ 2nd (Initials): _____

Railcar Seal: 1st (Initials): _____ 2nd (Initials): _____ Tare Weight: _____ (lbs)

Stencil Verification: 1st (Initials): _____ 2nd (Initials): _____

Pallet	Net Weight (+/- 7lbs)	Mold Check (√)	Pellet & Debris Check (√)	Box Centered (√)	Stapled to Pallet (√)	Label Secured (√)	Liner Secured (√)	Lid Check (√)
1st box of production								
10th box of production								
20th box of production								
30th box of production								
40th box of production								
50th box of production								
60th box of production								
70th box of production								
80th box of production								
90th box of production								
100th box of production								
110th box of production								
120th box of production								
130th box of production								
140th box of production								
150th box of production								

Notes _____

Operator: _____ Line: _____