

Container Inspection Report

Format # Rev. # Rev. Date.

Date:..... Inspection #

Container: { } From Supplier { } to Customer

Name of Supplier / Customer: Location:.....

Invoice / Bill / Papers:

Container # / Lorry No Registered.....

Name of Transporter: Location Contact.....

Seal No. Details.....

I.D..... Inspected by: Designation.....

Container Type: - Explain about container type

20 FT. -

40 FT. -

45 FT. -

Container inspection - Mention your observation

A. Right / Left Side of container.....

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B. Inside & Outside doors.....

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C. Floor, Ceiling & roof

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D. Over All observation.....

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Checked by:..... Sign.....

Approved by Sign..... For Loading / Unloading.
