

EXCESS INVENTORY | OBSOLETE INVENTORY DISPOSITION FORM

Format No.

Rev. No. & Date

 inspaspages.com

Date: _____ Job Order No. _____ Order Qty: _____

Material / Product / part ID: _____ Identified Qty: _____

Type of Inventory: () Self Life () Excessive () Returned () Scrap

Description:

Supplied By: _____ Assigned: _____

Root Cause

() Recovery, if yes Qty: _____ () not Recovered and send at Inventory Location: _____

Remarks:

Prepared by

Approved by