MACHINE QUALITY CONTROL CHECKLIST

FORMAT NO.:

MACHINE NAME	YEAR	INSPECTOR NAME	SIGNATURE

SR.NO	MACHINE'S CHECKLIST POINTS	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR
01													
02													
03													
04													
05													
06													
07													
08													
09													
10													
MACHINE'S PARAMETERS													
01													
02													
03													
04													
05													

TESTS ON MACHINE DURING INSPECTION

DATE	VARIOUS TEST	REQUIRED	ACTUAL	TOLERA.	OK/NOK	COMMENTS / SUGGESTIONS / REMARKS	SIGNATURE