

# RETURNED MATERIAL QUALITY INSPECTION FORM

Format No.

Rev. No. & Date:

Form No		Date		
Lot /Batch		Location		
Returned Material storage		Material Received by		
Material Send to Quality Date	Material Send by	Material received sign.		
Quality Department				
Material Name		Material Properties / Specification		
Customer Returned - Defect / Reason				
Quality Inspect Conducted by & Date:				
Sr.No.	Material	Qty	Tests	Status
Remarks				
Results			Comment	
Quality Engineer - Sign		M.Store - In charge		Quality Manager - Sign.