



Final Inspection Report

WQS Insp. # XXX-XX-XXXX

Customer Information

Customer Reference Number:
Name:
Address:
Contact Name:
Contact Number:

Factory Information

Name:
Address:
Contact Name:
Contact Number:
Inspection Date:
Inspection Location:

Product Information

Product Name:
Product / Item Number:
Quantity Ordered:
PO Number:
Styles / Colors:

Inspector Information

Inspector(s) Name:
Inspector's Remarks:

Inspection Criteria

Routine Tests:
Specific Tests Requested:
Inspection Standards: [Sampling level, quantity inspected, AQL-major, minor and critical]
Additional Remarks:



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Inspection Summary

Quantity Ready to Ship / Inspect:
Quantity Inspected:
Sampling Level:
Defects Table: [table - no details]
Specific Tests Requested:
Overall: (Pass / Fail)
Additional Remarks:

Defects List

List: (Pictures, Rating – major, minor or critical)

- Routine Tests:
- Specific Tests Requested:
- Measurement Tests:

Additional Remarks:

Packing and Packaging

Unit Packing: (Materials, Measurements, Printing etc.)
Unit Packaging: (Materials, Measurements, Printing etc.)
Shipping Packing: (Materials, Measurements, Printing etc.)
Shipping Packaging: (Materials, Measurements, Printing etc.)
Shipping Marks:
Additional Remarks:

Defects Summary

Table: (Summary: Totals)
Additional Remarks:

Remarks