



## GILES CHEMICAL ~ PREMIER MAGNESIA

### Company Procedure

Title: **Swab Test Auto Line 3**

Number: **R12-PR-100-F015e**

Owner: **Brook Vaughn**

Revision: **1**

Effective Date: **07/21/15**

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## Swab Test Auto #3

Swab tests are to be performed any time a line is being switched from scented salt production to unscented production. When performing a swab test follow *Residual Fragrance Test using TLC (R12-PR-100-015)*.

- Label a zip lock bag for each of the following 23 points to be swabbed.
- Wearing latex gloves roll each end of the swab on the station being swabbed, place in the zip lock bag labeled for that station and close seal.
- Submit bags to the Quality Unit for testing and wait for results before starting production on the line being tested.

- |                                    |                          |
|------------------------------------|--------------------------|
| 1. Bag Loader                      | <input type="checkbox"/> |
| 2. Zipper Opener                   | <input type="checkbox"/> |
| 3. Air Blast                       | <input type="checkbox"/> |
| 4. Bag Bottom Opening Suction Cups | <input type="checkbox"/> |
| 5. Settling Table                  | <input type="checkbox"/> |
| 6. Seal Bars                       | <input type="checkbox"/> |
| 7. Cooling Bars                    | <input type="checkbox"/> |
| 8. Discharge Belt                  | <input type="checkbox"/> |
| 9. Bed of Auto                     | <input type="checkbox"/> |
| 10. Contact Fingers #1             | <input type="checkbox"/> |
| 11. Contact Fingers #2             | <input type="checkbox"/> |
| 12. Contact Fingers #3             | <input type="checkbox"/> |
| 13. Contact Fingers #4             | <input type="checkbox"/> |
| 14. Contact Fingers #5             | <input type="checkbox"/> |
| 15. Contact Fingers #6             | <input type="checkbox"/> |
| 16. Contact Fingers #7             | <input type="checkbox"/> |
| 17. Contact Fingers #8             | <input type="checkbox"/> |
| 18. Contact Fingers #9             | <input type="checkbox"/> |
| 19. Contact Fingers #10            | <input type="checkbox"/> |
| 20. Funnel                         | <input type="checkbox"/> |
| 21. Dust Remover                   | <input type="checkbox"/> |
| 22. Collar                         | <input type="checkbox"/> |
| 23. Packing Table                  | <input type="checkbox"/> |

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Cleaned By: \_\_\_\_\_ Date: \_\_\_\_\_

Tested By: \_\_\_\_\_ Date: \_\_\_\_\_

Results: **Pass / Fail**

Reviewed By: \_\_\_\_\_ Date: \_\_\_\_\_

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