GILES CHEMICAL ~ PREMIER MAGNESIA
Company FORM

Title: Daily Clean Up for Auto #4	Number: R12-PR-100-F017d
Owner: Brook Vaughn	Revision: 00
Effective Date: 03/27/15	Page: 1 of 1

Auto #4 Cleaning Log

Auto lines are cleaned according to the *Repackaging Cleaning Procedure (R13-PR-100-034)*.

Check each block below as the line is being cleaned. Lead Operator must verify that the line is clean before signing. By signing; you are verifying that the line is clean and ready for use. After cleaning is complete turn the sign off sheet in to your supervisor.

Shift #1 ☐	Shift #2 ☐	Shift #3 ☐

Non-critical Contact Points:

- ☐ Used compressed air to blow off all salt inside and outside of the scales.
- ☐ Emptied each bucket of the scales.
- ☐ Used compressed air to blow salt off the machine from top to bottom.
- ☐ Wiped down the gripper arms, turret and suction cups with a damp rag.
- ☐ Cleaned seal bars and changed seal tape (if needed).
- ☐ Wiped down doors, bottom of machine, discharge belt and pouch magazine feeder with a damp rag.
- ☐ Used compressed air to blow off the long conveyor and then wiped it down with a damp rag.
- ☐ Used compressed air to blow off the taper, wiped it down with a damp rag and changed the tape roll (if needed).
- ☐ Cleaned up all nonconforming pouches and disposed of salt following the *Rework and Reprocessing of Salt* procedure (*R12-PR-100-007).*
- ☐ Swept the area around the machine to clean up all debris.

Critical Contact Points:

- ☐ Removed fill funnel and washed with diluted Dawn detergent, rinsed with hot water and sprayed with Isopropyl alcohol.
- ☐ Cleaned storage container with diluted Dawn detergent, rinsed with hot water and sprayed with Isopropyl alcohol.
- ☐ Put funnel into clean storage container.
- ☐ Blew out Hopper #5 with compressed air and sprayed it with Isopropyl alcohol while it was empty.
- ☐ Posted correct ID sign (RED-Not Clean, GREEN-Cleaned for USP, and BLUE-Cleaned for Tech Grade) stating the condition of the machine.

Comments:

Operator Signature: _____ Date: _____

☐   I hereby verify that this line is clean, has the correct ID sign posted and is ready for use

Supervisor Signature: _____ Date: _____

Reviewed By: QA Initials: _____ Date: _____

REPACKAGING DAILY DOWN TIME REPORT

PLEASE FILL IN		I NEED TO KNOW THE REASON YOU ARE DOWN
DATE		WHAT WAS DONE TO FIX PROBLEM AND IF YOU
LOT #		DON'T KNOW ASK SOMEONE THAT KNOWS
LINE#		ANY TIME YOU HAVE TO STOP WRITE IT DOWN!!!!!
		EVERY TIME LINE IS NOT RUNNING WRITE IT DOWN NO EXCUSES!!!!!
TIME DOWN	BACK UP	REASON FOR DOWN TIME

Controlled Document

EXPIRY DATE / SIGN OFF SHEET

1. **Circle the time that applies on each line (AM or PM).**

2. **Each line employee must review expiration dates and confirm their review by initialing in space provided.**

3. **"N/A" each unused space; no blank spaces are allowed.**

4. **Line operator will confirm that pouch or carton is sealed properly and place a √ in the space provided.**

OPERATOR_____ DATE_____ MACHINE#_____ START-UP TIME: _____

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (√)

6:00AM or 6:00PM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (√)

7:00AM or 7:00PM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (√)

8:00AM or 8:00PM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (√)

9:00AM or 9:00PM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (√)

10:00AM or 10:00PM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (√)

11:00AM or 11:00PM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (√)

12:00PM or 12:00AM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (√)

1:00PM or 1:00AM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (√)

2:00PM or 2:00AM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (√)

3:00PM or 3:00AM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (√)

4:00PM or 4:00AM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (√)

5:00PM or 5:00AM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (√)

6:00PM or 6:00AM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (√)

Reviewed by Production: _____

Reviewed by QA: _____

AUTO LINE:_____   **DATE:**_____

Operator:_____   **Shift:**_____

#	DESCRIPTION	SUMMARY REPORT
1	RECIPE SELECT	
2	PRODUCT SPEED	
3	FRONT TEMP	
4	REAR TEMP	
5	DATE CODE TEMP	
6	INFEED BAGS	
7	SEALING BAGS	
8	EMPTY DROPPED BAGS	
9	PACKING EFFICIENCY	
10	GRIPPERWIDTH	
11	RUN TIME H:M:S	
12	TOTALH:M:S	
13	UCF BEARING	
14	CAM BEARING	

	0.50% Dose 7.2 – 7.8	**CANADA PRODUCT MUST BE DECLARED LABEL WEIGHT: 2 Kg, 4.41 LBS – SEE WEIGHT SHEET**
Product Name:	0.75% Dose 11.00-11.75	1 Lb: .99 – 1.05 lbs

Product requires Dry Adds   Y   N

						1% Dose 14.55-15.45	2 lb: 1.98 – 2.10 lbs
AUTO FRAGRANCE TEST	Auto #:	N/A	OPERATOR:		N/A		
CHECK ALL AT LEAST EVERY 15 MINUTES		N/A	DATE:				3 lb: 2.98 – 3.12 lbs

TIME	POUCH WEIGHT	COUNTER SIGNAL	BOX PUMP	DISPERSION Y/N	DROP TEST P/F	REGULAR LIQUID CHECK	BARREL LIQUID WEIGHT	BARREL 500 COUNT CALC. #	SEAL VERIFICATION	Dry Additives Present P/F/NA*

LIQUID LOT#'S	POUCH LOT#'S	POUCH LOT#'S	POUCH LOT#'S	POUCH LOT#'S	**Reviewed by QA (initials and time)**	
					1.	4.
					2.	5.
					3.	6.

- NA only when product does not require Dry Additives