

**GILES CHEMICAL ~ PREMIER MAGNESIA****Company Form**Title: **Manufacturing Process Quality Audit**Number: **P14-QA-100-F090**Owner: **Lisa Hefner**Revision: **04**Effective Date: **07/01/2017**Page: **1 of 1**

Date: ____/____/____ Lot Number: ____ - ____ Lead Operator: _____

Audit Time										
Condition of Salt If items marked with * are not within range, inform Engineer										
Appearance										
Bulk Density* < 0.87										
Clumping										
Moisture* > 0.5										
Process										
Mud pH* 6.0 - 7.99										
Equipment * <20.0		Dryer	Cooler*	Humidity	Dryer	Cooler*	Humidity	Dryer	Cooler*	Humidity
Reading				%			%			%
Packaging										
Type	Bag	S.S. #1	S. S. #2	Bag	S.S. #1	S. S. #2	Bag	S.S. #1	S. S. #2	
Product										
SCR Code										
Meets SCR Req.	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	
Weight Check (Record Weight)	1									
	2									
	3									
Drop Test (Pass / Fail)	1	P F	Temp		P F	Temp		P F	Temp	
	2	P F		P F	P F					
	3	P F	Humidity		P F	Humidity		P F	Humidity	
Seal	P F	P F		P F						
Artwork	P F	Rate of Tons		P F	Rate of Tons		P F	Rate of Tons		
Legibility of Print	P F		P F	P F						
Paperwork										
Digester Logs (2)										
Crystallizer Logs (2)										
Process Logs (2)										
Material Handler Log										
Dryer Temp. Logs (2)										
Pallet Count Log										
Auditor Signature										
Quality Issues					Safety Issues					

Reviewed By: _____ Date: _____

Controlled Document

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