

GILES CHEMICAL ~ PREMIER MAGNESIA

Company FORM

Title: Daily Clean Up for Manual Lines Number: R12-PR-100-F018

Owner: Lee Cagle Revision: 02
Effective Date: 06/19/14 Page: 1 of 1



Manual Line Cleaning Log

Manual 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.

	Manual Line #1	Manual Line #2	Manual Line #4								
	Shift #1	Shift #2	Shift #3								
Non-ci	ritical Contact Points:										
	Cleaned fill table with diluted Dawn detergent and then wiped it down with a damp rag.										
	Took the guide plates off the sealer and blew all salt and debris out with compressed air.										
	Cleaned the sealer with diluted Dawn detergent, wiped it down with a damp rag, and then air dried it.										
	Cleaned the sealer conveyor belt with diluted Dawn detergent, wiped it down with a damp rag, and then air dried it.										
	Cleaned the packing table with diluted Dawn detergent, wiped it down with a damp rag, and then air dried it.										
	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).										
	T										
<u>Critica</u>	al Contact Points:										
	Ensured the big bell was empty.										
	,,,										
	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 #1/ Hopper #3 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:	Da	to:								
	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:										
	Supervisor Signature.	Dt									
	Reviewed By: OA Initials:	Da	nte:								



GILES CHEMICAL ~ PREMIER MAGNESIA

Company Procedure

Title: Repackaging Daily Downtime Report Number: R13-FM-100-042

Owner: Monte Plott Revision: 02
Effective Date: 04/24/17 Page: 1 of 1



REPACKAGING DAILY DOWN TIME REPORT

PLEASE FILL IN	This is a Daily Log for the machine; this log is meant for documenting issues occurring on the machine during a shift For example, if scales were one of the top three issues, please note this on the appropriate line (and you should be scanning appropriately in Vorne) and explain what happened with the scales, what work has been attempted on the scales and how they were working at the change of shift									
Date:										
Lot #:	If there were no issues, the Notes for the Day section still needs to be filled out with any sort of communication helpful to the on-coming crewexample, "will be finishing up Product X an hour into the next shiftexpect a changeover"									
Line#:										
Operator:										
Process/Mechanical Issues	Daily Issues (if no issues, use N/A)									
Gripper Arms										
Combi										
Scales										
Seal bars/pouch seals										
ood bare, poder ood o										
Date Coder										
Labeler										
Other										
Notes for the Day: (anything that needs to be communicated to the on-coming shift about the machine or product)										
, , , ,										

(Please use the back of this document if more space is needed for further documentation)



GILES CHEMICAL ~ PREMIER MAGNESIA

Company Form

Title: Incoming Salt Inspection Form Number: R12-FM-100-006

Owner: Brook Vaughn Revision: 05

Effective Date: 9/1/16 Page: 1 of 1



INCOMING SALT INSPECTION FORM

Salt Hanger:						Date:	Date:				Hopper #:			_	
* DO	NOT CUT S	UPER SACK	IF THE FLO	N IS LESS	THAN 4. ON	ILY CUT S	SACKS WITH A	FLOW O	F 4 OR 5	IF NECE	SSARY AN	D WITH SUI	PERVISOR	APPROVA	\ <i>L</i> *
Vendor	Accept Y/N	Lot #	Time Dropped	Circle AM/PM	TIME MADE	Circle AM/PM	SACK DATE	OPER #	SACK #	TEMP	TEMP	Type of Salt	FLOW 1-5	*CUT (Initials or N)	CLEAN (Y-N)
1.				AM/PM		AM/PM									
2.				AM/PM		AM/PM									
3.				AM/PM		AM/PM									
4.				AM/PM		AM/PM									
5.				AM/PM		AM/PM									
6.				AM/PM		AM/PM									
7.				AM/PM		AM/PM									
8.				AM/PM		AM/PM									
9.				AM/PM		AM/PM									
10.				AM/PM		AM/PM									
Sunarvi	cor•						Paviova	d by O	ıalit v .						
Supervisor:					_ Keviewe	Reviewed by Quality:									