

Salt Hanger:

Supervisor:

GILES CHEMICAL ~ PREMIER MAGNESIA

Company Form

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

Owner: Lee Cagle Revision: 01

Effective Date: 05/29/14 Page: 1 of 1

Date:



Hopper #:

INCOMING SALT INSPECTION FORM																
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 (Y-N)	Sup. Initials	CLEAN (Y-N)
				AM/PM		AM/PM										
				AM/PM		AM/PM										
				AM/PM		AM/PM										
				AM/PM		AM/PM										
				AM/PM		AM/PM										
				AM/PM		AM/PM										
				AM/PM		AM/PM										
				AM/PM		AM/PM										
				AM/PM		AM/PM										
				AM/PM		AM/PM										
				AM/PM		AM/PM										
				AM/PM		AM/PM										
				AM/PM		AM/PM										
				AM/PM		AM/PM										
				AM/PM		AM/PM										
				AM/PM		AM/PM										
				AM/PM		AM/PM										
				AM/PM		AM/PM										
		· · · · · ·		AM/PM	-	AM/PM	-									
				AM/PM		AM/PM										
				AM/PM		AM/PM										

Reviewed by Quality:

Shift:

DO NOT CUT SUPER SACK IF THE FLOW IS LESS THAN 4. ONLY CUT SACKS WITH A FLOW OF 4 OR 5 IF NECESSARY AND WITH SUPERVISOR APPROVAL.