

NAME OF ORGANIZATION

Incoming or Outgoing Goods Carrier Inspection

Shipment Date: _____

Frozen Dry Goods

Circle Type of Carrier: Refrigerated

Carrier Company: _____

Name of Inspector: _____

Truck Identifier (Number or License): _____

	S/U	Corrective Action / Comment
Is the outside of the vehicle clean, free from damage and in good condition?		
Is the compartment seal (if applicable) in tact and undamaged.		Record Seal #
Does the interior of the compartment smell clean?		Record any off odours here and report to your supervisor immediately.
Is the temperature in the compartment satisfactory?		Record compartment temperature here. _____ If temperature is unsatisfactory, report to your supervisor immediately.
Are the containers, cartons and boxes properly stacked and undamaged.		
Is there any evidence of rodent, insect or other pest activity?		Record any observations here and report to your supervisor immediately.
Does the shipment include harmful or non-food items (where applicable)?		Record any observations here and report to your supervisor immediately.
Is the interior of the compartment in good condition, free from damage and clean?		

Remarks:

Onsite verification completed by:	Date:	Deviations/comments:
Record verification completed by:	Date:	Deviations/comments: