

# PRODUCT QUALITY CHECKLIST

## PRODUCT & REVIEW INFORMATION

Date :

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D	D	M	M	Y	Y

Item Description:

Time Checked:

Batch/Lot Number:

Supplier:

## ASSESSMENT CRITERIA (TICK WHERE APPLICABLE)

Appearance	:	<input type="checkbox"/> Acceptable	<input type="checkbox"/> Discolored	<input type="checkbox"/> Mouldy	<input type="checkbox"/> Spoiled	<input type="checkbox"/> N/A
Texture	:	<input type="checkbox"/> Acceptable	<input type="checkbox"/> Mushy	<input type="checkbox"/> Slimy	<input type="checkbox"/> Brittle	<input type="checkbox"/> N/A
Smell	:	<input type="checkbox"/> Normal/ No Odor	<input type="checkbox"/> Unpleasant & Mild	<input type="checkbox"/> Unpleasant & Strong	<input type="checkbox"/> Sour/ Rotten	<input type="checkbox"/> N/A
Packaging	:	<input type="checkbox"/> Intact	<input type="checkbox"/> Leaking	<input type="checkbox"/> Damaged	<input type="checkbox"/> Tampered	<input type="checkbox"/> N/A

Add additional comments/notes below related to the quality and condition of the inspected items

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## ACTIONS TAKEN

<input type="checkbox"/> Notified Management	<input type="checkbox"/> Moved to Refrigeration	<input type="checkbox"/> Discarded/ Destroyed	<input type="checkbox"/> Rejected from inventory	<input type="checkbox"/> Contacted Supplier
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Add additional comments/notes below

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Name & Signature



Principal Food Safety Ltd.

For additional free resources or to schedule a comprehensive food safety consultation to ensure all areas of your operation meet compliance standards, reach out to us at [info@principalfoodsafety.com](mailto:info@principalfoodsafety.com).

