



Product Inspection Report



<input type="checkbox"/> Standard Receipt (SR)		<input type="checkbox"/> SRS Inspection		SRS Requestor:		<input type="checkbox"/> First Article (FA)		<input type="checkbox"/> Delta FA		<input type="checkbox"/> AQL	
Part No:	Revision:	Drawing No:	Revision:	FA Approved		<input type="checkbox"/> Full FA		<input type="checkbox"/> Conditional FA			
Description:			Inspected by:	Final Reviewer:	**Waiver/Deviation if Conditional:						
Receipt/PO No(s):			QTY:	Supplier:	**Tool Number:	**Cavity Number:					
Date:	NMR No. as required:			FA Approver Name:				Date:			

QAP-Sampling				Inspection				Disposition(s):			Sample Inspection Results														
Balloon No:	Item No:	Char. Zone	MHS Code	QTY	Characteristic	Lower Limit	Upper Limit	Primary Method	Alternate Method	Accept	Reject	Waiver / Deviation	1	2	3	4	5	6	7	8	9	10	11	12	13
					Certificate of Conformance, as applicable*			Certification																	
					Supplier First Article Report Completed & Accepted as applicable*			Certification																	

\* Applicable is only when General C of C is acceptable  
 \*\* If Applicable