**Logistics Department**

**Loss and Damage Claims Procedure**

**QUALITY CONTROL REPORT**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Shipment Information | | | | | | | | | | | | | | | | | | | | | | | |
| Control Number: | | |  | | | Date: | |  | | | | | | | Created by: | | | | |  | | | |
| Supplier: |  | | | | | Carrier: | | |  | | | | | | Pro Number: | | | | | |  | | |
|  |  | | | | | | | | | | | | | | |  |  | | | | | | |
| Results | | | | | | | | | | | | | | | | | | | | | | | |
| We have completed our review of the above shipment. With the following results: | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | |  |  | | | | | | |
| Recommended Disposition | | | | | | | | | | | | | | | | | | | | | | | |
| **As a result of this inspection, our recommended disposition is as follows:** | | | | | | | | | | | | | | | | | | | | | | | |
| ❑ No apparent damage, will be placed in stock | | | | | | | | | | | ❑ Cosmetic or carton damage only | | | | | | | | | | | | |
| ❑ Return to Supplier | | | | | | | | | | | ❑ Total Loss | | | | | | | | | | | | |
| ❑ To be repaired internally | | | | | | | | | | | ❑ To be repaired by 3rd Party | | | | | | | | | | | | |
| ❑ Other Disposition: (Leave2 lines for explanation) | | | | | | | | | | |  | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | |  |  | | | | | | |
| Associated Costs | | | | | | | | | | | | | | | | | | | | | | | |
| ☐Inspection Cost: | | | | | Hours | |  | | | | | Cost/hour | |  | | | | | Total | | | | $ |
| ☐Testing Cost: | | | | | Hours | |  | | | | | Cost/hour | |  | | | | | Total | | | | $ |
| ☐Internal Repair Costs: | | | | | Hours | |  | | | | | Cost/hour | |  | | | | | Total | | | | $ |
| ☐Packing Material Cost: | | | | |  | |  | | | | |  | |  | | | | | Total | | | | $ |
| ☐Restocking Cost: | | | | | Hours | |  | | | | | Cost/hour | |  | | | | | Total | | | | $ |
| ☐Cost to dispose of damaged product | | | | | Hours | |  | | | | | Cost/hour | |  | | | | | Total | | | | $ |
| ☐Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | Hours | |  | | | | | Cost/hour | |  | | | | | Total | | | | $ |
| ☐Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | Hours | |  | | | | | Cost/hour | |  | | | | | Total | | | | $ |
|  | |  | | | | | | | | | | | | | |  |  | | | | | | |
| Additional Instructions | | | | | | | | | | | | | | | | | | | | | | | |
| **If damaged product is to be returned to the supplier for repair or credit, contact your Transportation/Logistics Department for instructions.** | | | | | | | | | | | | | | | | | | | | | | | |
| Report Prepared by: | | | |  | | | | | | Title: | | |  | | | | | Date: | | | |  | |