



<u>CHECK POINTS</u>	<u>SECURE</u>		<u>REMARKS</u>
1. OUTSIDE / UNDERCARRIAGE	_____	YES _____ NO _____	_____
2. INSIDE / OUTSIDE DOORS	_____	YES _____ NO _____	_____
3. RIGHT SIDE	_____	YES _____ NO _____	_____
4. LEFT SIDE	_____	YES _____ NO _____	_____
5. FRONT WALL	_____	YES _____ NO _____	_____
6. CEILING / ROOF	_____	YES _____ NO _____	_____
7. FLOORS (INSIDE)	_____	YES _____ NO _____	_____
<u>ADDITIONAL CHECK POINTS:</u>			
8. SEAL INTERGRITY / MATCHING	_____	YES _____ NO _____	_____
9. INTERIOR VENTS - OPEN <small>*Vents should not be covered by ceiling or walls.</small>	_____	YES _____ NO _____	_____
10. WALLS, CEILING & BEAMS <small>*Tap to check to confirm hollow sound</small>	_____	YES _____ NO _____	_____
11. PEST CONTAMINATION	_____	YES _____ NO _____	_____

*If YES, take pictures & Sweep or use Dry Vac-look in container as well as underneath. . Take sample if possible. Please also check loading dock area. Visually inspect the outside and inside for visible contaminants such as plants, seeds, insects, egg masses, snails, animals, animal droppings and soil.

Size of Container: 20 Ft. 40 Ft.

*****Unsatisfactory containers must not be used at any time. If the container is damaged or tampered with, it must be immediately reported to the proper authorities.**

DATE: _____

CONTAINER #: _____

CONTAINER SEAL #: _____

INSPECTOR'S NAME (1): _____

INSPECTOR'S NAME (2): _____