

United States Department of Agriculture Agricultural Marketing Service Quality Assessment Division 1400 Independence Avenue SW, Stop 0258 Washington, DC 20250

CONTRACTOR CHECKLOADING CHECKLIST

| Name of Shipping Facility and Establishment Number: | | | | | |
|--------------------------------------------------------------------------------------------------|-------------------------|------------------------------------------|-------------------------------------------------------|----------------|--|
| Company Address (Street | Date (MM/DD/YYYY): | | | | |
| | | | | | |
| | | Name of Checkloader: | | | |
| Purchase Order #:Sales Order #(s): | | Sales Ord | Sales Order Item #(s):Container Count: (By Item #) | | |
| | | | | | |
| | | | | | |
| 1) Container Count (Tota | 1 # of all Containara); | 2) Not Wain | the (Total word | at in nounda). | |
| 1.) Container Count (Total # of all Containers): | | 2.) Net Weight (Total weight in pounds): | | | |
| 2) 1 1 1 | | | | | |
| 3.) Labeling: PRODUCT TYPE | PRODUCTIO | PRODUCTION DATE TYPE OF STAMP | | | |
| | | | | | |
| 4.) Packing and Packaging (record # of damaged containers/corrective action in remarks): | | | | | |
| ACCEPTABLE? | REMARKS | | | | |
| Yes No | | | | | |
| 5.) Temperature Verification (record temperatures of product): | | | | | |
| | | | | | |
| 6.) Shipping Trailer Condition (record cooling unit temp & issues/corrective action in remarks): | | | | | |
| ACCEPTABLE? | REMARKS | REMARKS | | | |
| Yes No | | | | | |
| 7.) Palletization/Stacking (record any issues/corrective action in remarks): | | | | | |
| ACCEPTABLE? | REMARKS | | | | |
| Yes No | | | | | |
| 8.) Seal Number(s): | | | | | |
| STOP 1 | STOP 2 | 2 | | STOP 3 | |
| FOR USDA USE ONLY – Surveillance Visit Information: | | | | | |
| NAME OF REVIEWER | | SIGNATURE | | | |
| Type of Surveillance: Observat | Visit Type: Init | ial Make-up | or Follow-up | | |
| REMARKS | | | | | |
| | | | | | |

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