



INSPECTION RECORD CONTINUATION SHEET

Work Package No.: _____

Task No.: _____

CWP NUMBER:		DATE:				
QUALITY LEVEL:		<input type="checkbox"/> Q	<input type="checkbox"/> RS	<input type="checkbox"/> CC		
START UP SYSTEM NUMBER:		ITEM IDENTIFICATION:			UPF BLDG/AREA:	
REFERENCE DOCUMENT NO.	REV. NO.	REMARKS				
LIST OF COMPONENT INSPECTION ITEMS AND ATTRIBUTES INSPECTED PER THIS IRCS		ACCEPT	REJECT	N/A	FE/DATE	QCE/DATE
1.				<input type="checkbox"/>		
2.				<input type="checkbox"/>		
3.				<input type="checkbox"/>		
4.				<input type="checkbox"/>		
5.				<input type="checkbox"/>		
6.				<input type="checkbox"/>		
7.				<input type="checkbox"/>		
8.				<input type="checkbox"/>		
9.				<input type="checkbox"/>		
10.				<input type="checkbox"/>		
11.				<input type="checkbox"/>		
				<input type="checkbox"/>		
Comments:						
Field Engineer:					Date:	
Quality Control Engineer:					Date:	
Other (Start Up, Owner, FWE, PI):					Date:	