www.Inspection-for-Industry.com Quality Control Form	**Project:**	
	Client:	**Notification No.:**
INSPECTION NOTIFICATION	**Contractor:**	**Date:**
	Ref. Standard:	**Page** 1 **of** 1
	Doc. No.:	

Please be notified that the following activities will be executed and shall be inspected on date, time and location indicated below.

Item	Activity Description	Location	Date	Time	Inspected By		Remark
					Client	Contractor	

Technical Comment:

Quality Control	TPI Inspection	Client
Name: **Sign:** **Date**	**Name:** **Sign:** **Date**	**Name:** **Sign:** **Date:**