Sur-Seal®

Initial Sample Inspection Report

Supplier Information		Part Information		
Company Name	Sur-Seal Gasket & Packing, Inc	Part Number		
Address	6156 Wesselman Rd	Part Revision #		
	Cincinnati OH 45248	Part Description		Date Required:
		Reason for Evaluation:		

Supplier Point of Contact		Supplier Approval			
Name:		Name	Title	Signature	Date
Title:					
Email:					
Telephone:					
Fax					

SPECIFICATIONS								DATA								
								Inspection Results - 5 Piece Sample								
Dim. #	Characteristic Description	Target	Units	+ Tol	-Tol	Min	Max	1	2	3	4	5	MIN Sample	MAX Sample	Pass/Fail	Equipment Used
						0.0000	0.0000						0.0000	0.0000		
						0.0000	0.0000						0.0000	0.0000		
						0.0000	0.0000						0.0000	0.0000		
						0.0000	0.0000						0.0000	0.0000		
						0.0000	0.0000						0.0000	0.0000		
						0.0000	0.0000						0.0000	0.0000		
						0.0000	0.0000						0.0000	0.0000		
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						0.0000	0.0000						0.0000	0.0000		
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