

INITIAL SAMPLE INSPECTION REPORT



KNOTT BRAKE COMPANY
144 WEST DRIVE
LODI, OHIO 44254-1062
PHONE: (330) 948-0144
FAX: (330) 948-9222

VENDOR NAME: _____ DATE: _____

KBC PART NO.: _____ PART NAME: _____

DRAWING REV.: _____ CAVITY NO.: _____

(APPLIES TO CAST PARTS)

DIM NO.	DRAWING SPECIFICATION (INCLUDING TOLERANCE)	INSPECTION EQUIPMENT USED	ACTUAL MEASUREMENTS										OUT -OF- SPEC.	
			SAMPLE 1		SAMPLE 2		SAMPLE 3		SAMPLE 4		SAMPLE 5			
			VENDOR	KNOTT	VENDOR	KNOTT	VENDOR	KNOTT	VENDOR	KNOTT	VENDOR	KNOTT	VENDOR	KNOTT

SUPPLIER INSPECTED BY:	DATE:	NOTE: SUPPLIER MUST NOTIFY KBC OF OUT OF TOLERANCE DIMENSIONS BEFORE SHIPMENT
KNOTT BRAKE COMPANY INSPECTED BY:	DATE:	

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[illegible]

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[illegible]

KNOTT BRAKE COMPANY INITIAL SAMPLE INSPECTION REPORT

[illegible]

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