Bulk Receiving Form

Reviewed By:

Date _____

Name _____

									Quality Control				Bin Set/ Barn Spot		Operator	
Ingredient	Shipping Form #/ Weight Certificate	Arrival Time	Trailer License	Quantity Shipped	lbs Unloaded	In Tolerance? +/- 500lbs.	Truck Fumigation	Truck Empty Init.	Visual / Texture / Odor	% moist.	Dens.	Sample Taken?	No.	Init	Time Completed	Initial

Total Tons Received:

Notes: _____

Magnets Checked? Y/N	
Housekeeping Complete Y/N	