Synthetic Web and Roundsling Inspection Report

Company: _____ Distrib'r: _____
Address _____ Address: _____
City: _____ St: _____ ZIP: _____ City _____ St: ____ ZIP: _____

Insp Date: _____ Inspected by: _____ Dist. Contract _____

Dept.	Description	Lgth	Serial #	Inspection Result			CUT (Surf/Edge)	ABRASION	HOLE/SNAG/PULL	BURN (Heat/Chemical)	FITTING (Dmgd/Worn)	STITCHING	TAG	OTHER	COMMENTS
				OK	Reweb	Scrap									