

Car Quality Control Checklist

General Information

- **Company Name:** [Insert Company Name]
- **Vehicle Model:** [Insert Vehicle Model]
- **Inspection Date:** [Insert Date]
- **Inspector Name:** [Insert Inspector's Name]
- **Supervisor/Manager:** [Insert Supervisor/Manager Name]

Checklist Items

No.	Item/Task Description	Specification/Standard	Inspection Method	Status (Pass/Fail/NA)	Comments/Notes
1	Engine Performance	[Specify Standard]	[Performance Test]	[Pass/Fail/NA]	[Notes or Findings]
2	Brake System	[Specify Standard]	[Brake Test]	[Pass/Fail/NA]	[Notes or Findings]
3	Airbag Functionality	[Specify Standard]	[Diagnostic Test]	[Pass/Fail/NA]	[Notes or Findings]
4	Electrical Systems	[Specify Standard]	[Visual, Test]	[Pass/Fail/NA]	[Notes or Findings]
5	Tire Pressure	[Specify Standard]	[Measurement]	[Pass/Fail/NA]	[Notes or Findings]

	and Condition				
6	Body Paint and Finish	[Specify Standard]	[Visual Check]	[Pass/Fail/N A]	[Notes or Findings]
7	Interior Appearanc e	[Specify Standard]	[Visual Check]	[Pass/Fail/N A]	[Notes or Findings]

Inspector and Supervisor Sign-off

Inspector Name	Signature	Date
[Insert Name]	[Insert Signature]	[Insert Date]

Supervisor Name	Signature	Date
[Insert Name]	[Insert Signature]	[Insert Date]