

XYZ Chemicals Design Review Form

Review By _____ Attendees, if Meeting Called _____ Product Name _____	Design Control Job # _____ Review date _____ Attach copy of Contract Review if performed.						
Product Proposed - Feasibility							
Is product based upon a current product? _____ If so, what current product? _____							
Proposed Formula(s) _____ Stated customer requirements including attribute or performance requirements _____ Test procedure defined _____ Where tested & by who? _____ Test results & where filed _____ Is product stable in final form? _____							
General Product Design Concerns							
Note any unusual product concerns _____ _____							
Employee Concerns							
Note any unusual employee concerns (eg.: protection required) _____ _____							
Environmental & Regulatory Concerns							
Note any unusual environmental or regulatory concerns _____ _____							
Packaging & Storage Concerns							
Note any unusual packaging & storage concerns _____ _____							
Transportation Concerns							
Note any unusual transportation concerns _____ _____							
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%;">Formula Approved _____</td> <td style="width: 40%;">Date _____</td> </tr> <tr> <td>Initial Batch Sheet Initiated _____</td> <td>Date _____</td> </tr> <tr> <td>Approval for plant production _____</td> <td>Date _____</td> </tr> </table>		Formula Approved _____	Date _____	Initial Batch Sheet Initiated _____	Date _____	Approval for plant production _____	Date _____
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Initial Batch Sheet Initiated _____	Date _____						
Approval for plant production _____	Date _____						

A simple example.
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 Date of Origin: 2/12/97
 Originator: Mr. Xyz