SAMPLE FORMS

Sample

QC Inspection Form QC -1(a)

Primary Sealant Type_____ Supplier _____

Date	Batch #	Application Temperature	Bond to Spacer	Bead size average	Initial

Inspection Frequency: Twice daily and when new batch used in production

Sample
QC Inspection Form QC -1(b)

Two-Part Sealant Type_____Supplier _____

Date	Base Batch #	Acc. Batch #	Mix	Stick Life	Adhesion			Initial
					Spacer	Connector	Glass	

Inspection Frequency: Twice daily and when new container used in production

Sample
QC Inspection Form QC -1(c)

Hot Melt Sealant Type_____ Supplier _____

Date	Batch #	Temperature Setting	Applied Temperature	Appearance	Adhesion	Initial

Inspection Frequency: Twice daily and when new container used in production

Sample

QC Inspection Form QC -1(d)

Organic Spacer: Adhesion and desiccant activity Type_____ Supplier _____

Date	Batch #	a) Adhesion Test		b) Desiccant Activity		Initial
		Pass	Fail	Pass	Fail	

Inspection Frequency: a) when new drum is opened b) once per week and every time new drum is opened

Sample

QC Inspection Form QC – 2a

Desiccant Type_____ Supplier _____

Date	Batch #	Water Temperature	Temperature Rise	Temperature Difference	Sample From	Initial

Inspection Frequency: Once per week and every time production ceases for more than 24 hours

Sample

QC Inspection Form QC – 2b

ACPF Calculation Type_____ Supplier _____

Date	Batch #	Weight of Desiccant Product or Organic Spacer (g)	Adsorption Capacity (wt%)	Perimeter Feet	ACPF (grams/ ft.) = Weight of Desiccant Product (g) x Adsorption Capacity (wt %) / Perimeter (Feet) x 100	Initial

Inspection Frequency: Once per week and every time production ceases for more than 24 hours.

Sample
QC Inspection Form QC - 3

Spacer and Connector Type_____ Supplier _____

Date	Lot #	Type #	Surface Condition	Average Width Spacer	Corner Key (connector) fit	Assembled Width	Initial

Inspection Frequency: Upon receipt of new material

Sample
QC Inspection Form QC - 4

Date _____
Initial _____

Glass (cut sizes) record rejects only

Thickness	Type	Width	Height	Surface	Squareness	Edges	Reject

Inspection Frequency: 2% or 5 lites per shift, whichever is higher

Gas Filling Inspection

Sample
QC Inspection Form QC - 5

Date _____
Inspection Quantity _____
Rejected _____
Initials _____

IGMAC Certification I.D:.

Product Configuration: Connector Code_____Spacer Code:_____Desiccant Code:_____Primary / Secondary Sealant: _____

Procedure for the Determination of Gas Fill Concentration (ie. Gas Chromatograph, Ozygen Analyzer, GasGlass, Other)

Instrument Calibration Date:_____ Previous Instrument Calibration Date: _____

Ordered Size	Length	Width	Spacer Position	Thickness	Airspace	Glass Edges	Primary Sealant	Secondary Sealant	Glass Coating	Desired % Fill	Actual % Fill	Disposition

Inspection Frequency: Per Appendix 1, Article E (2)

Non Conforming and Finished Product Inspection

Sample

QC Inspection Form QC - 6

Record details of defects only and action taken

Date _____
Production Quantity _____
Inspection Quantity _____
Rejected _____
Initials _____

MEASURE VISUAL INSPECTION

Ordered Size	Length	Width	Spacer Position	Thickness	Alignment	Cavity	Glass Edges	Primary Sealant	Secondary Sealant	Minimum MVT Path	IGMAC I.D.	Action and Disposition of Non Conforming Product

Inspection Frequency: Per Appendix 1, Article E (2)

Calibration Log for Measuring & Testing Devices Sample QC Inspection Form QC - 7

Date of Calibration	Description of Measuring & Testing Device	Device ID	Calibration Standard or Procedure	Certificate or Report Number	Date to be Recalibrated

Employee Training Log **SAMPLE** **QC Inspection Form – QC-8**

Employee Name: _____

Department:____ Position:

_____

Date of Training	Area for Training Focus	Training Objectives	Type of Training (online, classroom etc.)	Verification Method of Effectiveness
	Manufacturing Processes:			
	Quality Processes			
	Health & Safety:			
	Other:			