

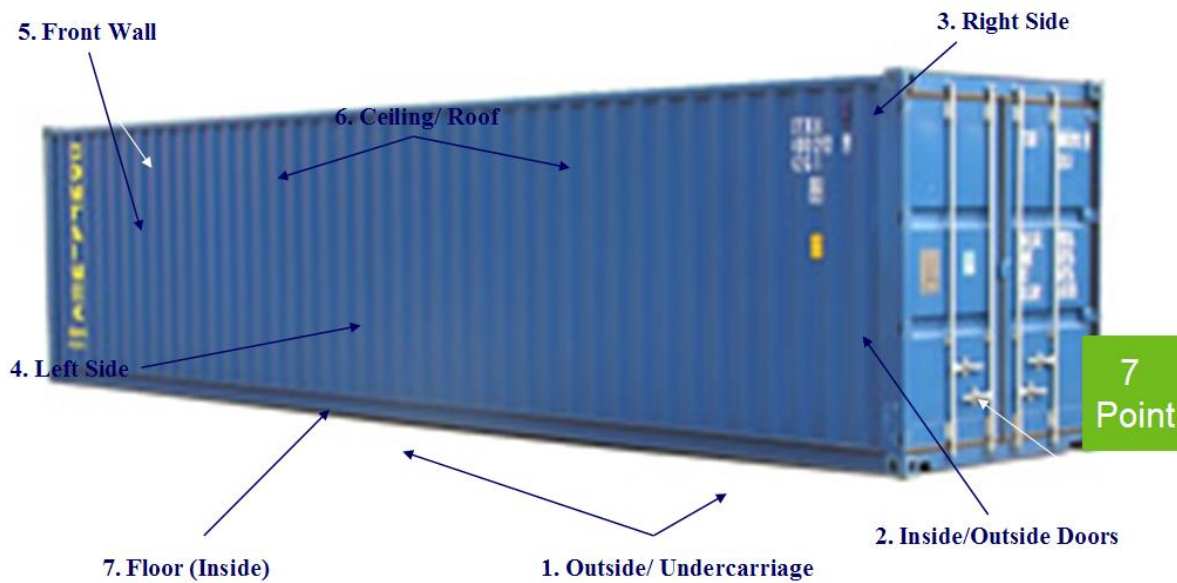


TRANSCONTINENTAL DISTRIBUTION SERVICES, INC.

Container and Seal Inspection Sheet

Client Name: _____	
CONTAINER NUMBER: _____	seal No. _____
High security seal (Y/N) : _____	Seal affixed properly/ verified (Y/N): _____
7 POINT INSPECTION	STATE CONDICTION: GOOD/BAD/COMMENT _____
FRONT WALL :	LEFT SIDE:
RIGHT SIDE:	FLOOR:
CEILING/ROOF:	INSIDE/OUTSIDE DOOR:
OUTSIDE / UNDERCARRIAGE:	
Container reviewed by:	
Date/ Time of review:	
Seal reviewed by:	
Date/ Time of review:	

7-Point Container Inspection



AF-RM-09 Rev 1

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