



SLS INSPECTION VERIFICATION TECHNIQUE SHEET

CUSTOMER: Arrowhead Products

PART NUMBER:

INITIATED BY:

Dwg Rev:

DATE:

1. PART FEATURE DESIGNATION & DESCRIPTION:

SPECIFICATION REQUIREMENT:

VERIFICATION EQUIPMENT/DEVICE TO BE USED:

VERIFICATION TECHNIQUE TO BE FOLLOWED:

APPROVED BY: AP QE _____

DATE: _____

2. PART FEATURE DESIGNATION & DESCRIPTION:

SPECIFICATION REQUIREMENT:

VERIFICATION EQUIPMENT/DEVICE TO BE USED:

VERIFICATION TECHNIQUE TO BE FOLLOWED:

APPROVED BY: AP QE _____

DATE: _____