

Jackson State University

PACKAGE SURVEY FORM

DATE SURVEYED:_____ SURVEYOR:_____

PURCHASE ORDER:_____ LOT NUMBER:_____

Condition of Package:

Check all that apply

___OK ___PUNCTURED ___WET ___CRUSHED ___OTHER

Contents of Package agrees with shipping papers:

YES___ NO___ EXPLAIN_____

Survey Meter:

Manufacturer:_____ / _____

Model:_____ / _____

Serial:_____ / _____

Background Reading:_____mR/Hr / _____CPM

Efficiency:_____ / _____

External Survey: Surface_____mR/Hr 3 feet_____mR/Hr

Swipes: Outer_____CPM Internal_____CPM