

APPENDIX D: Annual Calibration Check/Verification

Date _____

Date of the Previous Calibration Check _____

	Test Weight	Weight at previous Calibration	Weight at Current Calibration	Acceptable unacceptable
1				
2				
3				
4				
5				
6				
7				
8				

Reviewed by: _____ Date: _____

Date _____

Date of the Previous Calibration Check _____

	Test Weight	Weight at previous Calibration	Weight at Current Calibration	Acceptable unacceptable
1				
2				
3				
4				
5				
6				
7				
8				

Reviewed by: _____ Date: _____