



ELECTRICAL TOOL TAG & TEST REGISTER

FAIL REGISTER

Date :

Tester's Name:

Signature:

IMAGE ONE	IMAGE TWO	DETAILS														
		<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%; border-bottom: none;">Item ID:</td> <td style="border-bottom: none;">Item Description:</td> </tr> <tr><td style="border-bottom: none;"> </td><td style="border-bottom: none;"> </td></tr> <tr><td style="border-bottom: none;"> </td><td style="border-bottom: none;"> </td></tr> <tr><td style="border-bottom: none;"> </td><td style="border-bottom: none;"> </td></tr> <tr><td style="border-bottom: none;"> </td><td style="border-bottom: none;"> </td></tr> <tr><td style="border-bottom: none;"> </td><td style="border-bottom: none;"> </td></tr> <tr><td style="border-bottom: none;"> </td><td style="border-bottom: none;"> </td></tr> </table>	Item ID:	Item Description:												
		Item ID:	Item Description:													
Will this item be disposed or repaired:																

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