

Furniture Inventory Damage Assessment Checklist Template

 Show only Checklist

Display Style
Default 

Item Identification

Verify item details match inventory records.

Item ID

Enter a number...

Item Name

Write something...



Item Category

- Chairs
- Tables
- Sofas
- Beds
- Storage
- Outdoor

Date of Entry

Enter date...

Manufacturer

Write something...

Quantity

Enter a number...

Model Number

Write something...

Initial Condition Assessment

Document pre-existing conditions upon receipt or setup.

Date of Assessment

Time of Assessment

Quantity Received

Packaging Condition

- Excellent
- Good
- Fair
- Damaged

Detailed Description of Packaging

Write something...

Item Appearance

- New
- Like New
- Shows Wear

Damage Identification

Detailed inspection for scratches, dents, tears, or other damage.

Description of Damage (e.g., scratch length, dent size)

Write something...

Measurement of Damage (e.g., scratch depth in mm)

Enter a number...

Type of Damage

- Scratch
- Dent
- Chip
- Tear
- Crack
- Stain
- Other

Upload Photo of Damage

 Upload File

Quantity of Damage Instances

Enter a number...

Location of Damage on Item

- Top
- Bottom
- Side
- Front
- Back
- Edge

Damage Severity Rating

Categorize damage severity (Minor, Moderate, Major).

Overall Damage Severity

- None
- Minor
- Moderate
- Major
- Catastrophic

Estimated Repair Cost (\$)

Impact on Usability

- No Impact
- Minor Impact
- Moderate Impact
- Significant Impact

Detailed Description of Severity

Potential for Further Deterioration?

- No
- Possible
- Likely

Photographic Evidence

Capture images of all identified damage.

Overall Item Photo

 Upload File

Photo of Damage - Area 1

 Upload File

Photo of Damage - Area 2

 Upload File

Close-up Photo of Damage Detail

 Upload File

Image Sequence Number

Enter a number...

Photo Description

Write something...

Cause of Damage (if known)

Record any known cause of damage (shipping, handling, etc.).

Shipping Related

- Impact Damage
- Moisture Damage
- Poor Packaging
- Handling Errors

Handling Related

- Employee Mishandling
- Customer Damage
- Incorrect Storage

Detailed Explanation (optional)

Write something...

Assembly/Installation Related

- Incorrect Assembly
- Installation Error

Severity Score (1-10)

Enter a number...

Reporting & Resolution

Document actions taken regarding the damage (claim filed, repair requested).

Claim Filed with Supplier?

Yes

No

Resolution Method Selected

Repair

Replacement

Credit

Write-off

Detailed Description of Resolution Plan

Write something...

Date Resolution Plan Initiated

Enter date...

Estimated Repair/Replacement Cost (if applicable)

Enter a number...

Additional Notes/Comments regarding Resolution

Write something...

Final Status

Confirm final disposition of the item (repaired, replaced, scrapped).

Disposition

- Repaired
- Replaced
- Scrapped
- Sold As-Is

Date of Resolution

Enter date...

Resolution Details

Write something...

Replacement Cost (if applicable)

Enter a number...

Claim Status (if applicable)

- Claim Filed
- Claim Approved
- Claim Denied
- No Claim Filed

Claim Reference Number (if applicable)

Write something...