



Order Picking Process Verification Checklist

 Show only Checklist

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Default 

Pre-Shift Preparation & Documentation

Ensures proper setup and adherence to pre-pick procedures.

Date of Verification

Enter date...

Start Time of Verification

Enter time...



Shift Assigned?

- ☐ Day Shift
- ☐ Night Shift
- ☐ Other

Picking List Availability

- ☐ Available
- ☐ Not Available
- ☐ Partial Availability

Number of Picking Lists Reviewed

Enter a number...

Comments on Picking List Clarity & Format

Write something...

Warehouse Map Available?

- ☐ Yes
- ☐ No

Any discrepancies noted in pre-shift documentation?

Write something...

Upload Sample Picking List (if applicable)

 Upload File

Picking Route Optimization & Navigation

Evaluates the efficiency and clarity of picking routes.

Average Pick Time Per Order (Minutes)

Enter a number...

Distance Traveled Per Order (Meters/Feet - specify unit)

Enter a number...

Navigation System Used (if applicable)

- ☐ Paper Route Sheet
- ☐ Pick-to-Light
- ☐ Voice Picking
- ☐ RF Scanner with Route Optimization
- ☐ None

Navigation Challenges Observed (Select all that apply)

- ☐ Obstructions in Aisle
- ☐ Poor Signage
- ☐ Confusing Layout
- ☐ Inefficient Route
- ☐ No Challenges Observed

Detailed Description of Route Optimization Suggestions

Write something...

Aisle Width Adequacy

- ☐ Adequate
- ☐ Marginal
- ☐ Inadequate

Accuracy Verification - Item Identification & Selection

Confirms correct item selection and quantity picked.

Were SKUs picked based on the correct picking list?

- ☐ Yes
- ☐ No
- ☐ Partially - Needs Review

Number of items incorrectly picked (wrong item)

Enter a number...

Number of items picked in incorrect quantity

Enter a number...

Describe any discrepancies found in item identification or selection.

Write something...

Was the correct packaging used for the selected item(s)?

- ☐ Yes
- ☐ No
- ☐ N/A

Was the batch/expiry date verified (if applicable)?

- ☐ Yes
- ☐ No
- ☐ N/A

Upload a sample of a picked order for review (optional).

 Upload File

Scanning & Data Capture

Validates the accuracy and completeness of scan data.

Number of Scans Performed

Enter a number...

Scanner Functionality - Operational?

- ☐ Yes
- ☐ No
- ☐ Partial/Intermittent

Scanner Error Messages Encountered (if any)

Write something...

Percentage of Items Successfully Scanned

Enter a number...

Scanning Issues Observed (Select all that apply)

- ☐ Poor barcode quality
- ☐ Scanner connectivity issues
- ☐ Item obstructed from scanner
- ☐ Incorrect item scanned
- ☐ None

Detailed description of any scanning discrepancies found.

Write something...

Was Item Quantity Verified Through Scan?

☐ Yes

☐ No

☐ N/A

Order Consolidation & Packaging

Assesses the quality of order consolidation and packaging.

Number of boxes used per order

Enter a number...

Average package weight (kg)

Enter a number...

Package type used (e.g., cardboard, polybag)

- ☐ Cardboard Box
- ☐ Polybag
- ☐ Envelope
- ☐ Special Packaging

Packaging materials used (Check all that apply)

- ☐ Bubble Wrap
- ☐ Packing Peanuts
- ☐ Air Pillows
- ☐ Void Fill Paper
- ☐ Tape

Describe the condition of packaging materials used (e.g., clean, damaged)

Write something...

Is the packaging suitable for the product?

- ☐ Yes
- ☐ No

If 'No', describe why the packaging is unsuitable.

Write something...

Upload photo of packed order (optional)

 Upload File

Safety & Ergonomics

Evaluates safety protocols and ergonomic practices during picking.

Noise Level (dB) at Picking Station

Enter a number...

Adequacy of Lighting

- ☐ Excellent
- ☐ Good
- ☐ Fair
- ☐ Poor

PPE Usage (Check all that apply)

- ☐ Safety Shoes
- ☐ Gloves
- ☐ High-Vis Vest
- ☐ Safety Glasses
- ☐ Hearing Protection
- ☐ Not Applicable

Observations regarding awkward postures or repetitive movements

Write something...

Floor Condition

- ☐ Clean & Dry
- ☐ Slightly Wet
- ☐ Slippery
- ☐ Damaged

Lifting Assistance Used (Number of times)

Enter a number...

Equipment & Tools

Checks the functionality and maintenance of picking equipment.

Forklift Battery Charge Level (if applicable)

Enter a number...

Pick List Device - Condition

- ☐ Good Working Order
- ☐ Minor Issues
- ☐ Requires Maintenance

Scanner Read Rate (Successful Scans / Attempts)

Enter a number...

Pallet Jack/Cart Condition

- ☐ Excellent
- ☐ Fair
- ☐ Poor - Requires Repair

Any equipment malfunctions noted?

Write something...

Last Equipment Maintenance Date

Enter date...

Picking Carts – Functionality

- ☐ All Wheels Functioning
- ☐ One Wheel Malfunctioning
- ☐ Multiple Wheels Malfunctioning

Process Adherence & SOP Compliance

Verifies adherence to standard operating procedures (SOPs).

Is the Picking List reviewed and verified before commencing?

- ☐ Yes
- ☐ No
- ☐ N/A

Are pickers using the designated picking route?

- ☐ Yes
- ☐ No
- ☐ Partially

Number of documented deviations from SOPs observed during this verification.

Enter a number...

Describe any deviations from SOPs observed (if any).

Write something...

Is the correct picking method being utilized (e.g., batch picking, zone picking)?

- ☐ Yes
- ☐ No
- ☐ N/A

Which SOPs were observed to be followed correctly?

- ☐ SOP-PICK-001: Picking List Review
- ☐ SOP-PICK-002: Picking Route Adherence
- ☐ SOP-PICK-003: Scanning Procedure
- ☐ SOP-PICK-004: Safety Equipment Usage
- ☐ SOP-PICK-005: Palletization Standards

Were safety guidelines and procedures followed correctly?

- ☐ Yes
- ☐ No
- ☐ N/A

Exception Handling & Returns

Reviews processes for dealing with discrepancies, damaged goods, and returns.

Number of discrepancies found during pick verification.

Enter a number...

Types of exceptions encountered (select all that apply).

- ☐ Incorrect Item
- ☐ Insufficient Quantity
- ☐ Damaged Goods
- ☐ Missing Item
- ☐ Labeling Error
- ☐ Other (Specify in LONG_TEXT)

Details of 'Other' exceptions (if selected above).

Write something...

Resolution for damaged goods (select one).

- ☐ Return to Vendor
- ☐ Repackage & Ship
- ☐ Discount & Ship
- ☐ Discard

Description of the return reason (if applicable).

Write something...

Return authorization process followed?

☐ Yes

☐ No

Date of return authorization

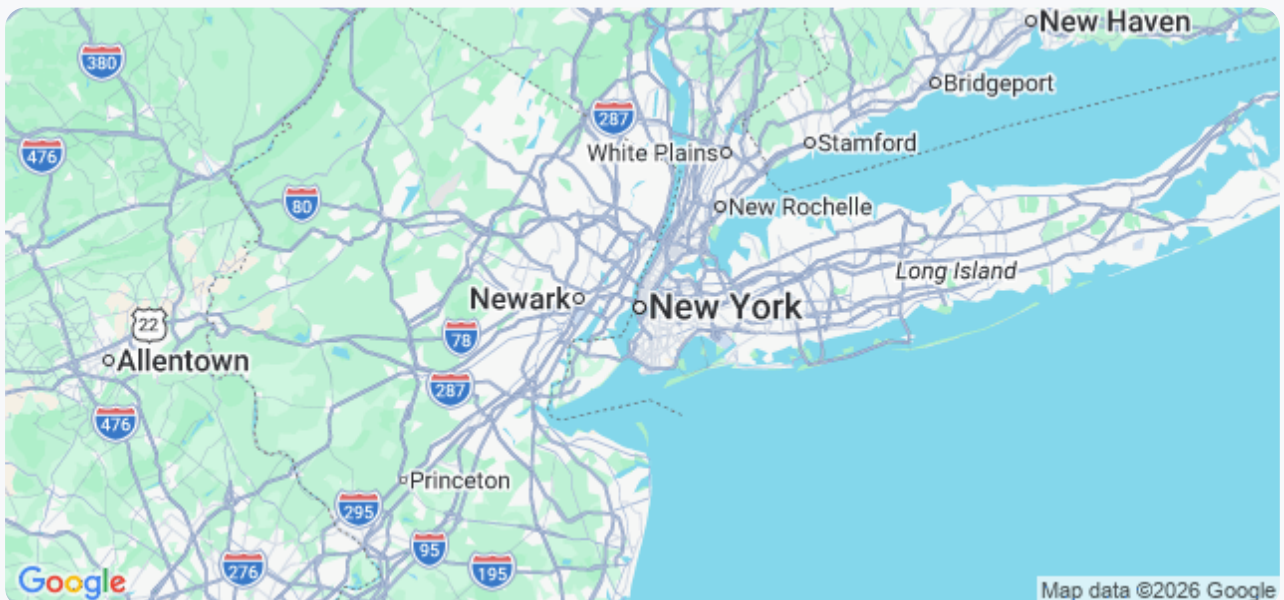
Enter date...

Time return process initiated

Enter time...

Location of returned goods staging area

 [Set My Current Location](#)



Post-Shift Procedures & Documentation

Confirms proper closure of picking tasks and documentation.

Shift End Time Recorded?

Number of Orders Picked Today:

Note any issues or discrepancies encountered during the shift:

Picking Equipment Returned to Designated Area?

☐ Yes

☐ No

☐ N/A

Were any damaged pallets or materials noted?

- ☐ Pallet Damage
- ☐ Packaging Damage
- ☐ Material Shortage
- ☐ None

Area Cleanliness Verified?

- ☐ Yes
- ☐ No

Date of Verification

Enter date...

Verifier Signature