POS DEVICE INSPECTION CHECKLIST

Procedure for Periodically Inspecting Devices Periodic inspections detect tampering, skimming or substitution of card-reading devices and terminals. Insert your name, date and check (Y/N*) for inspection references as you do each monthly inspection. *If the device has been locked up and has not been used since the previous monthly inspection, enter a Y in the first inspection reference column and leave the remaining columns empty, otherwise leave blank and answer remaining inspection references.*

Frequency of Inspections You must perform a physical inspection on each active device using this form at least monthly. Daily or periodic visual inspections should be done prior to using if POS device is used more frequently.

Department/Merchant ID: _____

Device Location/Status: _____

Device Make/Model: _____

Device Serial Number: _____

Name	Date	Device unused since last inspection?	Is device where it is supposed to be?	Make & Model match?	Serial Number match?	Are tamper evident stickers intact? (if applicable)	Is device free of visible stress marks on seams or window display?	Is device free of wires or foreign objects?
		Y or blank	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
		Y or blank	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
		Y or blank	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
		Y or blank	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
		Y or blank	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
		Y or blank	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
		Y or blank	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
		Y or blank	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
		Y or blank	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
		Y or blank	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
		Y or blank	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
		Y or blank	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
		Y or blank	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
		Y or blank	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
		Y or blank	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
		Y or blank	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N

*An inspection reference that receives an N response indicates an anomaly and need for further investigation. Any evidence of tampering must be reported to your Department Merchant Liaison.