GMP Checklist

Audit checklist according to ISO 22716 — Good Manufacturing Practice for Cosmetics

Company: _____ **Audit date:** _____

1. Personnel and Training	Yes	No	Remarks
Job profiles documented for all employees	☐	☐	
At least one qualified responsible person on site	☐	☐	
GMP training completed (within the last 2 years)	☐	☐	
Training records documented and archived	☐	☐	
Hygiene guidelines signed by all employees	☐	☐	

2. Premises and Infrastructure	Yes	No	Remarks
Separate areas for: raw material storage, production, finished goods storage	☐	☐	
Temperature control in production area (20-25 °C)	☐	☐	
Humidity controlled (max. 60%)	☐	☐	
Surface cleaning documented daily	☐	☐	
Wastewater disposal regulated according to requirements	☐	☐	
Pest control in place and documented	☐	☐	

3. Equipment and Maintenance	Yes	No	Remarks
All equipment recorded (scales, stirrers, mixers, etc.)	☐	☐	
Calibration of all measuring instruments current (max. 12 months)	☐	☐	
Maintenance plan available for all equipment	☐	☐	
Equipment cleaning procedures documented	☐	☐	

4. Raw Materials and Storage	Yes	No	Remarks
Supplier certificates available (Certificate of Analysis)	☐	☐	
LOT tracking implemented for all raw materials	☐	☐	
Storage conditions documented and monitored	☐	☐	
Expired raw materials sorted out and documented	☐	☐	
Raw material master data current (INCI, CAS, hazards)	☐	☐	

5. Production and Documentation	Yes	No	Remarks
Mixing protocols available for every batch	☐	☐	
Target/actual comparison documented in every protocol	☐	☐	
Quality control performed (pH, colour, consistency)	☐	☐	
Deviation management / CAPA process in place	☐	☐	
Signatures on all protocols (manufacturer and reviewer)	☐	☐	

6. Archiving and Traceability	Yes	No	Remarks
Mixing protocols archived (min. 10 years, EU Reg. 1223/2009)	☐	☐	
Archive protected from unauthorised access	☐	☐	
Full batch traceability possible	☐	☐	

7. Risk and Audit	Yes	No	Remarks
Risk assessment performed for all products	☐	☐	
Internal audits scheduled (at least once per year)	☐	☐	
Corrective action tracking in place and current	☐	☐	

Audit Result

☐ Passed — All requirements met

☐ Passed with deviations — Deadlines for corrections agreed

☐ Failed — Immediate action required

Agreed Actions / Deadlines:

(Actions, responsible persons, deadlines)

Auditor:

Name, Date, Signature

Responsible Person:

Name, Date, Signature