SUPPLIER QUALITY SYSTEM SURVEY TPC-ASM-PUR-742 - REV 1 - 1.31.2023								
Company Name:								
Street Address:				City:				
State:		Zip:		Country:				
Telephone:					Fax:			
Primary Products/Services:								
Type of Business:	Manufacturing	Distributor	Special Process	Testing/NDT/ Metallurgical Service	OTHER - EXPLAIN:			
Number of Employees:	Number of Inspectors:							
Quality Assurance Contact:								
Which Specification/Standards does your Quality System conform to: (check all that apply)	MIL-I-45208A	MIL-STD-9858A	ISO 9001	AS9100	NADCAP	OTHER - EXPLAIN:		
NOTE: If you are currently certified to ISO or AS standards, STOP HERE. Please If you are <u>not</u> certified to ISO or AS standards, do you plan on becoming certified in the near future?			e send a copy of the Certification(s) and sign the bottom of this questionairre. YES NO					
PLEASE CHECK THE APPROPRIATE BOX FOR EACH QUERY BELOW: 1) Are the policies and objectives clearly defined, documented and understood throughout the organization?			YES	NO	N/A	NOTES		
Is there a defined quality organization and does this organization report directly to upper management?								
3) Does a member of management periodically review and approve the policies and objectives?								
Do you maintain a Quality Manual?						Rev Level & Date:		
5) Do you maintain quality procedures?								
6) Are all contracts and customer's purchase orders reviewed to assure that requirements are defined and that you are capable of meeting them?								
7) Do you control all documents and data that relates to the requirements of the purchase order to assure that pertinent issues are available at all locations and that obsolete documents are removed from use?								
8) Are changes to documents authorized, approved and controlled to assure use of the correct revision?								
Do you select subcontractors on the basis of their ability to meet purchase order requirements?								
10) Are quality system requirements flowdown to subcontractors?								
11) Are all purchasing documents reviewed and approved for adequacy of specified requirements prior to release?								
12) Do your procedures for customer-supplied products include identification and traceability of products?								
13) Have you established a system for maintaining the identification and traceability of products?								
14) Does quality monitor the preparation, maintenance, and compliance of the work instructions, including procedures for special process?								
15) Are documented work instructions available for all operations including documented criteria for workmanship?								
16) Are personnel properly trained and certified, as required, to perform special processes?								
17) Are all incoming shipments inspected to specification and purchase order requirements including dimensional chemical, physical and process requirements?								
18) Are there procedures which define the in-process inspection and testing points?								
19) Does the vendor have written procedures to control the final acceptance of products or services and that shipping documents are correct?								
20) Are records maintained that indicate that the product has been tested or inspected to the defined acceptance criteria and passed?								
21) Do you control, calibrate and maintain inspection, measuring and test equipment whether owned by the subcontractor, on loan or provided by the purchaser, to demonstrate the conformance of product to specified requirements?								
22) All calibrations are performed utilizing standards whose calibration is certified as being traceable to the National Institute of Standards and Technology and are records maintained to support the systems?								
23) Does the vendor have an effective system for identifying the inspection status of products?								
24) Does the vendor have an effective and positive system for controlling nonconforming materials, including procedures for identification, segregation, evaluation and disposition of rework or repaired products?								

							
PLEASE CHECK THE APPROPRIATE BOX FOR EACH (YES	NO	N/A	NOTES		
25) Does the vendor maintain a system of corrective and preventive action, correcting assignable conditions which have resulted or could result in the producing of nonconforming product?							
26) Are there documented procedures for handling, storage, packaging, preservation and delivery of goods?							
27) Do you maintain procedures for identification, collection, indexing, filing, storage, maintenance, and disposition of quality records?							
28) Are these records legible, current, accurate, complete and readily available for review?							
29) Is there a system for performing internal quality audits and does Management take timely corrective action on deficiencies?							
30) Does the vendor maintain a procedure/program of training and qualification of all personnel affecting quality?							
31) If servicing is required by contract, are there procedures for performing the servicing and verification to assure that specified requirements are met?							
32) Are there documented procedures for implementing and controlling the application of statistical techniques?							
Quality Representative Name & Title			1	1			
Quality Representative Signature & Date							
Company Management Name & Title							
Company Management Signature & Date							
It is my understanding that the responses to this Subcontractor Quality Survey Questionnaire are subject to verification by ASM Aerospace Specification Metals Quality Assurance personnel. I certify the information supplied in this questionnaire are true and complete.							
THIS SECTION FOR ASM AEROSPACE SPECIFICATION METALS ONLY							
Director of Operations / President Review and Approval Required - Please sign, indicate risk level, and return to Quality@AerospaceMetals.com Email in lieu of signature is acceptable; Typed signatures are acceptable							
Management Approval:							
Risk Level of Supplier: (1 / YELLOW = LOW LEVEL, SUPPLIER IS EASILY REPLACED 2 / BLUE = MEDIUM LEVEL, IMPORTANT TO ORGANIZATION BUT REPLACEABLE 3 / RED = STRATEGIC & ESSENTIAL TO ORGANIZATION)							
Approval Comments:							