



SUPPLIER QUALITY SYSTEM SURVEY

Section 1 - Supplier Information

<input type="checkbox"/> Initial Qualification	<input type="checkbox"/> Re-Qualification
As a current or potential supplier to Continental Machining Co., Inc, please complete this survey and return it within 5 days from receipt.	
Please respond to each question by marking the appropriate answer and providing supplemental comments, as applicable. We thank you in advance for your participation in this program.	
Please Return To:	Continental Machining Co., Inc. Attn: Quality Manager 6824 Washington NE Albuquerque, NM 87109
	Phone: (505) 345-2483 Fax: (505) 345-2714 Email: cmcquality@swcp.com

Supplier Name:
Street:
City: State:
Zip Code: Country:
Web Address: Main Phone:

Classification: Manufacturer Distributor Special Processor Raw Material Service Processor
Refer to applicable flow-down requirement from Continental Machining Co., Inc. website:
<http://continentalmachiningco.com> (see Supplier Quality Provisions)
Primary Business Scope (Product/Process)

Business Established (yyyy):	Size of Office/Manufacturing (Sq. Ft.):
Total Number of Employees:	Number of Shifts:
Number of Production Employees:	Number of Quality Dept. Employees:
Is your organization ITAR registered?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If yes, please attach copy)</i>
Is there an Organization Chart available?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If yes, please attach copy)</i>
Is there a Quality Manual available?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If yes, please attach copy)</i>

Please indicate the quality systems to which you are registered / approved:

<input type="checkbox"/> ISO 9001 - Expiration Date:	<input type="checkbox"/> AS 9120 - Expiration Date:
<input type="checkbox"/> AS 9100- Expiration Date:	<input type="checkbox"/> NADCAP - Expiration Date:
<input type="checkbox"/> ISO/TS 16949 - Expiration Date:	<input type="checkbox"/> Other Expiration Date:

(If yes to any of the above certification, please attach a copy)

Not currently certified, but actively pursuing with planned date to achieve certification:
Date (MM/DD/YYYY) To ISO 9001 AS 9100 Other

Not currently certified, but conforms to:
 Not currently certified with no plan to achieve certification.

Management Personnel		
Name	Title	Phone & email
		Phone: Ext:
		Email:
		Phone: Ext:
		Email:
		Phone: Ext:
		Email:
Survey Completed By:		Phone: Ext:
	Date:	Email:

If you currently hold a third party accreditation as indicated above, please forward a copy of the certification and a completed copy of section 1 of this survey in lieu of completing section 2.



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Section 2 - Supplier Responses

<u>I. QUALITY SYSTEM</u>		Yes	No	N/A
1	Do you have a written, management approved Quality Manual?			
2	Are contracts reviewed for any quality requirements prior to work being performed?			
3	Is the quality system documentation periodically reviewed, updated, and approved by management?			
4	Is there a procedure or process to stop the shipment of known nonconforming material?			
5	Does your quality system require that internal audits be performed at established intervals?			
<u>II. RECEIVING CONTROL</u>				
1	Does your receiving department utilize a receiving log?			
2	Is your raw stock properly identified at receiving?			
3	Does your system preclude the use of materials received which are either discrepant or have not been inspected?			
4	When products / materials are accepted on a certificate of conformance / test reports, do you perform periodic audits of the reports / certifications to the established standards?			
5	Do your receiving procedures adequately address how to handle discrepant material?			
6	Do you implement Suspect Counterfeit Identification procedures?			
<u>III. MATERIAL HANDLING and STORAGE</u>				
1	Are limited shelf life items controlled, properly maintained and labeled as required?			
2	Do you have controls in place to properly segregate customer material and to ensure its use in the intended end item?			
3	Do you maintain a system for the positive identification of discrepant material? By what means? Circle all that apply: Tags / Forms / Stamps / Other:			
4	Do you maintain procedures for the safe handling, storage, and packaging of the product processed at your facility?			
<u>IV. CALIBRATION SYSTEM</u>				
1	Does your company have written procedures for the control and calibration of all equipment used for inspection and acceptance purposes?			
2	Does your calibration system meet the requirements of ISO9001?			
3	Is all inspection equipment labeled as to their calibration status?			
4	Does the status include date calibrated, date due, and calibrated by?			
5	Does your system provide for a mandatory recall of calibrated equipment?			
6	Are certifications on file reflecting standards calibration status that is traceable to NIST?			
7	Is new or reworked equipment calibrated prior to use?			
8	If used for acceptance, are employee owned tools / gauges subject to the same controls as company owned equipment?			



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V. INSPECTION SYSTEM				
1	Are documented procedures for receiving, in-process, test, and final inspection activities established, followed, and maintained?			
2	Are quality records maintained (tests, inspection reports, certifications, etc)? How long are they maintained?			
3	Do you have a system to positively control and verify inspection status throughout manufacturing?			
4	Do you keep a log of issued inspection stamps?			
5	Does your company employ statistical process control (SPC)?			
VI. MANUFACTURING, ENGINEERING, and DOCUMENT CONTROL				
1	Do your work travelers / routers note pre-planned and adequate inspection points?			
2	Are traceable records maintained for each lot of parts manufactured?			
3	Does your company have procedures to assure that only current drawings, specifications, and procedures are utilized during the manufacturing and inspection processes?			
4	Are obsolete, marked up, or illegible drawings, specifications, and procedures removed from the production areas so as to preclude their use during manufacturing and inspection?			
5	Do you have procedures to handle changes to work orders that are in process?			
VII. PROCUREMENT CONTROL				
1	Are procedures in use to assure that only qualified suppliers are used for the procurement of supplies, services, and materials?			
2	Are purchase orders reviewed for the necessary inclusion and flow down of any quality requirements?			
VIII. NON-CONFORMING MATERIAL and CORRECTIVE ACTION SYSTEM				
1	Are there procedures on the proper handling and identification of non-conforming material?			
2	Are nonconformance areas clearly marked and being utilized?			
3	Are there adequate procedures for the handling of customer complaints and the answering of corrective action requests?			
4	Do you maintain a documented corrective action system?			
5	Are customer corrective action requests handled within the specified time frame?			
6	Are corrective action requests issued to your suppliers upon receipt of discrepant material?			

Supplier Signature:	Title:	Date:
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FOR CONTINENTAL MACHINING CO. USE ONLY

Reviewed By:	Date:	Disposition	Next Review Due Date
		<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
Remarks:			