

## QUALITY SYSTEM EVALUATION REPORT

This report is intended to supply Lord information relative to the capability of your company to control the quality of applicable products and services to Lord purchase order requirements. Please complete this report in accordance with the instructions below and return within 15 days.

### INSTRUCTIONS

Initial Survey

Periodic/Resurvey

On-Site Survey

- Initial Surveys:** All questions (9 pages) must be answered in sufficient detail to permit Lord to evaluate the capability of furnishing product or services. Enter an "X" in the appropriate block. Check "Yes" if your quality system is fully compliant. Check "N/C" (Nonconforming) if your quality system is not fully compliant. Provide sufficient detail to address your system nonconformances. Check "NA" for those items that are not applicable.
- Periodic/Resurveys:** For companies that are ISO/TS16949, AS 9100, ISO 9001, or NADCAP Accredited complete page 1 - 2, note any changes in key personnel, and attach a copy of their International / National Accreditation Certificate.
- Periodic/Resurveys:** For companies who do not have above accreditation, all questions (9 pages) must be answered in sufficient detail to permit Lord to evaluate the capability of furnishing product or services.
- Comment on each audit finding identified as Nonconforming (N/C) and include a Corrective Action Plan.
- The application of the requirements as stated in this report is subject to an audit by the Lord MPD Quality organization at any time.
- Please forward the completed report and direct any inquires to your Lord Purchasing Agent or Supplier Quality Representative.
- Initial on-site surveys:** LORD quality to complete 0601-02A and 0601-02B for all initial assessments. As required also utilize commodity checklists (i.e. 0601-02C – machining & stamping; 0601-02D - foundry)

### SUPPLIER NAME AND ADDRESS

Supplier: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Country: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ Supplier Code: \_\_\_\_\_

FAX : (\_\_\_\_\_) \_\_\_\_\_ Internet Address: \_\_\_\_\_

### SIGNATURE AND TITLE OF PERSON COMPLETING THIS REPORT

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

**CATEGORY OF SUPPLY**

1. List supplies or services to be furnished:

2. Please indicate whether your company is a:  Distributor  Manufacturer  Processor

3. Names of your major customers:

Customer Name	% of sales	PPM	Customer Name	% of sales	PPM

**ORGANIZATION**

Position:	Name/Title/E-mail address:	Years in Position:
President/General Manager:		
Customer Service Manager:		
Plant Manager:		
Engineering Manager:		
Quality Manager:		
Total Employed:	Production Personnel:	
Sales/Marketing:	Capacity Utilized (%):	
Engineering:	Number of Shifts:	
Quality/Inspection:		

**QUALITY SYSTEM APPROVALS**

Indicate all Quality System International/National Approvals and/or Accreditation's currently valid:

\_\_\_ ISO/TS16949    \_\_\_ AS 9100    \_\_\_ ISO 9001    \_\_\_ NADCAP AC7004 (Quality System)  
 \_\_\_ NADCAP (Processes: \_\_\_\_\_)    \_\_\_ Other ( \_\_\_\_\_ )

Registrar, Date Approved and Expiry Date: \_\_\_\_\_

Registrar, Date Approved and Expiry Date: \_\_\_\_\_

Note: If this is a periodic / resurvey update and you are ISO, TS, AS, or NADCAP registered, attach a copy of Registration Certificate and do not complete the remaining items, unless there have been significant changes in your organization or to your quality management system.

1. MANAGEMENT RESPONSIBILITY	YES	N/C	NA
1. Is there a management appointed quality representative (Quality Manager) responsible for ensuring that a quality system is established, implemented and maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Is a management review performed at least once per year?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. QUALITY SYSTEM	YES	N/C	NA
1. Is there a written Quality Manual that defines the Quality Program and is it available and maintained?  Manual Revision and Date: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Is the Quality System derived from external standards such as ISO 9001, ISO/TS16949, AS 9100 etc.? If yes, list standard(s). If no, list anticipated registration date. Note: Suppliers of materials to be used in product sold to TS-customers are required to be ISO 9001:2000 registered.  _____ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Are there implemented, current procedures defining the roles and responsibilities related to Quality?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Are all procedures, forms, and other documents controlled (i.e., identification number, revision, and approval signatures)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Does the supplier utilize advanced product quality planning?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. CONTRACT REVIEW	YES	N/C	NA
1. Are documented procedures established and maintained for review of each contract and order to ensure: <ul style="list-style-type: none"> <li>• The requirements are adequately defined and documented? (Load quality clauses (form 460), including ITAR, specialty metals, FAR/DFARS, as required).</li> <li>• Exceptions to all requirements are formally resolved prior to acceptance of the contract?</li> <li>• Contract order requirements differing from those acknowledged are resolved?</li> <li>• That capability exists to meet accepted contract or order requirements?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. DESIGN CONTROL	YES	N/C	NA
1. Are there established and maintained documented procedures to control and verify the product design or formulation to ensure product consistency and achieve specific requirements? This only applies to design responsibility suppliers, otherwise "NA".	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Are significant changes to your product design or process communicated to your customers in advance of the change implementation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--	--------------------------	--------------------------	--------------------------

<b>5. DOCUMENT AND DATA CONTROL</b>	<b>YES</b>	<b>N/C</b>	<b>NA</b>
1. Are documented procedures for control of all documents and data established and maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Are controls in place that ensure: <ul style="list-style-type: none"> <li>- Pertinent revisions of appropriate documents are available at all location where operations and inspections/tests are performed?</li> <li>- Invalid and/or obsolete documents are controlled at all points of issue or use against unintended use?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Do manufacturing order travelers, routing sheets, work instructions, etc. indicate revision level of drawing/specifications to which fabrication, processing, inspection, and test is to be performed in accordance with?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>6. PROCUREMENT CONTROL</b>	<b>YES</b>	<b>NC</b>	<b>NA</b>
1. Are the quality capabilities of sub-contractors evaluated prior to procurement and at periodic intervals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Is a list of approved sources maintained and periodically reviewed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Is a supplier performance rating system maintained to monitor quality and delivery?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Do purchasing documents clearly describe the item ordered including: <ul style="list-style-type: none"> <li>• Type, class, grade etc.?</li> <li>• Applicable drawings, specifications, and revision levels of each?</li> <li>• Flowdown of ITAR, FAR/DFARS, specialty metal, record retention periods, and other Lord requirements controlled at your suppliers, as required.</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Are latest changes to drawings and/or specifications furnished to suppliers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Are purchasing documents reviewed and approved prior to release to assure incorporation of applicable product technical and quality requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Are your subcontractors expected to meet 100% on-time delivery performance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>7. CONTROL OF CUSTOMER SUPPLIED PRODUCT</b>	<b>YES</b>	<b>N/C</b>	<b>NA</b>

1. Are procedures established and maintained for the control of verification, storage, maintenance of customer supplied materials?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--	--------------------------	--------------------------	--------------------------

8. PRODUCT IDENTIFICATION AND TRACEABILITY	YES	N/C	NA
1. Are procedures established and maintained for identifying the product by suitable means from receipt and during all stages of production, inspection/test, and/or installation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Are rejected and/or unapproved materials segregated in controlled area(s)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Is there an adequate system for maintaining traceability of product that has serialization and lot identification requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. PROCESS CONTROL	YES	N/C	NA
1. Are documented work instruction used to describe the manufacturing operations and made available to personnel performing the work?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Do work instruction/shop travelers reflect: <ul style="list-style-type: none"> <li>• Article configuration (material number, drawing revision, specs, and revs)?</li> <li>• Manufacturing and inspection operations in sequence?</li> <li>• Equipment to be used?</li> <li>• Identification of person(s) doing the work?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Are in-process items protected and handled in such a manner as to preclude damage or loss?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Are records of qualification for special processes, equipment and personnel maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Are coolants, surface protectants, and mold releases used on Lord products approved by Lord per MTL-S-0136 (refer to approved lists, MTL-S-0136-001, -002, -003)? (Applies to discrete product only).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Is the inspection status of product clearly identified at all phases of production?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Is there an established process to ensure compliance with all applicable government safety, and environmental regulations, including those concerning handling, recycling, eliminating or disposing of hazardous materials?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Is production equipment/tooling/fixtures adequately maintained and controlled by systematic preventative maintenance system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>10.INSPECTION AND TESTING</b>	<b>YES</b>	<b>N/C</b>	<b>NA</b>
1. Is incoming (purchased) product inspected prior to use to verify that it conforms to specified requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Are documented inspection/test instructions available to inspection personnel describing the characteristics to be inspected and level of inspection?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Is in-process inspection and testing performed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Is a first article inspection performed to verify compliance to all drawing/specification requirements (including revisions after initial first article inspection)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Is final inspection and testing performed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Are the results of all inspections and tests documented and do the records include as a minimum the quantity accepted/rejected, the identity of the person performing the inspection/test, and the date of the inspection/test?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>11.CONTROL OF INSPECTION, MEASURING AND TEST EQUIPMENT</b>	<b>YES</b>	<b>N/C</b>	<b>NA</b>
1. Is a system maintained for periodic calibration of all measurement and test equipment (M&TE) used for acceptance of product?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Is the calibration system based on the requirements of ANSI/NC SL A540-1, ISO/IEC 17025, ISO10012-1? If not, list standard on which system is based:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Are procedures in effect that describe the method and frequency of calibration of M&TE?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Is adequate measuring equipment available to inspection for verifying conformance of product and services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Are measurement standards used for calibration traceable to U.S. National Institute of Standards and Technology (NIST) or applicable country national standards organization?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Is all M&TE identified with unique identification traceable to records?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Are records of calibration maintained for each unit of M&TE?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>11.CONTROL OF INSPECTION, MEASURING AND TEST EQUIPMENT (continued)</b>	<b>YES</b>	<b>N/C</b>	<b>NA</b>
8. Is each unit of M&TE marked to designate date calibrated, calibration due date, and any limitations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Is new and reworked M&TE calibrated before use?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Is the environment for the calibration area defined and controlled to the extent necessary to assure required accuracy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Are calibration intervals established on terms of calendar time, usage, or a combination of both?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Is M&TE stored so as to prevent damage or loss of calibration when not in use?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Is employees' personal equipment controlled to the same degree, as company-owned M&TE?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Is there a procedure to determine impact and corrective action for out-of-tolerance M&TE?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Are calibration frequencies periodically reviewed for adequacy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>12.INSPECTION AND TEST STATUS</b>	<b>YES</b>	<b>N/C</b>	<b>NA</b>
1. Is a process established and maintained for the identification of inspection and test status of product that indicating level of conformance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>13.CONTROL OF NONCONFORMING MATERIAL</b>	<b>YES</b>	<b>N/C</b>	<b>NA</b>
1. Have processes been established and maintained to ensure that product that does not conform to specified requirements is prevented from unintended use?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Is non-conforming material identified and segregated and where practical placed in a controlled material review area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Is there an established procedure for disposition of nonconforming material and does it require the customer's approval when required by contract?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Are nonconforming conditions and disposition documented?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Is repaired or reworked product reinspected to determine compliance with disposition, utilizing the same inspection methods which identified the original nonconformance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>14. CORRECTIVE AND PREVENTIVE ACTION</b>	<b>YES</b>	<b>N/C</b>	<b>NA</b>
1. Is there a documented procedure for implementing corrective action?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Are there provisions for recording the description of the cause(s), action taken (or planned) to correct the cause(s), and the date when corrective action will be completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>15. HANDLING, STORAGE, PACKAGING, PRESERVATION AND DELIVERY</b>	<b>YES</b>	<b>N/C</b>	<b>NA</b>
1. Are procedures established and maintained for handling, storage, packaging, preservation and delivery of product?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Is the established goal 100% on-time delivery to customer requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Are age sensitive material and electrostatic sensitive devices (ESD) in stock assessed at appropriate intervals to detect deterioration?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Are samples of batch or lot managed materials retained for the warranty period, at a minimum? (applies to chemical suppliers only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>16. CONTROL OF QUALITY RECORDS</b>	<b>YES</b>	<b>N/C</b>	<b>NA</b>
1. Are quality records stored and retained in a suitable environment to minimize deterioration or damage?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Are quality and manufacturing records maintained a minimum of 10 years? If not, indicate retention period below: Note: Lord mandates 10 year record retention.  _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>17. INTERNAL QUALITY AUDITS</b>	<b>YES</b>	<b>N/C</b>	<b>NA</b>
1. Are documented processes in place for planning and implementing internal quality audits and determining the effectiveness of the quality system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>18. TRAINING</b>	<b>YES</b>	<b>N/C</b>	<b>NA</b>
1. Is there a documented process for determining competency, identifying training needs, and providing for the training of all personnel performing activities affecting quality?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>




# Supplier Quality System Evaluation Report Summary (to be completed by Lord)

Supplier Name: \_\_\_\_\_

Supplier Code: \_\_\_\_\_

**Identify each N/C element as either a Minor/Major Nonconformance and attach Corrective Action Plan.**

Requirement	SAT	Minor N/C	Major N/C	N/A	Comments
1. Management Responsibility					
2. Quality System					
3. Contract Review					
4. Design Control					
5. Document and Data Control					
6. Procurement Control					
7. Control of Customer Supplied					
8. Product Identification and Trace.					
9. Process Control					
10. Inspection and Testing					
11. Control of Inspection, Measuring					
12. Inspection and Test Status					
13. Control of Nonconforming Matl.					
14. Corrective and Preventive Action					
15. Handling, Storage, Packaging,					
16. Control of Quality Records					
17. Internal Quality Audits					
18. Training					
19. Servicing					
20. Statistical Techniques					
<b>TOTAL</b>					
General Information, Appendix A					
Safety, Housekeeping, Appendix B					
Mfg Process Audit, App _____					
Mfg Process Audit, App _____					

### EVALUATION REPORT RESULTS

- Approved:**      **0 Major N/C AND 0-5 Minor N/C.** Attach Corrective action plan.
- Conditional Approval:** **1-5 Major N/C OR 6-15 Total N/C** (Major + Minor).  
Attach Corrective action plan. Upon implementation and approval of Corrective Actions, supplier may be approved once they meet the Approved requirements above.
- Disapproved:**    **> 5 Major N/C OR >15 Total N/C** (Major + Minor)  
May be re-evaluated once deficiencies are corrected (see comments below).

Comments: \_\_\_\_\_

Approval Expiration Date: \_\_\_\_\_ Commodity Code: \_\_\_\_\_

Approver: \_\_\_\_\_ Date: \_\_\_\_\_

