



Magee Plastics Company

Magee Form QA – 001
QMS Supplier Audit Survey

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Quality Management System Supplier Audit

The Magee Plastics Company (MPC) Quality Management System, the ISO 9001/ AS9100 standard and the Federal Aviation Administration (FAA) require that the Warrendale facility maintain surveillance over, and conduct periodic audits of all critical suppliers (vendors, distributors and subcontractors). The information provided on this form is used to assist the Magee Plastics Company Management to determine whether the supplier is approved to provide goods or services for their manufacturing or repair processes. This questionnaire is intended to be utilized as a springboard to showcase existing quality measures and capabilities. Additional criterion, such as on time performance and capabilities are additional factors that are considered when reviewing and approving existing suppliers. All questions should be completed as appropriate and "N/A" may be used if an item is not applicable. Please attach any supporting documentation such as ISO Certificates, appropriate licenses, FAA Approvals, etc. Magee Plastics Company, its customers and regulatory agencies reserve the right to conduct onsite audits of Approved Suppliers to ensure information provided on this questionnaire is accurate and to review any documentation on any parts produced for Magee Plastics Company. This form is available on the web at <http://mageeplastics.com/airlines/> under surveys and documents and can be used to request a self audit by MPC or may be used as the guideline when conducting an on-site audit of the supplier.

If the quality system is third party certified, those suppliers (vendors, distributors or subcontractors) who are self auditing need only to complete this page, attach a copy of the third party certificate and email or fax them to Magee Plastics Company, attention AS9100 Management Rep. (See header for contact details.)

Company Name: _____ Date: _____

Division or Subsidiary of: _____

Address: _____

City _____ State _____ Zip Code _____

Telephone Number _____ Fax Number _____

E-Mail Address: _____

What products/materials/services do you supply? _____

Evaluation prepared by (name & title): _____
and Telephone number _____

Is your quality system third party certified? YES NO

If yes, please state to which standard.

MAGEE PLASTICS COMPANY USE ONLY

Approved for use (Check one): YES NO

Mail Audit Reviewed by: _____

Restrictions/Comments: _____

A GENERAL

- 1.0 Approximated size of production facility? _____
- 2.0 Number of Employees: _____ Production _____ Q.A. _____ Purchasing
 _____ Engineering _____ Q.C./Inspection _____ Other
- 3.0 Is there an FAA approved alcohol and anti-drug program? YES NO N/A

B QUALITY ASSURANCE

- 1.0 Is there an established Quality Program? YES NO N/A
- 2.0 What system is the Quality Program based on? _____
- 3.0 Is the Quality Control/Inspection/Assurance organization separate from the Production Department? YES NO N/A
 If NO explain why: _____
- 4.0 Is there an up-to-date Quality Manual? YES NO N/A
- 5.0 **Does the Quality Manual include the following:**
- 5.1 An organization chart? YES NO N/A
- 5.2 An accurate description of the technical data distribution and revision control system? YES NO N/A
- 5.3 A record keeping system and retention times for all documents? YES NO N/A
- 5.4 Personnel training requirements and records? YES NO N/A
- 5.5 Details of the shelf life program? YES NO N/A
- 5.6 Defines the control of rejected and/or scrapped parts? YES NO N/A
- 5.7 An outline of the receiving inspection procedures? YES NO N/A
- 5.8 An outline of the tool and gauge calibration program? YES NO N/A
- 5.9 A revision page which reflects revisions? YES NO N/A
- 6.0 How often Is the Quality Manual reviewed and by whom? _____

- 7.0 Is the Quality Manual readily available to employees? YES NO N/A
- 8.0 Is there an internal audit function, with audits and corrective actions maintained on file? YES NO N/A
 If NO explain: _____

9.0 Is there an "approved vendor list" available to the Purchasing Department which ensures all suppliers (Vendors, distributors and subcontractors) to this organization meet quality standards, undergo periodic surveillance and auditing, and provide products in accordance with applicable quality standards? YES NO N/A
 If NO explain: _____

C INSPECTION

1.0 Is there a roster to identify all supervisory and inspection personnel? YES NO N/A

2.0 Is there a documented receiving inspection procedure? YES NO N/A
 Explain: _____

3.0 Is there a documented procedure to maintain traceability and certification on all parts, raw materials, and hardware? YES NO N/A
 Explain: _____

4.0 Are sampling procedures adequate to ensure quality, as applicable? YES NO N/A

5.0 Is there a documented procedure for in-process inspection and testing? YES NO N/A

6.0 Is there a documented procedure for final inspection before the finished product is shipped to the customer? YES NO N/A

7.0 Are all inspection records being kept and maintained? YES NO N/A

8.0 Are *work records* complete, in order, and legible? YES NO N/A

9.0 Do the *work records* contain:

9.1 ...a description of the work performed or reference to acceptable data? YES NO N/A

9.2 ...date the work was completed? YES NO N/A

9.3 ...name of the person completing the work? YES NO N/A

9.4 ...name of the person completing the inspection? YES NO N/A

D DATA CONTROL

Note: "Manuals" in this context includes any technical data, i.e., drawings, wiring diagrams, test specs, needed to perform the required service,

- 1.0 Are shop manuals and specifications required to perform the operational processes available in the shop or production facilities? YES NO N/A
- 2.0 Is original equipment manufacturer technical data used for all pertinent operations? YES NO N/A
- 3.0 Is there a procedure to control revisions and ensure technical data is current? YES NO N/A
- 4.0 Are manual revisions up-to-date? YES NO N/A
- 5.0 Are certified test results of actual chemical analysis and test results available? YES NO N/A
- 6.0 How is the certification married to parts? _____

E SHELF LIFE PROGRAM

- 1.0 Is there an adequate system documented and in use to ensure no item will be issued or used past its expiration date? YES NO N/A
- 2.0 Are shelf life items properly maintained in environmentally controlled areas (as applicable)? YES NO N/A
- 3.0 Does each shelf life item have the expiration limit displayed on the item? YES NO N/A

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F TOOL AND TEST EQUIPMENT CALIBRATION

1.0 Is there a tool and calibration program which includes; all tools and tooling which require calibration, frequency and due date of calibration, personal tools, and a system to prevent the use of tools out of calibration? YES NO N/A

2.0 Is there a person by title, responsible for the calibration program? YES NO N/A

3.0 Are standards used to calibrate the tools traceable to the controlling government agency, e.g., The National Institute of Standards and Technology YES NO N/A

4.0 Do the calibration records:

4.1 ...show the date calibrated? YES NO N/A

4.2 ...identify the individual or vendor who performed the calibration? YES NO N/A

4.3 ...show the next calibration due date? YES NO N/A

4.4 ...contain a calibrated certificate for each item calibrated by an outside source? YES NO N/A

4.5 ...record details of adjustments or repairs? YES NO N/A

4.6 ...show the part number and serial number of the standard used to perform the calibration YES NO N/A

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G TRAINING

1.0 Is there a documented training program? YES NO N/A

2.0 Is there a documented re-current training program? YES NO N/A

3.0 Describe frequency of re-current training: _____

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H HANDLING, STORAGE, PACKAGING AND DELIVERY

- 1.0 Is there a documented procedure and system for handling, storage, packaging and delivery? YES NO N/A
- 2.0 Does this system include incoming materials, materials in process, and finished product? YES NO N/A
- 3.0 Are storage facilities appropriate for environmental conditions such as temperature and humidity? YES NO N/A
- 4.0 Is there a method or system to check items in storage periodically to detect possible deterioration? YES NO N/A
- 5.0 Is there a packaging procedure or system that provides appropriate protection against damage? YES NO N/A
- 6.0 Does the packaging provide a clear description of the content where the regulations or contract specify? YES NO N/A
- 7.0 Is protection provided for the quality of product during shipping and other phases of delivery? YES NO N/A
- 8.0 Prior to shipping product to customer, are there adequate controls to ensure that identification labels are correct, properly located and attached? YES NO N/A

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I CONTROL OF NON-CONFORMING PRODUCT

- 1.0 Is there a documented system and methods which describe how to control and segregate the product(s) which does not conform to specified requirements and its disposition? YES NO N/A
- 2.0 Are procedures established and maintained to ensure that the product that does not conform to specified requirements is prevented from use or installation? YES NO N/A
- 3.0 Is control provided for identification, documentation, evaluation, segregation, and appropriate disposition of non-conforming product? YES NO N/A
- 4.0 Does the system identify an individual, by title, responsible for verifying that mutilation is accomplished? YES NO N/A
- 5.0 Is the non-conformity reviewed, evaluated and causes determined to prevent recurrence? YES NO N/A
- 6.0 Are all important records maintained concerning non-conformities for the customer's review? YES NO N/A

J CORRECTIVE AND PREVENTIVE ACTION

- 1.0** Is there a documented, methodical and systematic approach to corrective processes or products which do not, or potential may not, meet the specified requirement? YES NO N/A
- 2.0** Is there a 'Materials Review Board' or equivalent, which is responsible for taking corrective and preventive actions? YES NO N/A
- 3.0** Is there a process to investigate and analyze all process to deter actual or potential non-conformities, and is related corrective or preventive action taken to prevent recurrence or occurrence? YES NO N/A
- 4.0** Have all corrective and preventive actions taken been recorded and documented? YES NO N/A



IF THIS QUESTIONNAIRE HAS BEEN COMPLETED AS A SELF AUDIT BY THE SUPPLIER (VENDOR, DISTRIBUTOR OR SUBCONTRACTOR) PLEASE COMPLETE THE FOLLOWING.
The information contained in this questionnaire is true and correct at the time of issue. Any major changes to key personnel, business address, company approvals or product lines will be notified to Magee Plastics Company if and when they occur.

Signed _____

Date _____

Printed Name _____

Title _____

Please return (mail or fax) completed form to:

Magee Plastics Company
303 Brush Creek Road
Warrendale, PA 15086-7595

Fax 724-776-9696

Attention: AS9100 Management Rep