

**Master Air Parts, Inc.**

3070 Skyway Drive, Suite 303  
Santa Maria, CA 93455  
(805) 928-2929 Phone  
(805) 928-2944 Fax

(Please type or print)

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

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

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

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

Brief list of Parts, material, or services to be provided to Master Air Parts, Inc.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you an FAA Certified Repair Station? Yes No N/A

Certificate No. \_\_\_\_\_ (Please enclose a copy of the certificate)

Do you have an FAA Approved Anti-Drug Plan and Alcohol Misuse Prevention Program (AMPP)? Yes No N/A

Plan No.: \_\_\_\_\_ (Please enclose a copy of the certificate)

**Organization**

Person responsible for Quality Control:

Name: \_\_\_\_\_ Title/ Position: \_\_\_\_\_

Number of Inspection Personnel: \_\_\_\_\_ Number of Production Personnel: \_\_\_\_\_

**Quality Control Procedures**

- |  |     |    |     |
|--|-----|----|-----|
| 1. Is a Quality Control Procedure Manual maintained and available for use by Inspection personnel?                           | YES | NO | N/A |
| 2. Is the Manual updated periodically to the latest customer and/or Government requirements?                                 | YES | NO | N/A |
| 3. Is the Manual reviewed by a Government Agency?  | YES | NO | N/A |
| 4. What specifications are your Quality Control Procedure based on<br>FAR 145___FAR 121___ FAR 21___ ISO900___AS 9100___     |     |    |     |
| 5. Does Quality Control cooperate with Management, contracts, and Manufacturing to establish an appropriate inspection plan? | YES | NO | N/A |

**Procurement Control**

- |  |     |    |     |
|--|-----|----|-----|
| 1. Is an Approve Vender List maintained and periodically updated?  | YES | NO | N/A |
| 2. Are the Quality capabilities of those supplying parts, materials, and Services evaluated prior to approval? | YES | NO | N/A |
| 3. Are suppliers monitored or audited periodically to ensure continued Quality?                                | YES | NO | N/A |
| 4. Are the latest drawings, specifications and instructions provided to suppliers?                             | YES | NO | N/A |
| 5. Are applicable drawings, specifications and changes obtained on Purchased orders?                           | YES | NO | N/A |
| 6. Are Certified Test Reports or Certificate of Conformity obtained on Purchase parts and materials?           | YES | NO | N/A |
| 7. Are test performed periodically to verify the accuracy of Certificates and Test Reports?                    | YES | NO | N/A |

**Control of Raw Materials**

- |  |     |    |     |
|--|-----|----|-----|
| 1. Are incoming materials properly identified and segregated prior to Receiving inspection?            | YES | NO | N/A |
| 2. Is contractor-provided raw material segregated and identified?                                      | YES | NO | N/A |
| 3. Is positive traceability maintained for each lot of raw material?                                   | YES | NO | N/A |
| 4. Are age or storage sensitive material periodically reevaluated and An appropriate disposition made? | YES | NO | N/A |

**Incoming Inspection**

- |   |     |    |     |
|---|-----|----|-----|
| 1. Are incoming shipments identified and segregated prior to receiving Inspection?                | YES | NO | N/A |
| 2. Are Purchase Orders information available to Receiving Inspection?                             | YES | NO | N/A |
| 3. Are the latest drawings, specifications and supplier catalogs available Receiving Inspection?  | YES | NO | N/A |
| 4. Are precautions taken to prevent the use of parts and materials prior to Receiving Inspection? | YES | NO | N/A |

**Inspection and Test Equipment**

- |   |     |    |     |
|---|-----|----|-----|
| 1. Are inspection gauges, measuring devices and test equipment Inspected and calibrated at specific intervals?                      | YES | NO | N/A |
| 2. Are records maintained which specify calibration dates for inspection equipment?   | YES | NO | N/A |
| 3. Is inspection equipment labeled in some way to indicate current calibration status?  | YES | NO | N/A |
| 4. If employee-owned tools or gauges are used, are they subject to the same calibration program as company equipment?               | YES | NO | N/A |
| 5. Are standards periodically calibrated using primary standards Traceable to the National Institute of Standards Technology (NITS) | YES | NO | N/A |

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**Manufacturing Inspection**

- |  |     |    |     |
|--|-----|----|-----|
| 1. Are shop travelers, operation sheet and/or inspection instructions used to record inspections performance during manufacturing? | YES | NO | N/A |
| 2. Is a final inspection performed, results recorded and available for examination by a customer representative?                   | YES | NO | N/A |
| 3. Are valid Statistical Quality Control methods utilizes for characteristics not 100% inspected?                                  | YES | NO | N/A |

**Nonconforming Supplies**

- |   |     |    |     |
|---|-----|----|-----|
| 1. Are procedures in effect identify variations from buyers or seller specifications?         | YES | NO | N/A |
| 2. Are nonconforming supplies identified and diverted from normal Production channels?        | YES | NO | N/A |
| 3. Are supplies designated as nonconforming identified or positive controlled to prevent use? | YES | NO | N/A |

**Engineering Documentation Control**

- |  |     |    |     |
|--|-----|----|-----|
| 1. Are the latest drawings, change orders and specifications available to Inspectional Personnel?      | YES | NO | N/A |
| 2. Are obsolete drawings, change orders and specifications Systematically recalled from points of use? | YES | NO | N/A |

**Packing and Shipping**

- |  |     |    |     |
|--|-----|----|-----|
| 1. Are written instructions provided for the preservations, packaging Labeling and shipping of products?                 | YES | NO | N/A |
| 2. Does Quality Control verify that applicable preservation, packaging labeling and shipping requirements have been met? | YES | NO | N/A |

**Explanation of "NO" Responses**

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**Certification**

I hereby that to the best of my knowledge the information supplied is complete, and current and accurate an that I am an official of the supplier who us duty authorized to sign this certification.

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

Name: \_\_\_\_\_ Title/Position: \_\_\_\_\_  
(Please print)

Please mail this form to: *Master Air Parts, Inc.*  
*3070 Skyway Drive, Suite 303*  
*Santa Maria, CA 93455*  
*USA*

*Attn: Miguel Gomez*

Or you may FAX it to: (805) 928-2944

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For Master Air Parts, Inc. use only

Date Received: \_\_\_\_\_ Received By: \_\_\_\_\_

**Remarks:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_

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