



## OHLINGER INDUSTRIES, INC.

**FAA APPROVED REPAIR STATION #OHRR712K  
1211 W. MELINDA LANE PHOENIX, ARIZONA 85027  
PH 602-285-0911 FAX 602-285-5511**

Attention: Quality Assurance Department

Subject: Vendor Quality Survey

In order to remain on or to be added to Ohlinger Industries, Inc. approved sub-contractor and vendor list we must maintain records of periodic quality system surveys performed on our sub-contractors and vendors.

Please take a few minutes to complete the attached quality survey, sign and return mail/fax or e-mail to Ohlinger Industries, Inc. Attention: Dino Acevedo, Quality Manager. Fax 602-285-5511 or email me at [dinoa@ohlingerind.com](mailto:dinoa@ohlingerind.com)

**Please include your latest FAA Air Agency Certificate; Operations Specifications including section A449 or other FAA approved Drug Program Certificate, NADCAP Certificates and any other applicable approvals.**

**All subcontractors must have an FAA approved Antidrug and Alcohol Program in place per CFR 120.1. This applies to all sub-tier contractors.**

**Additional sub-tier contracting is not permissible without approval from Ohlinger Industries, Inc. quality assurance department.**

If you should require any assistance; please contact me at 602-285-0911.

Thank you for your attention and prompt response.

Regards,



Location: OHRR712K  
Digitally Signed by Dino Acevedo  
Quality Manager /Ohlinger Industries

Dino Acevedo  
Quality Manager  
Ohlinger Industries, Inc.

**Ohlinger Industries, Inc.**  
**FAA Approved Repair Station OHRR712K**  
**SUB-CONTRACTOR / VENDOR SURVEY**

Date:

Company Name:  
Address

Phone:

Fax:

Years In Business:

No. of Employees:

No. of Supervisors:

No. of Inspectors

What is your quality system based on?

ISO,AS9000,FAA 145,CASE

Please provide a copy of the following documentation when returning this survey: FAA 145 Cert.  
Approved Drug and Alcohol Program Letter or OP Specs A449 AS9100/ISO/NADCAP

Other Approvals:

Points Of Contact:                      Please provide Name and Extension

QA/Control

Engineering

Other Position

Survey Completed by (name and  
Position) :

Ohlinger Industries Approval

Date

<b>Ohlinger Industries, Inc. Vendor Survey Self Audit Evaluation</b>	Y	N	N/A
<b>1. Quality System and Manual</b>			
A. Is there an established quality system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Is there an established quality manual?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Is the quality manual available to all personnel?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Is the quality system documentation current and readily available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Does the quality manual and / or documentation include a detailed description of:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1) the organizational structure and relationship of the Q.C. department to the rest of the organization?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) an assignment of personnel and specific responsibilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) the revision control system for quality system documentation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) record keeping system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5) training requirements and records?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6) shelf life control?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7) control of incoming discrepant parts, materials and supplies?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8) receiving inspection procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9) test and inspection system calibration?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10) storage facilities and procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11) part identification system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12) environmental controls ( as appropriate ) ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13) inspection stamp control?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14) self-audit / evaluation program?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15) Is there an established program or procedure for duty time limitations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>2. SELF-AUDIT EVALUATION PROGRAM</b>			
A. Is there an established documented self-audit / evaluation program which identifies who within the company is responsible for conducting self-audits, the frequency of the audits, audit documentation and corrective action?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>3. FACILITIES</b>			
Do storage areas provide for the following:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A. adequate space and appropriate racks to preclude damage or mishandling?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. secured from unauthorized access?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. segregation of aircraft and non aircraft parts and functions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. segregation of serviceable and non-serviceable parts?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>4. TRAINING AND AUTHORIZED PERSONNEL</b>			
A. Are personnel who perform inspection, shipping and receiving functions properly trained ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Are inspection personnel properly authorized?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Are both formal classroom and on-the-job training documented and maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Is a roster of personnel authorized to perform inspection functions maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>5. PROCUREMENT</b>			
A. Does the system assure that parts conform to the customer's purchase order request and that deviations are approved by the customer?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Does the system assure special requirements are adequately communicated?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Ohlinger Industries, Inc. Vendor Survey Self Audit Evaluation</b>	<b>Y</b>	<b>N</b>	<b>N/A</b>
<b>6. RECEIVING INSPECTION</b>			
A. Does the inspection program include:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1) a check for obvious physical damage?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) verification of appropriate plugs and caps are installed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) verification of part number, serial number, model number, etc. match the documentation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) verification that all documentation is at hand and properly completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>7. MEASURING AND TEST EQUIPMENT</b>			
A. Are measuring & test equipment controls in place which provide for appropriate storage, usage, and calibration traceable to the National Institute of Standards and Technology when applicable?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Is a system in place to assure documentation of current calibration status?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>8. MATERIAL CONTROL</b>			
A. Is material handled in an appropriate manner and protected from damage & deterioration?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Is the storage areas periodically checked for overall effectiveness?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Is there a system in place for trace and recalled of shipped parts?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Whenever practical, is material stored and delivered in ATA 300 packaging?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Does the system have a procedure for storage of flammable, toxic or volatile materials?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. Is batch/lot control maintained for parts?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G. Does the system assure that serviceable parts/components are adequately protected against the environment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. Does the system assure that no part number ambiguity exists?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I. Does the system provide for separation of non-conforming material from usable stock?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>9. SHIPPING</b>			
A. Does the quality system require shipments in ATA-300 containers or equivalent as appropriate for the unit being shipped or as specified by the customer.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Does the quality system provide for a visual inspection of all items and accompanying documentation prior to shipping?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>10. RECORDS</b>			
A. Does the record system require retention for at least 7 years from the date of sale to the customer?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Does the quality system include a system governing the storage, distribution and retrieval of documents confirming the physical and chemical properties?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Are records protected against damage, alterations, deterioration and loss.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>11. TECHNICAL DATA CONTROL</b>			
Does the quality system provide for maintaining technical data in a manner which ensures such data is current and accessible?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>