



**SUPPLIER QUESTIONNAIRE**

January 25, 2011

Valued Customer,

It is the AEG Group policy to respond in a timely fashion to every regulatory and quality inquiry presented by our current and prospective customers, in particular quality surveys. Our companies receive daily requests for this information. Maintaining our customer service commitment in this area involves a significant amount of resources from our staff.

In an effort to expedite our response to our customers' requests, while at the same time remain efficient and competitive, we have developed our own standard supplier questionnaire. The questionnaire contains information that is generally requested in the industry from many sources.

We ask you in the most respectful way to please accept our questionnaire in lieu of your own form for the reasons presented above. Should you need additional information that is not contained in our survey, we will be happy to provide it.

If you have any questions, please contact me.

Rodrigo Encalada

Director of Quality

T: (305) 267-6400

F: (305) 260-9780

[rodrigo.encalada@aeggroup.net](mailto:rodrigo.encalada@aeggroup.net)



## SUPPLIER QUESTIONNAIRE

### 1. General

Company Name: **Summit Aerospace, Inc.**

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Address: 1260 NW 57<sup>th</sup> Avenue

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City: Miami State: Florida

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Country: USA ZIP Code: 33126

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Telephone Number: 305-267-6400 Fax Number: 305-260-9780

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Website: www.aerospaceengineeringgroup.com

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Type of Company: Repair Agency Years in Business: 8

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Certifications Held: FAA: E6QR207X CAGE Code: 1R5Y1

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Other: EASA: 145.5462 DUNS: 141820758

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ISO9001: AGS-US021810-1

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Total Employees: 80

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- Production: 48 Supervision: 6

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- Inspection: 10 Quality Assurance: 5

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Facilities: Own:  Lease:  Area: 50000 sf Building Type: CBS

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General Manager: Humberto Almaguer Email: humberto.almaguer@aeggroup.net

EASA Accountable Manager: Jorge Fernandez Email: jorge.fernandez@aeggroup.net

FAA Accountable Manager: Humberto Almaguer Email: humberto.almaguer@aeggroup.net

Quality Manager: Rodrigo Encalada Email: rodrigo.encalada@aeggroup.net

Marketing Manager: Mario de la Torre Email: mario.delatorre@aeggroup.net

Business Manager: Guillermo de las Casas Email: guillermo.delascasas@aeggroup.net



## SUPPLIER QUESTIONNAIRE

### 1. General

Company Name:	<b>Summit Accessory Services, Inc.</b>		
Address:	4000 NW 28 <sup>th</sup> Street		
City:	Miami	State:	Florida
Country:	USA	ZIP Code:	33142
Telephone Number:	305-871-5449	Fax Number:	305-871-5724
Website	www.aerospaceengineeringgroup.com		
Type of Company:	Repair Agency	Years in Business:	40
Certifications Held:	FAA: MPR4089B	CAGE Code	4ZKW3
Other:	EASA: 145.4084	DUNS:	809150589
	ISO9001: AGS-US021810-1		
Total Employees:	32		
- Production	24	Supervision:	2
- Inspection	5	Quality Assurance:	2
Facilities:	Own: _____	Lease: <input checked="" type="checkbox"/>	Area: 40000 sf Building Type: CBS
General Manager:	Jesus Barcenilla	Email:	jorge.fernandez @aeggroup.net
EASA Accountable Manager	Jorge Fernandez	Email:	jorge.fernandez @aeggroup.net
FAA Accountable Manager	Jesus Barcenilla	Email:	jesus.barcenilla@aeggroup.net
Quality Manager	Alex Guerrero	Email:	alex.guerrero@aeggroup.net
Marketing Manager	Mario de la Torre	Email:	mario.delatorre@aeggroup.net
Business Manager	Guillermo de las Casas	Email:	guillermo.delascasas@aeggroup.net



## SUPPLIER QUESTIONNAIRE

### 1. General

Company Name:	<b>Avionics International - AEG, Inc.</b>		
Address:	2700 NW 36 <sup>th</sup> Street		
City:	Miami	State:	Florida
Country:	USA	ZIP Code:	33142
Telephone Number:	305-635-5367	Fax Number:	305-635-7930
Website	www.aerospaceengineeringgroup.com		
Type of Company:	Repair Agency	Years in Business:	21
Certifications Held:	FAA: XV8R442X	CAGE Code	0V1M7
Other:	EASA: 145.4219	DUNS:	174369108
	ISO9001: AGS-US021810-1		
Total Employees:	30		
- Production	15	Supervision:	2
- Inspection	3	Quality Assurance:	2
Facilities:	Own: <input checked="" type="checkbox"/>	Lease: <input type="checkbox"/>	Area: 20000 sf Building Type: CBS
General Manager:	Kent Kendrick	Email:	kent,kendrick@aeggroup.net
EASA Accountable Manager	Kent Kendrick	Email:	kent,kendrick@aeggroup.net
FAA Accountable Manager	Kent Kendrick	Email:	kent,kendrick@aeggroup.net
Quality Manager	John Clemens	Email:	john.clemens@aeggroup.net
Marketing Manager	Mario de la Torre	Email:	mario.delatorre@aeggroup.net
Business Manager	Guillermo de las Casas	Email:	guillermo.delascasas@aeggroup.net



**SUPPLIER QUESTIONNAIRE**

**2. Certification**

	<b>Yes</b>	<b>No</b>	<b>N/A</b>
A. Does the vendor hold a current FAA Air Agency certificate?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Are all required certificates, operations specifications, licenses, repairman certificates and registrations available for review?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. If the repair station has "Limited Ratings," does the vendor have a capabilities listing accepted by the FAA?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Does the vendor have an FAA approved and active anti-drug and alcohol misuse prevention program?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Does the vendor have a procedure to:			
1. Ensure that their U.S. based sub-contracted maintenance/preventive maintenance providers, at all tiers (certificated and non-certificated), are actively participating in a U.S. Department of Transportation anti-drug and alcohol misuse prevention program?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Obtain and subsequently retain, for a minimum of three (3) years from date of work, proof of antidrug and alcohol misuse prevention program compliance for each subcontract maintenance provider at all tiers at which work is performed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**3. Quality Programs**

	<b>Yes</b>	<b>No</b>	<b>N/A</b>
A. Does the vendor have a Quality Control Manual that includes:			
1. Descriptions of the systems and procedures used for:			
a) inspecting incoming raw material to ensure acceptable quality?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) performing preliminary inspections of all articles that are maintained?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) inspecting all articles that have been involved in an accident for hidden damage before maintenance, preventive maintenance, or alteration is performed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) establishing and maintaining proficiency of inspection personnel?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) establishing and maintaining current technical data for maintaining articles?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) qualifying and surveying non-certificated persons who perform maintenance, preventive maintenance, or alterations for the repair station?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) performing final inspection and return-to-service of maintained articles?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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h) calibrating measuring and test equipment used to maintain articles, including the intervals at which the equipment will be calibrated?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) taking corrective action on deficiencies?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j) revising the Quality Control Manual?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. References, where applicable, to manufacturer's inspection standards?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Samples of and instructions for completing maintenance and inspection forms, or reference to a separate forms manual?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Is the Quality Control Manual current?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Does the vendor's program include procedures for controlling shelf life?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Does the vendor's program include procedures for controlling scrapped parts?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Does the vendor have a Repair Station Manual (RSM) that contains the following:			
1) The vendor's organizational structure including:			
a) each management position with authority to act on behalf of the repair station?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) the area of responsibility assigned to each management position?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) duties, responsibilities, and authority of each management position?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) an organizational chart?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Procedures for maintaining the roster(s)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) A description of the vendor's operations, including housing, facilities, equipment, and materials?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Procedures for:			
a) revising the capabilities list and notifying the CHDO of revisions to the list?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) performing self evaluation the capabilities list?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5) Procedures for revising the training program and submitting revisions to the CHDO for approval?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



**SUPPLIER QUESTIONNAIRE**

- |   |                                     |                          |                          |
|---|-------------------------------------|--------------------------|--------------------------|
| 6) Procedures to govern work performed at another location?   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7) Procedures for maintenance, preventive maintenance, alterations, and inspections performed?  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8) Procedures for maintaining and revising contract maintenance information, and notifying the FAA?   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9) A description of the record-keeping system?  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10) Procedures for revising the RSM and notifying the FAA?  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11) A description of the system used control sections of the RSM?   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F. Is the RSM current and available to employees?   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| G. Does the vendor have an internal audit and surveillance function?  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| H. Does the internal audit function ensure compliance with customer specifications?   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I. Does the internal audit program assure appropriate corrective action?  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| J. Does the vendor maintain, for a minimum of three (3) years, a file of audit findings and corrective actions from audits for which a VEL was signed? Is the file accessible to the auditor? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| K. Does the vendor maintain a list of sub-contracted maintenance functions and agencies which includes type of certificate and rating(s), if any, held by each agency?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| L. Does the vendor ensure that sub-contractor quality meets customer specifications and legal requirements?   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| M. Does the vendor maintain certification on subcontractor work?  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| N. Does the vendor have a contract allowing FAA to inspect non-certificated subcontractors?   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| O. Does the vendor have a procedure for reporting defects or unairworthy conditions to the customer and the FAA?  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**4. Inspection Programs**

- |   | <b>Yes</b>               | <b>No</b>                           | <b>N/A</b>                          |
|---|--------------------------|-------------------------------------|-------------------------------------|
| A. Does the vendor perform any required inspections (RII) for any customer? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| B. Are RII inspectors properly trained and certified?                       | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |



**SUPPLIER QUESTIONNAIRE**

C. Is there proper separation of maintenance and inspection responsibilities for vendors that perform required inspections?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D. Does the vendor have an acceptable receiving inspection system?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Are sampling procedures used to ensure quality?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. Does the vendor have an acceptable system for controlling stamps for both inspection and production personnel?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>5. Personnel</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
A. Has the vendor designated an employee as the "Accountable Manager"?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Does the vendor have a minimum of three (3) employees?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Does the roster(s) identify all management, supervisory and inspection personnel?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Does the roster(s) identify all personnel authorized for return-to-service?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Does the repair station have an employment summary for all personnel listed on the repair station roster(s)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. Do the vendor's supervisory personnel satisfy the requirements of the FARs and the CASE 1A standard?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G. Do the vendor's inspection personnel satisfy the requirements of this standard?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. Do the vendor's return-to-service personnel satisfy the requirements of this standard?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I. Are specific individuals, by title, responsible for the following programs:			
1) Technical data?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Shelf life?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Calibrated tooling?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Scrap parts?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
J. Is there a back-up person identified, by title, for all programs listed in 5.I. of this checklist?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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**6. Technical Data Program**

	<b>Yes</b>	<b>No</b>	<b>N/A</b>
A. Does the vendor have the required shop manuals and specifications to perform the repair/overhaul in accordance with customer specifications?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Are there established approved procedures controlling revisions in manuals deviating from OEM specifications (e.g. EO, EA, air carrier data, etc.)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Does the vendor have a documented system to ensure technical data is current?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Does the vendor have records of manual revisions?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Are manual revisions up to date?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. Is the technical data properly identified and available to mechanics?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G. Does the vendor have a system to control working copies of manuals to ensure they are revised with the masters?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. Is technical data stored in a manner that will protect it from dirt and damage?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I. Are adequate viewing devices in good condition and available for viewing the technical data?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
J. If the vendor has SFAR 36 authority, does it have a system for receiving customer approval prior to use of the data?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
K. Does the vendor have an approved SFAR-36 manual and roster?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**7. Shelf Life Program**

	<b>Yes</b>	<b>No</b>	<b>N/A</b>
A. Does the vendor have a documented shelf life program?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Does the program list parts and materials that have shelf life limits?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Does each shelf life item have the shelf life expiration limit displayed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Is there an adequate system to assure that no item will be issued or used past its expiration date?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**8. Calibration Program**

	<b>Yes</b>	<b>No</b>	<b>N/A</b>
A. Does the vendor have a documented calibration program?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



## SUPPLIER QUESTIONNAIRE

B. Is each item requiring calibration identified and on the calibration list?

C. Are standards used to calibrate each item acceptable to the FAA (e.g. The National Institute of Standards and Technology (NIST))?

D. Is there a system to identify each item in the program, its calibration frequency, and its calibration due date?

E. Does the vendor have a procedure for identifying, controlling and/or preventing use of out-of-service and due-for calibration tools and equipment?

F. Does the vendor have a procedure to control the calibration of personal tools?

G. Did a sample check of the calibrated items indicate that it is within calibration limits?

H. Are the tools and test equipment in a serviceable condition?

I. Do records:

1) Show date calibrated?

2) Show calibration due date?

3) Identify individual or vendor that performed calibration or check?

4) Contain a calibration certificate for each item calibrated by an outside agency?

5) Record details of adjustments and repairs?

6) Show the P/N, S/N, and calibration due date of the standard used to perform the calibration?

### 9. Training Program

**Yes**      **No**      **N/A**

A. Does the vendor have a documented training program?

B. Does the training program include all mechanics, inspectors and technical supervisors?

C. Are mechanics, inspectors and supervisors properly trained, authorized and certificated, if required, for the work they perform?

D. Is formal and OJT training documented?



## SUPPLIER QUESTIONNAIRE

E. Are training records for mechanics, inspectors and supervisors retained for a minimum of two (2) years after the person leaves the company?

          

### 10. Housing and Facilities

**Yes**      **No**      **N/A**

A. If the vendor deals in non-aircraft parts, materials and/or maintenance activities, are they adequately segregated from the aircraft functions?

          

B. Does the vendor have:

1) Sufficient work space and areas for the proper segregation and protection of articles?

          

2) Segregated work areas enabling environmentally hazardous or sensitive operations such as painting, cleaning, welding, avionics work, and machining to be done properly and in a manner that does not adversely affect other maintenance?

          

3) Suitable racks, hoists, trays, stands, and other segregation means for the storage and protection of all articles?

          

4) Space sufficient to segregate articles and materials stocked for installation from those undergoing maintenance, preventive maintenance, or alterations?

          

5) Ventilation, lighting, and control of temperature, humidity, and other climatic conditions sufficient to ensure personnel perform maintenance, preventive maintenance, or alterations to the standards required by the part?

          

6) Areas for receiving and for shipping customers' units with adequate space, lighting, shelving, security, and fire protection to accommodate customers' units in a manner that will preclude damage, loss, and theft?

          

7) Adequate and appropriate storage area to safely store customers' reusable shipping containers and to protect them from environmental damage?

          

C. If the vendor has an airframe rating, is suitable permanent housing provided to enclose the largest type and model of aircraft listed on its Operations Specifications?

          

D. If the vendor performs maintenance, preventive maintenance, or alterations on articles outside of its housing, does it provide suitable facilities that are acceptable to the FAA and its customers?

          

E. Do facilities outside of the vendor's housing meet the requirements of this standard so that the work can be done in accordance with the requirements of 14 CFR 43?

          

### 11. Safety / Security / Fire Protection

**Yes**      **No**      **N/A**

A. Does the vendor provide adequate security for customer parts in its possession?

          

B. Is the security system reviewed periodically by management or an outside vendor?

          

C. Are fire protection devices inspected periodically?



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D. Are fire stations identified and extinguishers in serviceable condition?

E. Are fire lanes, doors and fire extinguishers clear of obstruction?

F. Are safety guards in place on power equipment?

G. Are the vendor's shop operations conducted in a safe manner and environment?

**12. Storage**

**Yes No N/A**

A. Are parts and materials correctly identified and properly stored?

B. Do parts in bins match part number on bins?

C. Does the vendor have a quarantine area for rejected parts and materials awaiting disposition?

D. Are parts and material properly protected from damage and deterioration?

E. Are flammable, toxic or volatile materials properly identified and stored?

F. Are sensitive parts and equipment (oxygen parts, o'rings, electrostatic sensitive devices, etc.) properly packaged, identified and stored to protect from damage and contamination?

G. Are high pressure bottles correctly labeled, properly stored and secured?

H. Does the vendor maintain traceability certification on all parts and raw materials?

**13. Work Processing**

**Yes No N/A**

A. Does the vendor observe duty time limitations?

B. Does the vendor only perform work for which it is authorized on its Operations Specifications?

C. Does the vendor have adequate tooling and test equipment to perform the work?

D. Where a vendor uses specified OEM test equipment and/or test equipment other than that specified by the OEM, does that vendor:

1) Have operating and maintenance manuals for the equipment?



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- |   |                                     |                          |                          |
|---|-------------------------------------|--------------------------|--------------------------|
| 2) Perform maintenance and servicing per the manuals?   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3) Maintain maintenance and servicing minimum of two (2) years?   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4) List the equipment, where applicable, in their calibration program?  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E. Where a vendor uses non-OEM specified equipment, is the equipment properly certified?  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F. Are adequate tools and current manuals available or at the mechanics' work stations?   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| G. Are customers' parts properly identified throughout the maintenance actions and in storage?  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| H. Is there a work turnover procedure used?   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I. Does the shop segregate serviceable from unserviceable components?   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| J. Does the facility provide adequate protection of parts in work (e.g. filtered air or clean room (depending on type of part))?  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| K. Does the vendor have procedures to obtain customer specifications, incorporate those specifications into their work processes, verify that specifications were incorporated, and obtain approval for deviating, if necessary, from those specifications, and are there adequate checks, inspections, and tests to ensure work was performed to those specifications? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| L. Are smoking, eating and drinking forbidden in the work area or, does the vendor have a written program to ensure units are protected from contamination?   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| M. Are fluid dispensing cans and servicing units properly identified?   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| N. Are the vendor's work records complete, in order, and legible?   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| O. Do the records contain:  |                                     |                          |                          |
| 1) The description of the work performed or reference to data, including revision level, acceptable to the administrator?   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2) The date of completion of the work performed?  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3) The name of the person performing the work?  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4) The name of the person inspecting the work?  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5) The signature, certificate number of the person returning the article to service?  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |



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P. Are all test and inspection records in work package?

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Q. Does the vendor's return-to-service document meet customer and FAA requirements?

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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R. Does the vendor's record keeping system and retention time meet 14 CFR requirements?

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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**14. Shipping**

Yes	No	N/A
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A. Are components returned in an appropriate shipping container or as specified by the customer?

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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B. Does the vendor verify that the identifying data (P/N, S/N, nomenclature, mod. no.) on the documentation and the data plate match?

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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**15 Scrapped Parts Program**

Yes	No	N/A
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A. Are components returned in an appropriate shipping container or as specified by the customer?

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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B. Does the vendor verify that the identifying data (P/N, S/N, nomenclature, mod. no.) on the documentation and the data plate match?

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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C. Does the record include the P/N, S/N, and date of the scrapped part?

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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**I certify to the best of my knowledge the information supplied is accurate, complete, and current.**

*Rodrigo X. Encalada*

**Director of Quality**

**AEG Group**