



## Self Audit Form

Company Name
Address
Telephone No.
Fax No.
Email Address
Person to Contact & Title
Total Number of Employees
Number of Direct Production Employees
Number of Inspectors
Number of Supervisors
Organizational Head Name:
Title:
Quality Manager Name:
Title:
Who does the Quality Manager report to? Name:
Title:

## No answers explained on last page

### A. Certification

	Questions	Yes	No	N/A
1.	Do you hold an FAA repair station certificate?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Record certificate number:			
3.	Please provide a copy of certificate and limitations.			
4.	Is the certificate available on the premises for inspection by the public and the FAA?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### B. Antidrug and Alcohol Misuse Prevention Program (ADAMPP)

	Questions	Yes	No	N/A
1.	Do you have an FAA approved anti-drug testing plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Record plan number:			
3.	The plan is:	<input type="checkbox"/> The vendor's <input type="checkbox"/> A consortium's <input type="checkbox"/> An air carrier's		
4.	Please provide a copy of FAA approval letter or Page A449 from FAA CRS specifications. <b>REQUIRED</b>			
5.	Please choose one of the following: <input type="checkbox"/> No work is subcontracted. <input type="checkbox"/> All subcontractors have a FAA approved ADAMPP and have provided written documentation to us as required.			

### C. General

	Questions	Yes	No	N/A
1.	Do you only perform work for which you are authorized on your operations specifications?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Do you do work for an FAR 121 carrier?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2a.	(if yes) Do you comply with FAR 121.377 Work Cycle Limits?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Do you have an approved Training Program? And does it meet requirements under FAR 121.375 <input type="checkbox"/> or FAR 145.163 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	If you deal in non-aircraft parts, materials, and/or maintenance activities, are they adequately segregated from the aircraft functions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Please provide a copy of your warranty/return policy. Copy attached	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### D. Quality Control

	Questions	Yes	No	N/A
1.	Is there an established Quality Control Program?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	The Quality Control System is derived from one of the following systems: <input type="checkbox"/> -MIL-Q-9858 <input type="checkbox"/> -MIL-I-45208 <input type="checkbox"/> -FAR 21 <input type="checkbox"/> -FAR 145 <input type="checkbox"/> -EASA <input type="checkbox"/> -ISO 9001/AS 9100 <input type="checkbox"/> -C.A.S.E. <input type="checkbox"/> -Other, specify			
3.	Does manual detail duties, responsibilities and reporting relationship of the QA/QC department?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Does the QA/QC department maintain an up-to-date signature roster?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Do your return-to-service documents meet FAA requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Does QA/QC function ensure compliance with customer specifications.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Do you have a method of controlling quality of sub-contractor work?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	Do you have an audit and surveillance program to ensure sub-contractor quality?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	Does the audit program assure appropriate corrective action?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	Is there proper separation of inspection and maintenance responsibilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.	Do supervisors, inspectors, & mechanics have A&P or Repairman certificates?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12	Do you have an established procedure to provide corrective action for discrepancies noted during repair/overhaul?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13	Do you maintain an approved vendor list?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**E. Inspection**

	<b>Questions</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
1.	Are inspectors properly trained and certified?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Do you maintain a list of items each inspector is authorized to inspect?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Do you perform any required inspections (RII) for any customers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Does inspection roster identify RII qualified/certified inspectors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Do you have an established receiving inspection system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Do you have an acceptable procedure to identify customer's parts?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Do you maintain traceability certification?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	Do you have an approved vendor list?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	Do you obtain certification on all raw materials received?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	Are acceptable sampling procedures adequate to ensure quality?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**F. Technical Data Control**

NOTE: For the purpose of the following questions "Manuals" includes any technical data, i.e. drawings, overhaul manuals, service bulletin, wiring diagrams, test specs., necessary to perform the required service.

	<b>Questions</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
1.	Do you have the required shop manuals and specifications to perform the repair/overhaul in accordance with customer manufacturer's requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Are there established approved procedures controlling revisions in manuals deviating from OEM specifications? i.e. EO or EA.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Do you have an acceptable revision service?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Do you have records of manual revisions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Are manual revisions up-to-date?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Are component overhaul manuals properly identified and available to mechanics?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Do you have a system to control working copies of manuals to ensure they are revised with the masters?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	Is technical data stored in a manner that will protect it from dirt & damage?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	Are adequate viewing devices in good condition available for viewing the technical data?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	Do you maintain a file of applicable FAA regulations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.	Please list FAR Parts you maintain.			
12.	Do you receive and maintain FAA Airworthiness Directives for large aircraft on a subscription basis?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13.	Are inspection manuals controlled to provide current inspection procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14.	Did a sample audit of the manuals show they are up-to-date?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15.	Is a specific individual responsible for the Technical Data Program?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

G. Shelf Life Program

	Questions	Yes	No	N/A
1.	Do you have a documented shelf life program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Does the program list parts, materials and applicable shelf life limits?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Does the program assign program responsibility to a specific person/position?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Is there an adequate system to assure that no item will be issued or used past its expiration date?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Were items sampled for shelf life within limits?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

H. Tool & Test Equipment Calibration

	Questions	Yes	No	N/A
1.	Do you have a tool calibration program?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Do you have a person responsible for the tool calibration program?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Is there a backup person responsible for the program when the primary individual is out?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Are all tools in use that require calibration listed on the tool calibration list?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Does each tool have a specified frequency when its calibration is due to be checked?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Are standards used to calibrate tools traceable to the controlling government agency, i.e. The National Institute of Standards and Technology?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Is there a system to identify each tool in the program and its calibration due date?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	Do you have a procedure for controlling/preventing out-of-service and due-for-calibration tools & equipment from being used?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	Do you have a procedure to control the calibration of personal tools?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	Did a sample check of the calibration program indicate you are monitoring for compliance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.	Are the tools & test equipment in a serviceable condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12.	Are tools stored in an orderly manner?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13.	Do records?  --Show date calibrated? --Identify individual or vendor that performed calibration or check? --Show calibration due date? --Show traceability to applicable standards	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

I. Training

	Questions	Yes	No	N/A
1.	Do you have a documented training program?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Does it include all mechanics, inspectors, technical supervisors, and sub-contractors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Is formal and OJT properly documented?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Do you maintain training records for your mechanics, inspectors & supervisors at least two years even after the person leaves the company?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Are all hazmat employees required by 49 CFR 171.8 for the repair station and its subcontractors trained as required by 49 CFR Part 172 Subpart H?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

J. Records and Reports

	Questions	Yes	No	N/A
1.	Are your work records complete, in order and legible?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Do the records contain a description of the work performed, the date the work was done, and the name of the person doing work?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Are all test and inspection records in work package?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Do records contain the name, certificate number, and type of certificate of the person certifying the part as serviceable?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Are the persons doing the repair/overhaul, inspection, and test activities authorized by your procedure manual?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Do you maintain traceability of parts and materials?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Do you maintain certification on sub-contract work?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	Does your record keeping system and retention time meet FAR requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	Do you have a procedure for reporting defects or unairworthy conditions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

K. Housing and Facilities

	Questions	Yes	No	N/A
1.	Do you have a facility of adequate size to house all necessary tooling, equipment, material, and parts to perform the work?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Does the housing adequately protect parts, materials and customer units from damage, theft, and contamination?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Is the environment appropriate to protect workers so that the quality of workmanship is not impaired by physical efficiency?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Does the facility have adequate lighting?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Are storage facilities separate from shop and work areas?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Do shipping and receiving areas have adequate space, lighting, shelving, security, and fire protection?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Is there adequate and appropriate storage space to safely store customer's shipping containers and protect them from damage?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

L. Safety/Security/Fire Protection

	Questions	Yes	No	N/A
1.	Do you have a security system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Do you provide adequate security for customer parts in your possession?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Is the security system reviewed periodically by management or an outside vendor?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Are fire protection devices inspected periodically to local fire code or fire department requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Are fire stations identified and extinguishers in serviceable condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Are fire lanes, doors, and fire extinguishers clear of obstructions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Are safety guards in place on power equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	Does your shop environmental controls meet industry standards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	Are no smoking areas clearly identified?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

M. Storage

	Questions	Yes	No	N/A
1.	Are parts and material properly identified and properly stored?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Do you have a method to separate serviceable and non-serviceable parts?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Do parts in bin match part number on bins?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Are flammable, toxic, or volatile materials properly identified and stored?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Are sensitive parts and equipment, i.e. oxygen parts, o-rings, ESD's, properly packaged, identified and stored to protect from damage and contamination?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Are oxygen and other high pressure bottles correctly identified and stored?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

N. Work Processing

	Questions	Yes	No	N/A
1.	Do you have adequate tooling and test equipment to perform the work?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Are mechanics, inspectors, and supervisors properly trained, authorized and certificated for the work they perform?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Are adequate tools available at the mechanic's work stations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Are proper current manuals available at mechanics' work stations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Are mechanics using the manuals at the work station?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Are customers' parts properly identified throughout the maintenance actions and in storage?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Is there a work turnover procedure used?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	Does the shop segregate serviceable from unserviceable components?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	Does the facility provide adequate protection of parts in work? I.E. filtered air or clean room depending on type of part.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	Is the work area, including supervisor's offices, clean?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.	Are smoking, eating and drinking forbidden in the work area as appropriate?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12.	Are fluid dispensing cans and servicing units properly identified?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

O. Shipping

	Questions	Yes	No	N/A
1.	Are components shipped in ATA-300 containers or equivalent as specified by the OEM or the customer?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Do you verify that identifying data (PN/SN nomenclature/mod. no.) on the parts tag and the data plate match ?.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>


P. Scrapped parts

	Questions	Yes	No	N/A
1.	Do you have a documented procedure to assure that scrapped parts are either returned to the customer or mutilated beyond repair?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Does the program identify an individual responsible for verifying that mutilation is accomplished?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q. Explanations (Use a separate sheet if necessary)

I hereby certify that to the best of my knowledge the information supplied is accurate, complete and current and that I am an official of the supplier who is duly authorized to sign this certification. I also understand that in accordance with FAA regulations, suppliers/vendors are hereby subject to FAA surveillance and investigation. A "Right of Entry" clause is in effect for all purchase orders/ contracts. This provision shall allow for customer and regulatory agencies to determine and verify the quality of work, records and material at any place, including the plant of any applicable sub-contractor.

Questionnaire completed by:

  
\_\_\_\_\_  
Name/(Signature)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

Supplier  Approved  Disapproved \_\_\_\_\_ Date

Reviewed by: \_\_\_\_\_

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Authorized signature