|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Company information:** | | | | | | | | | |
| Company Name: | | | | | | | | | |
| Address: | | | | | | City: | | | |
| State: | Zip: | | | Phone: | | | | | Fax: |
|  | | | | | | | | | |
| **List contact names for the following positions:** | | | | | | | | | |
| Quality Assurance: | | | Ph: | | | | Email: | | |
| Production: | | | Ph: | | | | Email: | | |
|  | | | | | | | | | |
| **Primary type of business: (check category that best applies)** | | | | | | | | | |
| Manufacturer  Welding/Fabrication (In-House CWI  **Yes**  **No**)  CNC Machine Shop (5-Axis Capable  **Yes**  **No**)  Raw Materials | | | | | Inspection, calibration or test lab.  Distributor  Special Processor (Heat Treat, Plating, etc.)  Other – please explain: | | | | |
| **LIST PRINCIPAL PRODUCTS, PROCESSES OR SERVICES**: | | | | | | | | | |
| 1. | | 2. | | | | | | 3. | |
| 4. | | 5. | | | | | | 6. | |
|  | | | | | | | | | |
| **Quality Management System registration:** | | | | | | | | | |
| Is you company ITAR registered?  Yes  No (If “Yes” please provide a copy of Registration)  Does the organization have a 3rd Party Registered quality management system?  Yes  No  If yes to above, specify standard(s): **ISO 9001  ISO 17025  AS9100  NADCAP  Other:**  If yes to above, do not fill out the questions on page 2 and return this page a **current copy of your certifications**.  If no to above, please complete the questions on page 2. | | | | | | | | | |

|  |  |
| --- | --- |
| **Survey Completed By:** | |
| Supplier Rep. Name: | Date: |

Return to Liberty Tool’s Quality Department via. email at [liberty@liberty-tool.com](mailto:liberty@liberty-tool.com) or fax to

586-726-1377 “Attention: Supplier Management”, include page 2 as required.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Gray area below is for Liberty Tool use only, do not complete.** | | | | |
| Item | | Impact Description | | Impact Rating for Risk |
| Product/Service | | 1 = Can be done in-house, 2 = Readily Available  3 = Few Sources, 5 = Critical Item | |  |
| Timing | | 1 = Finished Product, 2 = Partial Finished Product  4 = Will affect further production | |  |
| Quality System | | 1=3rd Party Certified, 2 = Fully Implemented  3 = Partially Implemented, 5 = None | |  |
| **Total Score (Product of Ratings) Low Risk < 100, High Risk >= 100** | | | |  |
| **Survey Reviewed By:** | | | **Date:** | |
| **Scope added to ERP:**  Yes | | | | |
|  | | | | |
| **Is your organization currently working towards registration? Expected completion**:        Yes  No | | | | | |
| **DOCUMENTATION & RECORDS** | | | | | |
| 1. Does your organization have a “document control” process that includes record retention policy/matrix?  Yes  No | | | | | |
| **CORRECTIVE/PREVENTIVE ACTION** | | | | | |
| 2. Is there a documented system for corrective and preventive action activities and control of their records?  Yes  No | | | | | |
| **TRAINING** | | | | | |
| 3. Is there a system in place to ensure that personnel receive documented training to perform their duties?  Yes  No | | | | | |
| **PURCHASING & SUPPLIERS** | | | | | |
| 4. Are quality requirements stated on your purchasing documents sent to suppliers?  Yes  No | | | | | |
| 5. Are your suppliers evaluated for quality considerations and selected on their ability to meet requirements?  Yes  No | | | | | |
| **PROCESS CONTROL** | | | | | |
| 6. Would/Are all orders from Liberty Tool reviewed for requirements that may affect quality before an order  is accepted?  Yes  No | | | | | |
| 7. Does the record system allow the identification of persons who perform or certified products/services?  Yes  No | | | | | |
| **INSPECTION & CALIBRATION** | | | | | |
| 8. Is there a documented final inspection process?  Yes  No | | | | | |
| 9. Does the organization have documented procedures for the calibration of test and measuring equipment?  Yes  No | | | | | |
| 10. Is the calibration system traceable to National Institute of Standards and Technology (NIST) requirements or  another recognized national standards body?  Yes  No | | | | | |
| **MATERIAL CONTROL (If your company is a service only provider that doesn’t provide materials check here**  **& skip 21-27. )** | | | | | |
| 21. Is there a system for obtaining and keeping certification reports for purchased material? Retained       yrs.  Yes  No | | | | | |
| 22. Is all shipped product provided with material certification / certificate of conformance?  Yes  No | | | | | |
| 23. Are there procedures for identifying product from receipt, during all stages of production and delivery?  Yes  No | | | | | |
| 24. Is the shelf life expiration displayed on each shelf life limited item?  Yes  No | | | | | |
| 25. Is nonconforming material identified and segregated to prevent unauthorized processing or mixing with  conforming materials?  Yes  No | | | | | |
| 26. Does your organization have a system for handling returns, non-conformances and corrective actions?  Yes  No | | | | | |
| 27. Does the organization have a system for the notification of suspected nonconformance after delivery?  Yes  No | | | | | |
| **SUPPLIER COMMENTS** | | | | | |
| Comments: |  | | | | |