



VENDOR APPROVAL QUESTIONNAIRE

(Aircraft Components / Spares, Maintenance Services, Consumables, Tools & Test Equipments)

1. PARTICULARS			
Company Name			
Abbreviated Name		Cage Code	
Main Facility Address			
City / Town		State / Province	
Country		Postal code	
Phone		Fax	
Email		Website	

* Kindly provide addresses of other approved locations in "ADDITIONAL NOTES" at Page-4, if applicable

2. BUSINESS CATEGORY [Please mark cross (x) on the appropriate business category (one or more)]			
Original Equipment Manufacturer (OEM)	<input type="checkbox"/>	IPC / OEM Authorized Vendor *	<input type="checkbox"/>
Maintenance Organization / Repair Station	<input type="checkbox"/>	Distributor / Supplier	<input type="checkbox"/>
Surplus Vendor	<input type="checkbox"/>	Calibration Laboratory	<input type="checkbox"/>
Airline	<input type="checkbox"/>	Other:	<input type="checkbox"/>

* Furnish reference of IPC in "ADDITIONAL NOTES" at Page-4, if applicable.

3. FOCAL CONTACTS			
Designation	Name	Phone	Email
Accountable Manager			
Quality Manager			
AOG Desk Contact			

4. NUMBER OF PERSONNEL EMPLOYED					
Production	Quality	Engineering	Certifying Staff	Other	Total

5. CERTIFICATIONS AND APPROVALS			
Aviation Regulatory Authority Approvals (FAA, EASA, CAA etc)			
Please attach copies of below-mentioned approvals for our records			
#	Granting Authority	Approval Number / Reference	Expiry Date (if any)
1			
2			
3			
4			
Other Approvals (ISO, ASA, OEM Authorization etc)			
#	Issuing Agency	Approval Number / Reference	Expiry Date (if any)
1			
2			
3			
4			

INSTRUCTION: Mark cross (☒) to applicable option given against each checklist item

6. QUALITY MANAGEMENT SYSTEMS	YES	NO	N/A
1. Does company operate an effective documented Quality Management System?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Does company periodically update the Quality System Manual?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Does company have Internal Quality Audit System as integral part of Quality Management System?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Does company conduct internal Audits on planned / documented basis?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Does company document corrective actions to eliminate recurring nonconformance issues?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Does company carry out Management Review for the Quality Management System on a regular basis?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Does company audit and review the effectiveness of the Quality Management System on a regular basis?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Does company ensure availability of documented procedures and instructions to all personnel?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Does company notify the customer of any change with procedure, processes and manufacturing systems affecting product design or order requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Reference to the Quality Manual / Maintenance Organization Exposition: _____

7. DOCUMENT & RECORDS	YES	NO	N/A
1. Does company maintain and record traceability on all services or products sold?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Does company provide following forms as applicable?			
i. EASA Form-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ii. FAA 8130-3 Form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iii. Certificate of Conformance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Does the company's work documentation cover the work accomplished, test procedures and inspections?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Does company ensure that records contain corrective action(s) and the name of the person doing the work?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Does company provide Test and inspection records for the part/component supplied?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Does company record all details of work carried out?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Does company ensure protection of records against damage, alteration, deterioration or loss?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. What is the retention period for Maintenance record? _____			

Reference to the Quality Manual / Maintenance Organization Exposition: _____

8. APPROVED DATA	YES	NO	N/A
1. Does company ensure that only the latest revisions of the following manuals are used?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Airworthiness Directives / Service Bulletins	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ii. Manufacturers Maintenance Manuals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iii. Component Maintenance Manuals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iv. Repair Manuals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v. Illustrated Parts Catalogue / Illustrated Parts List	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
vi. Applicable Non-Destructive Testing procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Reference to the Quality Manual / Maintenance Organization Exposition: _____

9. HUMAN RESOURCE & TRAINING	YES	NO	N/A
1. Does company have a system of initial/continuation training for employed personnel according to their job role?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Does company maintain and update employee training records on regular basis?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Does company ensure that training program incorporates Organizational Procedure, Human Factor and Aviation Legislation training for all personnel (initial and updates)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Does company have up-to-date Manpower Plan which is reviewed for applicability and appropriateness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Reference to the Quality Manual / Maintenance Organization Exposition: _____

10. CERTIFYING STAFF	YES	NO	N/A
1. Does company have a list of certifying staff maintained and updated regularly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Does company have documented procedure for personnel competence assessment specially for certifying staff?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Does company have a continuation training program for all maintenance personnel including certifying staff (at interval as per Approved Procedure but not exceeding 36 months)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Reference to the Quality Manual / Maintenance Organization Exposition: _____

11. SUPPLIER / MATERIAL CONTROL	YES	NO	N/A
1. Does company maintain a list of approved suppliers and scope of such approvals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Does company ensure availability of written records of each approval assessment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Does company review supplier approvals on a regular basis?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Does company regularly review supplier performance and take corrective action where necessary?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Does company have a documented procedure to verify received materials and parts?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Does company maintain records of purchased parts by source, part number, serial number & quantity?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Does company issue Certificate of Conformity endorsed by an approved company signatory?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Reference to the Quality Manual / Maintenance Organization Exposition: _____

12. COMPONENTS / EQUIPMENT / TOOLS / MATERIAL	YES	NO	N/A
1. Does company have documented procedure for identification of Components/Equipment/ Tools/ Material?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Does company have procedure to ensure segregation between:			
i. Serviceable and Un-serviceable components	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ii. Repairable and Consumables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Does company have program / procedure for calibration and serviceability check of tools and equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Does company ensure that the reference standards used for calibration are traceable to National / International standards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Does company provide all necessary tooling and equipment to staff at work place?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Does company have procedure to control and maintain shelf life for applicable items and identify expiry date of material for the user?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Does company have a documented procedure to handle and mutilate scrapped parts that will preclude them to be returned to service?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Does company maintain records for all serialized parts that are scrapped?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Reference to the Quality Manual / Maintenance Organization Exposition: _____



Engineering & Maintenance Quality Assurance



13. FACILITY	YES	NO	N/A
1. Does company grant access of facility to customer's authorized representative when requested in advance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Does company ensure availability of facilities according to the work scope?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Does company control and maintain environmental conditions in applicable areas?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Does company assure effectiveness of storage conditions to prevent damage and deterioration of stored items?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Reference to the Quality Manual / Maintenance Organization Exposition: _____

ADDITIONAL NOTES (If any)

DECLARATION

I certify that the information given in this Vendor Approval Questionnaire is true and accurate to the best of my knowledge and I understand that false information could result in the termination of any future contract. We will notify PIA of any changes to the quality system affecting products and / or services.

Authorized Person Name		Signature & date:
Designation		